An Examination of Ethics in Social Work

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Abstract:
Ethics, according to the Oxford English Dictionary, is ‘the science of morals in human conduct’. Social work is concerned with human relationships and behavior (Shardlow 2002). Shardlow (2002) suggests that this conjunction is indicative of a duty upon social workers to understand both ethics and social work, as social work contains a terrible potential for the misuse of power. In order to investigate the importance of ethics in social work practice Bisman (2004) poses the question ‘without morality what good is the knowledge attained and skills used by social workers?’ All professionals’ occupations are grounded by values and guided by ethical codes. However, the primary focus of a profession like social work is not defining and explaining but caring and changing.

Key words: Social work; ethics; ethical dilemma

Introduction
The Irish Association of Social Workers’ code of ethics maintains that a code of ethics is important for the profession of social work as social work itself is centred on the social context of people’s lives and the right of people to make decisions for themselves. Because social work often operates on the edge of the individual’s normal functioning, or on the limits that social systems can tolerate, there can be a tension...
between the social control, social care, social justice and social change functions of social work. This tension may be resolved by a consideration of what is right or wrong; what is good or bad; or the impact on the individual’s happiness - all is determined by the service user or by reference to a professional standard. Difficulties in resolving this tension may arise where a social worker has to balance the rights and the needs of the service user, the sometimes contradictory needs and rights of others, the rights and duties owed to colleagues and other professionals and the limited resources available.

**Theoretical Approach**

The theoretical approach adopted in this research was interpretivism. An interpretivist perspective places a strong emphasis on the meaning of social life and holds the belief that a scientist’s mode of analysis and exploration is not concerned with uncovering those meanings. Interpretivist researchers analyse the meanings people confer upon their own and other’s actions. Seale (1998) points out that the interpretive social scientist rejects the scientific model because they believe that the nature of human social life is not appropriately grasped by scientific methods. Social research then involves interpretation and social life cannot be reduced to explanation in terms of laws. This approach is highly relevant in analysing ethics in social work because there is no essentially ‘right’ or ‘wrong’ way of interpreting a situation or the ethics involved in decision-making. Instead it is based on how one views the situation, interprets what is happening and what precedence one attaches to conflicting needs and rights. In addition, methods of empirical inquiry and research cannot answer many of the questions that confront practitioners (Reamer 1983). Although social workers have a code of ethics to follow, no two social workers will view their work in the same way, and consequently, neither will view any ethical dilemmas they encounter in the same way.

**Methodology**

My primary research method was an overall review of the literature on ethics in social work practice. 'This involves a secondary analysis of available information already published in some form', (Sarantakos 1997:129). I studied ethics in social work with
the aim of collecting information about the primacy of ethics in social work, professional and personal ethics and ethical dilemmas in social work practice. This increased my familiarity with the topic and enabled me to review published works on ethics in social work practice. I carried out a review of the literature available on ethics in social work by consulting written texts, journal articles and electronic journal articles. In addition to this I considered previous research in the topic for example McAuliffe (2005) and linked this with my planned areas of study (Sarantakos 1997).

The literature studied in relation to ethics in social work formed the foundation for this research and refines what is already known about the topic. However, there are some limitations to my chosen method of research as there is a dearth of research on the topic of ethics in social work within the Irish context.

The secondary research method I used was semi-structured interviews with social work professionals. This is a method of qualitative research which varies markedly in its theoretical framework, structure, process and orientation from those employed in quantitative methodology (Sarantakos 1997). It has distinguishing characteristics where the interviewer uses only open-ended questions: these are predominately single interviews, questioning one person at a time. The question structure is not fixed or rigid, allowing change of question order and even the addition of new questions if the interviewer feels it is appropriate (Sarantakos 1997).

This method was most suitable to my research because it allowed greater freedom in presenting the research questions, changing wording and order and adjusting the interview so that it met the goals of this study on ethics in social work. I interviewed a varied group of social work professionals from the probation service, child protection and adoption. I also interviewed a social work student who had completed a placement in child protection in Ireland and a placement within a hospital in South Africa. I included this participant in order to gain a cultural understanding of ethics from the Irish context and also from a developing country and to note any significant differences.
Some advantages of this interview method include, extensive opportunities for response, clarifying or probing. They also allow the researcher to achieve insight into their topic. Also it was partly interviewer-led and partly informant-led so an interviewee may introduce a topic previously not thought of by the researcher, but which might prove useful to the research.

However, some of the limitations of semi-structured interviews include limited validity and bias from the interviewer. It can also be time consuming and analysis can be difficult especially when an interview is in semi-structured form (Sarantakos 1997).

**Personal and Professional Ethics**

Social workers are people as well as social workers and have personal views of the social world and relationships and how they think these ought to be. As Leighton (1985) rightly points out, the presumption that some personal views will, or should be, shared by some other social workers or in a code of ethics by all other social workers, needs examination.

At the core of the ethical difference between personal and professional ethics is the view that in a professional relationship the purpose of assisting the client is primary and effectiveness should determine the choice of relationship entered into. In contrast to this in a personal relationship the idea of using people, oneself or others in the pursuit of some ulterior objective does not meet with the approval of what a friendship or intimate relationship should be based upon. Therefore Leighton (1985) highlights that a professional relationship is purposeful while a personal relationship is generally regarded as being of a higher quality as it is more voluntary in nature. If the separation of the personal and professional is accepted, there is associated with it a difference of power or authority between the person who defines him/herself as the client and the person designated as the ‘social worker’. The relationship between personal and professional ethics is probably more complex for social workers than for members of any other profession. Less protected by office formality and restricted access than doctors, accountants and lawyers, the social worker builds expertise upon relationships with other people and this thrusts personal involvement into the middle of the arena of
professional interaction. Leighton (1985) points out that involvement is so close between the personal and professional values systems that there are some who argue or assume that what is appropriate in the personal world is appropriate in the professional world and discourage any separation or differentiation between them. Leighton (1985) cites Paul Halmos (1978) who believes that in order to justify personal intervention, individuals must enter into and partake in empathetic and genuine relationships.

Rather than continuing an unending and irresolvable debate about whose worldview captures the ‘truth’, which then should be imposed on clients, Spano & Koenig 2007 argue for the insertion of the social work Code of Ethics as a screen through which competing worldviews must be drawn to create constraints on professionals’ behaviour. The social work profession’s long history of acknowledging the central role ethics play in professional practice is carefully documented by Reamer (1998), who traces early twentieth century efforts to develop, revise, and update codes of ethics to reflect emerging practice issues.

What the Code of Ethics provides is not a set of final answers regarding what is ultimately ‘right’ or ‘wrong’. It represents an agreed upon framework within which social workers are expected to formulate their actions in their professional roles (Spano & Koenig 2007).

**Ethical Dilemmas**

According to Reamer (1983) the ethical dilemmas that social workers encounter in practice can be placed into three broad categories: direct service to individuals; design and implementation of social welfare policy and programmes; and relationships among professional colleagues. Examples of ethical issues that social workers face in direct practice involve truth-telling in relationships with clients, conflicts between a law, rule or policy and treatment goals, conflicts between social workers obligations to their clients and to their employers, confidentiality and privileged communication, terminating services against a client’s wishes and providing services against a client’s wishes. Many cases occur for example where a social worker must decide whether to
tell a client the truth. Reamer (1983) gives the following example, if relatives do not want to tell a dying patient of their impending death, is it permissible for a hospital social worker to lie or bend the truth when the patient asks for a frank report of their prognosis? Dilemmas involving the use of deception take other forms as well. On occasions practitioners must choose between obeying a law, rule or policy and pursuing certain treatment goals. Some believe that laws are always to be obeyed while it can also be argued that a law can be disregarded if doing so will result in the greater good.

At times social workers may be forced to choose between acting in accordance with a client’s best interests and obeying a formal rule or policy. For example Reamer (1983) notes that recently a chief of neurosurgery asked a hospital social worker to persuade the mother of a dying patient to grant permission to discontinue use of a respirator. The patient was extremely disabled and the physician did not believe it was right to spend so much money keeping a patient alive with such a poor prognosis when the money could be used to keep other patients alive with a better quality of life. The neurosurgeon argued that the social worker as a hospital employee had a responsibility to represent the opinion of the medical staff and that she should try to encourage the mother to change her mind. Was the social worker’s primary obligation to represent the wishes of the medical staff or was her primary responsibility to advocate on behalf of the mother of the dying patient? (Reamer 1983).

Other types of ethical dilemmas which social workers may encounter in providing services to individuals and families are decisions to terminate services against a client’s wishes and to provide services against client’s wishes. Practitioners may terminate services for a variety of reasons. Clients may not be benefiting from the services offered or may not be co-operating with a treatment plan. In some instances services that are in short supply are terminated for a particular client because they are thought to be more necessary for someone else. Services imposed on clients against their wishes need to be provided for one of two reasons. Firstly they may be imposed to comply with a law or agency policy. For example a probation officer may require that a client participate in counselling sessions or a vocational training programme. Secondly social
workers sometimes attempt to impose services on individuals who appear to be in danger of harming themselves or others.

Reamer (1983) rightly points out social workers frequently must make decisions about how to distribute limited or scarce resources, including funds, equipment, personnel and time. Historically the most common criteria for distributing limited resources have been the principles of equality, need, contribution and compensation. The principle of equality can be interpreted to mean that all recipients acquire equal shares of resources. Alternatively the principle of equality has been interpreted to mean equality of opportunity whereby resources and or services are made available on a first come first served basis. Which interpretation is used is an ethical question.

The third type of dilemma faced by social workers can come in the form of problems that arise during the course of social worker’s relationships with one another and with other professionals. In general these dilemmas involve the extent of social workers’ obligations to report incompetence or wrongdoing of professional colleagues and the use of deception in relationships among colleagues. When social workers become aware of wrongdoing by colleagues, they must make difficult decisions about the extent of their obligation to report it to supervisors or other authorities (Reamer 1983). Is it permissible to ignore certain instances of wrong-doing and not others? It is likely that every practitioner will, at some point during their career, have to decide where to draw the line between acts of wrong doing or incompetence that call for full scale ‘whistleblowing’. How does a practitioner make that decision?

This leads me on to looking at resolutions for ethical dilemmas and what has been written around this. Reamer (1983) writes that one manner in which to help social workers address ethical dilemmas is in the cases of conflict certain values take precedence over others. This begs the challenge for social workers to begin to derive guidelines with which to assess ethical dilemmas.

Hartsell (2006) proposes that a small set of elements constitutes the context in which
ethical decisions are made. These three elements are life, choice, and relationship. Only the living can make ethical decisions, so life is a necessary part of the context. Ethical decisions involve choices about behaviours in relationships with other people. Therefore choice and relationship are also essential elements of the context (Hartsell 2006). Together, life, choice, and relationship form the context in which an ethical decision is made, and they therefore provide the values necessary for an ethical decision. While it is tempting to arrange these three elements in hierarchical order, Hartsell (2006) proposes that doing so is artificial, unnecessary, and counterproductive. Further, since all three are necessary for ethical decision-making, elimination of any one removes the possibility of an ethical decision.

Hartsell (2006) rejects the argument for a hierarchy of values in order to resolve ethical dilemmas on the grounds that all three elements he has proposed are necessary for an ethical dilemma to exist and that arranging them hierarchically introduces as many problems as it solves. For example, asserting that life is the most important provides no guidance when one must choose between lives, and it would allow third parties to make life-or-death choices for others. Hartsell (2006) submits that these three contextual elements constitute the heart of ethical dilemmas and that only by treating all three as necessary and equal parts of the context can we develop a system to guide practitioners.

Now it is necessary to explain how choices may be ethically made. The nature of the relationship determines what is ethical, and the nature of the relationship may be properly determined only by open, voluntary negotiation. This open, voluntary negotiation requires truth-telling, not as its own value or ethical principle but as a necessary ingredient for free choice to be exercised. Choices made without knowledge of truth cannot be free, and choices that are not free can hardly be called choices. Openness involves honest disclosure of information, thoughts, and feelings about the issue at hand. Voluntariness involves the capacity to give or withhold consent for participation in the relationship and in the negotiation (Hartsell 2006).

Individuals may voluntarily enter into unequal relationships. When they do, the person
who has greater power must accept greater responsibility for maintaining the context: life, choice, and relationship. This is the situation for professional social workers, because the professional relationship is inherently unequal, the social worker has greater responsibility to assure that the life, the choice, and the relationship with the other are each maintained. Having said that, it is also important to say that the social worker does not give up the right to life, choice, and relationship. A social worker who determines that her life, choice, or relationship is unreasonably compromised in relationship with a client may properly renegotiate the relationship, and if necessary end the relationship, after appropriate but unsuccessful good-faith negotiations (Hartsell 2006). The contextual element of choice would require the social worker in that situation to maximize the choices of the client by exploring alternatives for service and by facilitating appropriate referrals.

Although Hartsell (2006) outlines what seems to be an approach which is easily taught understood and used it is important to note that even if we were able to completely believe in and follow social work ethical guidelines under all circumstances and held them as part of our personal morality and values, there still would be dilemmas.

Research Summary
In analysing ethics in social work practice, the focus has been on the primacy of ethics, personal and professional ethics and ethical dilemmas. The most important research finding is that no matter what area of social work one enters, the question of ethics is constantly a part of a social worker’s role.

In relation to the primacy of ethics, the conclusion drawn is that without the consideration of ethics and moral questions social work cannot exist. As Jordan (1990) highlights, moral issues haunt social work; social workers stalk moral problems. If we come across a situation containing a serious ethical dilemma – a woman choosing between her husband and her child, an older person trying to decide whether she has become too much of a burden to her family, a teenager torn between parental standards
and loyalty to delinquent friends – we immediately come up with one in which a social worker is likely to be involved. Therefore ethics is an integral part of social work.

While personal and professional ethics are inherently tangled within the social work profession it is imperative that, as professionals, social workers carry out their duties with the best interests of their client at the forefront of their decision-making and that a code of ethics is a guide for social workers upon which their actions can be based.

Findings and Analysis
For my primary research I carried out a total of five interviews, one with a social work student and the remaining with social work practitioners. I questioned them in relation to their values as social work practitioners, how important they felt ethics were to their practice, their personal and professional ethics, accountability and ethical dilemmas. Important values to those practitioners I interviewed varied but all still came under the umbrella of social justice. The interview findings highlight how important social work practitioners feel that ethics are to their practice, regardless of the area of social work in which they work. The respondents each highlighted how their professional ethics come before any personal ethics within their practice, although they reported that more often than not their personal and professional ethics are quite similar and it was only occasionally that these were in conflict. This research also examined a new emphasis on accountability within the social work profession and how this has impacted not so much on ethics but on social work as a whole. Ethical dilemmas were the last feature of the interviews. I questioned the respondents both in relation to the types of dilemmas that they encounter within practice, which substantiated the literature I had researched, as well as how they overcome these dilemmas. The interviewees all gave similar answers to this, citing supervision and discussion with peers as useful tools.

Implications for Practice
The key research finding has been that it is due to the very nature of the profession of social work that a code of ethics is necessary. It is clear to me now that no matter what area of social work I enter ethics will always be a part of my role. As Clark (2000)
argues, social work enters into sensitive areas of people’s emotional and family lives where conflicts of interest are potentially never far away. In any family the motives and rights of one member are liable to be at odds with another’s. Where a family seeks or is thought to require, social work intervention, tensions are the rule rather than the exception (Clark 2000). In child care and protection the right of the child to safety and to a good upbringing may cut across the parent’s right to bring up there child as they see fit: there is a conflict of interest between family members. Similarly the wishes of an infirm or disabled person to be cared for at home may impinge heavily on the opportunities and freedoms of the family members implicated in caring (Clark 2000). Such vital interests are not easily given up, neither is it easy to find constructive solutions that enhance everyone’s situation yet that is the position in which social workers are regularly put (Clark 2000).

This research also suggests that ethics are important for every practitioner and that there is learning in questioning policies or court directives or ways of working with clients because this is such individualised work and often the tools used are personal skills. This was highlighted by the differing values that my interviewees considered important to their practice. The new accountability I have discussed is an aspect of social work that I feel will have implications for my practice both in providing a better service to clients but also contributing to the increasing bureaucratization of social work. It is important to realize that ethical dilemmas are a part of social work practice but that there are many accessible of ways of addressing them. Supervision and peer support was reported by all my respondents as a good support to them in their practice. This is something I will take on board for my own practice.

The holistic and broad approach that social work involves is unique. Perhaps more than any of the human service occupations, a social worker undertakes to consider clients’ lives as a whole. In developed societies, needs, and the expertise to meet them, are segmented (Clark 2000). The doctor is not expected to take on the role of marital counsellor, the lawyer is not a dietician, the housing manager is not an occupational therapist, and the financial advisor is not a child psychologist. Yet as Clark (2000)
points out people who seek or who are required to receive social work commonly do present a complex of interwoven problems such as health, family relationships, housing, legal and financial matters. Social workers are very committed to a holistic perspective on human needs. Although it is much threatened, social work would be misguided to relinquish this perspective, since specialization and fragmentation of professional helping can easily lead to missing the individuality of people’s lives in the busy concern to complete specialist tasks (Clark 2000). Clark (2000) emphasizes that social work’s broad perspective makes inescapable wider questions of values and ways of life that narrow specialists can afford to and rightly should disregard (Clark 2000).

Conclusion
This research has illustrated that not only are social workers involved in client’s moral dilemmas but that social workers also face moral choices of their own. If moral issues are so central to social work, it would seem equally obvious that they should be a major topic in training. Jordan (1990) asserts that although social workers readily acknowledge that their work has moral implications, they seem to seldom draw on academic theory for guidance, and instead appear to make judgments in a way that is either intuitive or else relies on a humbler rule of thumb. Perhaps more attention should be given to ethics within social work training considering its implications for practice.
Bibliography


[www.iasw.ie](http://www.iasw.ie) Irish Association of Social Workers