Accounting for ethical difficulties in social welfare work:
issues, problems and dilemmas

Sarah Banks and Robin Williams

Revised paper submitted to the British Journal of Social Work

June 2004, corrected 18.09.04

8773 words (including title page, summary, bibliography and extracts from interviews)

Key words: ethics, professional practice, dilemmas, accounts

Sarah Banks is Reader and Robin Williams is Senior Lecturer in the School of Applied Social Sciences at the University of Durham. E-mail:
s.j.banks@durham.ac.uk; robin.williams@durham.ac.uk
Accounting for ethical difficulties in social welfare work: issues, problems and dilemmas

Summary

This paper is a preliminary exploration of social welfare practitioners’ accounts of ‘ethically difficult situations’. It describes variations in the ethical vocabulary and form of these accounts. Analysis of practitioners’ own accounts (as opposed to ‘textbook’ cases) draws attention to the ways they construct events, actions and qualities of character as ethically significant and highlights the qualitative distinctiveness of ethical dilemmas, where seemingly irresolvable choices leave a residue of moral loss, regret or guilt.

Ethics and ethical difficulties in professional life

The subject matter of ethics is generally regarded as being about how human beings treat each other and their environment – what actions are regarded as right or wrong and what traits of character are good or bad. The central questions in ethics are normative ones relating to: ‘what should I/we do?’ or ‘how should I/we live?’ Professional ethics covers topics relating to how professionals should act in relation to service users and others (such as how much autonomy they should have or give or how to distribute their resources of time and money) and what kinds of people professionals ought to be (honest, trustworthy, reliable, compassionate). There is obviously a difference between how moral philosophers talk when they are doing ethics and how we talk about ethics and ethical topics in everyday life. But the two are related, and in the field of professional ethics, the academic literature and practice guidance both draw on concepts and theories in moral philosophy and feed into their usage and development by moral philosophers – although this relationship is not unproblematic (see Banks, 2004, ch. 3).

Textbooks on professional ethics in the health and welfare field regularly include sections on what we term ‘ethically difficult situations’. These often take the form of ethical problems or dilemmas presented as ‘cases’ written up by the textbook author
and analysed through the application of explicit ethical theories, principles or concepts. This is the case with one of our own textbooks and many others (see Banks, 2001, pp. 160-185; Bond, 2000, pp. 223-236; Jones, 1994, pp. 35-119; Seedhouse & Lovett, 1992, pp. 33-128). Such cases may be real or imagined, or a mixture of both. What is described and how it is described are necessarily subject to authorial judgements of the intelligibility and adequacy of such representations for the pedagogic task at hand. In other words, even when such cases are offered as descriptions of factual instances, it is impossible to separate the point of view of the writer from the ‘substantive configuration of values, meanings, discourses, or social contexts assigned to a case ‘ (Lynch and Bogen, 1996, p. 270). Cases are analysed by the author, or presented for analysis by the reader, as vehicles for the identification, discussion and/or promulgation of general principles and rules derived from ethical theory. Authors often assume that such general principles can be applied by any informed agent, resulting in a justified and determinate judgement about what to do in this or in imaginably ‘similar’ situations. When these ethics cases are designed to be used in support of teaching they are often formulated as narratives which present the emergence of a ‘problem’ (a situation where a difficult decision has to be made) or a ‘dilemma’ (a choice between two equally unwelcome alternatives) relating to professional interventions in matters of human welfare. Here the story endings may be unfinished so that the reader is invited to bring closure through a consideration of: ‘what ought the practitioner do in this and other such cases?’ (Banks & Nyboe, 2003; Chambers, 1997).

This paper takes a different starting point, namely, a consideration of accounts given by social welfare professionals when asked by researchers to talk about ethical dilemmas and problems they have directly met in the course of their work. Unsurprisingly, such accounts do not exhibit the exactitude of textbook cases in their specification of the nature of moral judgements and evaluations (responses to the question: ‘what ought I to do?’; or ‘is this just, fair, good?’). However, they will not be treated here as colloquial – and imperfect - attempts at such exactitude, but instead examined for the ways in which they exhibit details of the conceptual vocabulary of practitioners as moral agents, their constructions of relevant organisational contexts of actions, their attributions and avowals of professional and moral identity or integrity, and the nature of their reflections on actions, reasons, motives and emotions. It is our
argument that attention to such mundane details are necessary elements of any adequate interrogation of the ethics of social welfare practice. Rather than invoking an ironic contrast between practitioners’ and philosophers’ accounts of the nature of moral matters, we prefer to approach practitioners’ accounts as exemplifications of what is ethically relevant, demonstrable and plausible to them as they seek to describe and offer judgements of actions and events that they have encountered in the course of their work lives.

Their descriptions and evaluations rely on and exemplify a stock of knowledge about what kinds of events, actions, people, institutional arrangements and motivations routinely – and exceptionally – recur in the course of professional social welfare work. This knowledge is derived from a number of sources, including formal training, informal socialisation and the accumulation of lived experience in relevant organisational settings. It can be characterised best as ‘vernacular’ knowledge insofar as it is indigenous to its group of users. It is what Geertz (1973) calls ‘local knowledge’ and Garfinkel (2002) refers to as ‘autochthonous’. This vernacular knowledge is part of the same setting in which participants are located, as well as being used by them to account for the setting. In this paper we try to treat this knowledge as an explicit topic for our descriptive inquiries into what is accountable as an ethical issue for social welfare practitioners.

It is important to stress that the research described here was not an ethnographic study of how practitioners interact with one another in the course of their everyday practice and the data presented are not field notes or recordings of witnessed events or conversations. Rather, the article examines a series of retrospective accounts of ethically difficult situations solicited by one of the authors during the course of an empirical investigation. These situated accounts necessarily are versions constructed for a specific occasion and recipient (the interviewer asking for reports of ethical problems), and they are not presented or analysed here as unproblematic reflections of ‘what really happened’. Like all such retrospections, their formulation is at least partly determined by the situation of their production – in this case a research interview rather than an office conversation or a disciplinary hearing (Banks, 2002; Buttny, 1993; Heritage, 1983). Nevertheless, the construction of such accounts as intersubjectively intelligible instances of naturally occurring ethical difficulties
necessarily draws on and exemplifies the stock of conventionally available and collectively recognised logical and discursive resources that make up the *lingua franca* of social welfare work.

**The interviews and approach to analysis**

In the course of 32 individual interviews with practitioners working in the social welfare field (social, youth and community work), interviewees were asked to give examples of ethical dilemmas or problems experienced in their practice. The interviews were semi-structured and centred around respondents’ views on the ethical implications of the changing nature of professional practice. This aspect of the research has been written up in Banks (2004). At the end of the interviews respondents were also asked to describe any ethical problems or dilemmas arising in their work generally. It is these accounts that form the basis of this paper.

The interviewees were relatively experienced practitioners in social work, youth and community work. They included team managers and senior practitioners in local authority social services departments working in a variety of fields; youth and community workers in local authorities, partnerships and voluntary sector organisations; and community development practitioners and managers working in voluntary sector, local authority and inter-agency regeneration settings. Interviewees were selected through making requests to organisations for staff willing to discuss issues, and through existing contacts.

The accounts given by the interviewees varied in both their content and form. This was inevitable, as we asked a fairly open-ended question, along the lines of: ‘What ethical dilemmas or problems do you face in your work?’ We deliberately did not define ‘ethical dilemma or problem’ because this might cause people to try to ensure that their account fitted the prescribed category. We referred to ‘dilemmas or problems’ in order to broaden the possibilities of what people felt they could talk about. If respondents then sought further clarification of what we were looking for, the interviewer would widen the description even further, to help them feel they could connect it with their experience. For example, in an interview with a youth worker the interviewer elaborated as follows: ‘So thinking of ethical dilemmas, ethical problems
for you … I mean, it’s difficult to say what is an ethical issue, it doesn’t really matter, it’s something where you hesitate, or you feel it’s problematic’.

The interviews were transcribed and then examined using the computer assisted qualitative data analysis package **NVivo** (Bazeley & Richards, 2000; Gibbs, 2002). Although this package is very amenable to the use of a grounded theory approach to data analysis (Strauss & Corbin, 1990), the kind of analysis offered here is a more generic form of preliminary qualitative analysis the aim of which is to uncover discursive themes and issues that recur within and across participants’ accounts in order to subject them to more detailed study. Preliminary reviews of the transcripts focused on the types of substantive issues that practitioners reported as ethically difficult, which included issues relating to how much choice service users should exercise, the rationing of time and resources and maintaining professional integrity, for example (see Banks and Williams, 2004 for a more detailed discussion). The analysis also served to draw attention to the variations in vocabulary and concepts used by the practitioners to recount their ethical difficulties. This included, but was not limited to, their explicit formulations of what any competent professional would recognise as ‘ethics talk’ – for example, when and how they made reference to rights, responsibilities or ‘moral’ qualities of character. It also became apparent that the form of the accounts was very varied, in particular the ways in which the tellers featured as moral agents.

This led us to differentiate the accounts according to whether they seemed to be about ethical issues, problems or dilemmas (this is elaborated upon in the next section). It should be noted that our methodology for the accomplishment of this analysis claims no special foundational epistemological status. Our identification and description of common themes, our explication of commonsense reasoning and our clarification of assertions about organisational contexts all necessarily rely on ‘native intuition, vernacular categories and commonsense judgements...an immense and varied set of competences that "we" already have available but that are amenable to further instruction and explication’ (Lynch, 1993, p. 305). Others have attempted to develop more formal analytical methods which aim to reduce these competences to generalised structures of reasoning and interaction (see especially Sacks, 1992), and there is a small body of studies which have already applied these methods to aspects
(including ‘moral’ aspects) of social welfare practice (for examples see: Gunnarsson, Linell and Nordberg, 1997; Hall, Juhila, Parton and Pöösö, 2003; Jokinen, Julila and Pöösö, 1999; Saranji and Roberts, 1999; Taylor & White, 2000; White and Stancombe, 2003). However the analysis in this paper differs from these in its commitment to a ‘deliberately underbuilt methodology’ (Lynch, 1993, p. 310) to support our descriptions of the understandings of ethical and organisational issues embedded in transcribed accounts. Rather than attempt further to develop or apply a catalogue of structural elements and rules for their combination, our concern is to preserve the local relevances of participants’ accounts in and through a description of their concrete details. In this short paper we merely make a start on this process.

Our own descriptions were inevitably informed by our knowledge of theories and concepts from the literature of moral philosophy and professional ethics. One of us (Banks, 2004) has previously written about theoretical approaches to ethics based on duty, utility, rights, the development of moral character, the importance of particular relationships, care and moral sensitivity, all of which have relevance in recognising and analysing ethical assertions. Our analytical stance does not necessitate the abandonment of such prior knowledge, but only its suspension so that it is not used to characterise what participants say as instances of one or another formal theoretical assertions about relevant professional themes.

How practitioners describe ethically difficult situations

In this section of the paper we will specifically consider some of the discursive resources used by practitioners to make ethically difficult situations accountable to the interviewer. These resources comprise a set of detailed vocabularies as well as a set of overall forms within which these detailed vocabularies are expressed. We begin by describing some matters of detail before going on to discuss the overall forms used by respondents to provide a structural narrative for their accounts.

The use of ‘ethics talk’

In some accounts given by practitioners ethical content was explicitly articulated by direct reference to conventionally recognizable ethical principles or concepts such as
rights’, ‘fairness’ or ‘respect’, for example. Some practitioners very confidently engaged immediately in recognizable ‘ethics talk’ as soon as they were asked for an ethical dilemma or problem, and some did not. Some respondents also gave reasons or justifications for their actions couched in ethical terms. Accounts can be divided into those that are:

- **Articulated explicitly in ‘ethical’ language** – for example, using terms generally associated with ‘ethics talk’, like: ‘fairness’, ‘rights’, ‘choice’, ‘confidentiality’ or ‘honesty’. For instance, a regeneration manager framed his dilemma in terms of a choice between some residents’ wishes for a new community building and the long-term sustainability of the community and area as a whole. He justified his actions using language that referred to recognisable community development values, such as the good of the wider community and sustainability.

- **Articulated without the use of specialist ethical terminology, but drawing on the practical intelligibility of moral standards and accountability** – for example, a social worker described a situation that involved her breaking a promise and not respecting a service user, but without actually using the terms ‘promise’ or ‘respect’.

**Referring to emotions**

Although the traditional ‘impartial, detached’ model of ethics expounded by some moral philosophers gives primacy to logical and reasoned argument, increasingly this view of ethics is being challenged as too limited and unable to do justice to our ethical evaluations and decision-making in everyday life (see Banks 2004, ch. 3, for a more detailed discussion). Emotions, empathy, sensitivity and commitments to particular people also have a significant role to play (see Nussbaum, 2001; Oakley, 1992; Stocker with Hegeman, 1996; Vetlesen, 1994). We were interested, therefore, to examine what reference was made to emotions in these practitioners’ accounts.

In looking at the accounts we were given of ethically difficult situations, some make direct reference to the emotions of the interviewee, such as embarrassment, frustration or anger. Quite often, however, mention is not made explicitly to the emotions
involved. In these cases the style of some of the accounts is distanced, cool and ‘rational’, while others give hints at the fact that the practitioner was/is upset, indignant or feels regret. Often this comes over in the tone of voice and body language as much as the actual words used. The fact that emotions are not expressed in the account does not mean they were not present in the situation, just that this is how the practitioner concerned chose to tell the story on this occasion.

**Giving form to ethical difficulty**

Given we had asked for details of ethical dilemmas or problems experienced in practice, we expected the accounts given to feature the interviewees as moral agents facing choices. However, in some cases accounts were given of ethically difficult situations that did not explicitly feature elements of choice or decision-making on the part of the narrator. In other cases, participants described situations in which they had experienced ethical difficulties in deciding what to do, while only a small proportion articulated a dilemma in its narrowest sense - a choice between two equally unwelcome alternatives, that is not easily resolvable. These three forms are characterized below.

1. **Ethical issue** - a story about situation/type of situation that has an ethical dimension, but which is not articulated as a decision-making situation for the person concerned. For example, a mental health social worker talked about a case where she was sure the drugs administered to a patient had exacerbated their illness, but it was not framed in terms of a decision or choice for her.

2. **Ethical problem** - a story about a difficult situation, where a decision had to be made, but where there was no dilemma for the person making the decision – that is, it was clear which course of action to take. For example, a social work team manager described a situation where he made a decision to respect the choice of a man with ‘significant’ alcohol problems to remain at home, despite the ‘significant’ risks to his safety and the demands of friends that he was unsafe. This practitioner felt this was clearly the only decision that could be made, even though it had undesirable consequences for others.
3. *Ethical dilemma* - a story of a decision-making situation involving a difficult choice between two equally unwelcome alternatives and it is not clear which choice will be the right one. A situation or event itself is not a dilemma, but may be construed as a dilemma by certain people. For example, the manager of a six-year neighbourhood regeneration programme gave an account of having to decide whether to support residents in their desire for a large new community centre, or to encourage the scaling down of the project, with long term sustainability in mind. The manager had agonised over this choice and felt it was a ‘no win’ situation.

Some of the ‘ethical problem’ formulations may merge into ‘dilemma’ formats. The moral philosopher Philippa Foot (2002, p. 177) offers one characterization of an ethical dilemma as a situation where there is evidence for and evidence against what an agent ought to do – and seen in this way it ‘need not be such as to put anyone in his [sic] senses into any uncertainty as to what to do’. Certainly, once a dilemma has been satisfactorily resolved, then it can be reconstructed as an ‘ethical problem’. But the distinction between ‘problems’ and ‘dilemmas’ is useful in that it focuses attention not on the difficult situation itself, but on the agent’s view of it. In resolving a dilemma, a choice is made, usually after much thought and agonizing, and one alternative is judged to be less bad/unwelcome than the other. But because the choice made still involves violating some moral requirement or principle, moral agents may nevertheless feel remorse or regret at the decision made or action taken. Some moral philosophers identify this as the ‘remainder’ or ‘residue’ left by the dilemma (see Williams, 1973, pp. 172 ff; Foot, 2002, pp. 37-58; Hursthouse, 1999, p. 44). According to Williams (1973; 1981, p. 76) resolving a dilemma (for example, whether to lie to save a life) involves a moral loss or cost (for example, in deciding to lie) even though it may be morally justifiable. While there has been some debate about whether the resolution of a dilemma inevitably involves committing a ‘wrong action’ (see Foot, 2002, for arguments against Williams), there is nevertheless agreement about the concept of the ‘remainder’ left over after a dilemma is resolved, which may entail regret (although perhaps not ‘guilt’ on Foot’s view).

Although we have talked about ‘resolution’ of dilemmas (meaning a decision is taken about what to do), some philosophers argue that there are ‘irresolvable’ or ‘tragic’
dilemmas (Hursthouse, 1999). However, it is clear that what is meant by this is not that a decision is not taken, but that the moral loss or cost (remainder) is enormous. The decision of parents about whether to authorize the separation of conjoint twins might be one such example, where it seems that either both children suffer or die without an operation, or one dies immediately post-operation, while the other may perhaps survive. This is certainly tragic, and in one sense ‘irresolvable’. But we would prefer to characterize it as ‘resolvable with remainder’.

**Accounting for ethical difficulties: some conspicuous examples**

The following extracts from transcribed interviews provide examples of the three forms of accounts described in the previous section. Each is followed by a short commentary and the underlying differences between the three forms are considered alongside differences in content in the next section of the paper. Brackets ( ) in the text indicate a significant pause in the speech; dots … indicate an omission made by the authors.

**Accounting an ethical issue**

This account came from a qualified local authority social worker working in a children and families team. Until recently her team covered child welfare only, but recently the team responsibilities have changed so that her job also includes child protection. This has resulted in child protection work taking priority over care and more general preventative work with children and families. This reflects the growing concern in social work and society generally with the prediction and prevention of child abuse (see Parton, 1998; Parton, Thorpe & Wattam, 1997) and the increasing use of procedures and assessment proformas. The ‘register’ she refers to in this account is a register of children ‘at risk’ of abuse held by the social services department.

Child on the register for a number of years, no social work involvement. Right? Sandra gets the case. Hadn’t seen a social worker for two years. Sandra had to go out and see them, very embarrassing. And it was ( ) he hadn’t had ( ) the stepfather hadn’t actually abused the girls within the family, or there was
one girl. He had when he was 18 been babysitting a 14-year old or a 13-year old, and I think he touched her up. Right? Before ( ) when he was a lot younger, and because he’d become a Schedule 1 offender, because of whatever he’d done, he was a Schedule 1 offender, he met up with this girl, who had a baby, child protection, conference, on the register, never saw a social worker again. Right? Two years later Sandra starts working for the department and has to go out and make an assessment. And it was embarrassing. And they actually ( ) I had to work with this family for six months, who didn’t want me, and who were basically saying, ’we’ve never seen anybody for two years and now you turn up and you’re asking all these questions’.

[further clarification sought by interviewer and more details given by interviewee – omitted from this extract]

… He was a Schedule 1 offender, so we did have to look into it, which is fine, but I think the department shouldn’t expect us to you know, suddenly enter into somebody else’s life for their own procedures.

… We’ve got to follow our procedures with no thought as to how the family might perceive the situation.

Sandra’s account is marked by compression. She starts by giving just enough information (not in a sentence format) to sketch in the background details of what for her is a familiar social work scenario (an ‘old’ child protection case). It seems that she does not want to waste time going over familiar ground, but perhaps her rapid account of the background is also an expression of her frustration and impatience with the situation in which she was placed. At the point where she gives information about the particular family, some more precise details are given (ages of participants and so on) using a fuller sentence structure. The account then speeds up again, using single words or short phrases to describe the familiar typical social work process: ‘child protection, conference, on the register, never saw a social worker again’. This format seems to indicate that these are routine, predictable stages that any family in a child protection case would go through.
This way of telling the story seems to reflect Sandra’s feeling of being a cog in the social services wheel, just as much as the family is. She uses her name ‘Sandra’ to refer to herself on three occasions before finally using ‘I’ when she says ‘I had to go out and see’ the family (she had no choice). The use of the third person seems to emphasise her feeling of powerlessness, being subject to the command of a higher authority, which seems to mirror the family’s resentment at her involvement. She did not want to be there any more than they wanted her.

The account does not present the teller as an active moral agent able to make a choice. However, the way she tells the story is as if she feels she should have had a choice. She should have been allowed to be a moral agent and be able to treat this family according to her own judgement, not the department’s procedures. She does not use many explicitly ethical terms, but when, after telling the story, she offers her reflective comments on the situation, this is when it is clearly characterized as an ethical issue. The essence of the situation for her seems to be summed up in her comment that ‘the department shouldn’t expect us ..’. Here the ‘should’ is a moral ‘should’. This is a situation that should not happen. So she is telling the story not as a dilemma for her as a moral agent, but as a story about what the institution she works for does to her moral agency. On two occasions she uses the phrase ‘very embarrassing’. This tells us a lot about why the situation was significant for her – embarrassment may comprise an uncomfortable emotion of being exposed or shown up in the eyes of others. Three points strike us particularly about this account: 1) the moral agency of the teller as someone able to make a choice does not feature in the account; 2) the story is given an explicit ‘ethical’ twist at the end, in the teller’s reflective evaluation on what should not have happened; 3) emotion (in this case embarrassment) features almost from the beginning and could be interpreted also as marking it as an account with ethical significance.

**Accounting an ethical problem**

The next account was given by the manager of an assessment and information team in a local authority social services department. He had qualified as a social worker 16 years ago and previously worked as a child protection social worker and in training.
for several years. The assessment and information team is responsible for taking all new referrals to the department and screening them against eligibility criteria (adult services) and assessment matrices (children’s services). The eligibility criteria had been relatively recently developed in this authority at the time of the interview, reflecting a growing preoccupation in social services generally with prioritizing and targeting resources at those most ‘in need’ or ‘at risk’, according to standardized criteria and matrices (see Harris, 2003; Lymbery, 2000; Parton, Thorpe & Wattam, 1997).

Is it because you get a bit older and wiser and think ‘oh, I’ve dealt with that’, you know? We had a ( ) how old would he be? Mid 50s, this chap, maybe a bit older, lived alone, lived at the top stairs of a flat, had a significant alcohol problem, was at significant risk, was hospitalised because of complications arising from alcohol. He just didn’t want to go into any kind of detox regime, he just wanted to go home, didn’t want any support, thank you very much, wasn’t prepared to consider moving, although people did a lot of work on his behalf to get him a safer environment in which to live. He went home, refused to see anybody, you know, and the particular social worker involved with that one is very, very anxious, as was his personal kind of network of friends. And you know, insisted that we do something, and you know, well, we can’t. He doesn’t want anything. He is rational. He’s able to articulate where he wants to be. ‘We are as equally as concerned as you are about the risks’, you know. ‘But it’s alright for you’, you know. And he eventually did die. Fortunately not falling down the stairs, but ( ) so I suppose it’s the ( ) one of the things that we do is to carry the risks and responsibilities that other people would rather didn’t exist I suppose really. And ( ) but also balance that with people’s own sense of efficacy and choice. I think, as a manager of a team where we’re faced with that sometimes, where we know that people won’t cope particularly well and may indeed put themselves at significant risk of harm, you know, where we would recommend the services go in, but they choose not to, that ( ) I feel able to manage that ………

The team manager starts his story by explicitly reflecting on his long experience, which makes it easier to handle difficult situations. He quickly describes the situation
in ‘social work language’, categorizing the service user as having a ‘significant alcohol problem’ and being ‘at significant risk’. He does not give details to justify these ascriptions, because what matters in the story is that in his professional judgement, and in the view of others, a significant risk was perceived. Furthermore, having presented himself as someone with experience and wisdom, he probably assumes the interviewer accepts his account of the situation, as when he then says simply that ‘we can’t’ do anything, with the ‘we’ referring to the team as part of the social services department. He then describes the service user’s preferences and choices – an important consideration in social work ethics – as well as his own (team manager’s) judgement that the man is ‘rational’ and able to articulate where he wants to be. These are acceptable reasons within the social work sphere to justify not interfering with someone’s freely made choice, so he does not feel the need to explain why being ‘rational’ is an important consideration. Again, he would also assume the interviewer was party to this ‘social work talk’ and reasoning.

He then talks first in the voice of the team/social services department to the concerned friends: ‘we are as equally concerned’ and then replies in the voice of the friends: ‘But it’s alright for you’. This emphasizes the reality of the situation and the debates that must have taken place. It gives a brief flavour of there being a dispute between two parties, before continuing with the very truncated factual account to inform the interviewer of the ending: that the man ‘eventually did die’, although luckily not from an accident (with the assumption that the interviewer knows the story might be different if the outcome had been more tragic). There is no trace of a ‘remainder’ in the form of regret or guilt in this account. No doubts are expressed and the manager presents the case as involving no choice for him as a representative of the social services department (there is no statutory or moral duty to intervene when someone is a competent and rational adult). But he does imply (without giving the details) that others were anxious and wanted things done. Perhaps had it not been for his wisdom and experience, the ‘very, very anxious’ social worker might have spent a lot of time trying to persuade the man to accept more support.

He moves on quickly to offer his own reflective comments on the situation, categorizing it as a legitimate example of an ethically problematic situation by locating it within a general category of ‘risks and responsibilities’ carried by social
services departments/social workers. He is using recognizably ‘ethical’ language here, proceeding to talk of balancing these ‘risks’ and ‘responsibilities’ with people’s own ‘efficacy’ and ‘choice’. The use of the term ‘balancing’ again legitimates the account as an ethical problem story featuring the practitioner as someone who has to make difficult moral decisions. This extract ends with the manager commenting that he ‘feels able to manage’ the carrying of the risks – reinforcing his self-ascription at the beginning as someone of experience and wisdom. Particularly noteworthy in this account is: 1) the clear account of moral agency (making a decision not to intervene), although with no dilemma or difficult choice expressed; 2) use of concepts with professional and ethical import (‘risk’, ‘rational’) in the main body of the account; 3) the explicit self-ascription by the social worker of certain qualities (age and wisdom); 4) making a reflective ethical evaluation towards the end of the story, locating it in the context of the kinds of risks and responsibilities social workers carry in society.

**Accounting an ethical dilemma**

This final extract comes from a conversation with the Director of a medium-sized voluntary organisation with a community development brief. She had worked for this particular organisation for one and a half years and had ten years’ professional experience in the voluntary sector. She was talking about people volunteering in their local communities. Her account can be placed in the context of the recent imperatives coming from central government, particularly through programmes for neighbourhood regeneration and renewal, which require the participation of community representatives on the various committees, boards and partnerships that are developing and implementing local policies (see Banks and Shenton, 2001; Taylor, 2002).

When you do get communities involved, what do you do when people who are downright obnoxious with the most outrageous attitudes and racist and sexist ( ) become very powerful within the community? How do you control that? Because there are despots out there who are leading community groups. They alienate the rest of the decent community, but they’re the ones who are negotiating with the district council. And it’s horrific! Absolutely horrific! And it does worry me. Because I know government is looking increasingly to
devolve decision making now to a lower and lower level and do they not realise who sometimes they’re going to be devolving it down to?

… You’re in the ridiculous situation, you’re in a big meeting in the district council, and this guy who is awful, says ( ) makes an accusation, you ask him to substantiate it, you challenge him and say ‘I am sure that didn’t happen’ then it ( ) ‘well, you weren’t at the meeting!’ and they’re really aggressive. They also attack the district council, and neither of us really could say ‘you are wrong, you are out of order, that’s not acceptable’.

… Yes. There’s a lot of them. Yes, I mean, I had to come back and speak to my worker and said ‘I am sure you didn’t do this, I just need to check’. I then asked her to speak to the guy at the district council, and he said, ‘yes, I did know [about the accusation] and I didn’t think for a minute that he [the community representative] was speaking the truth.’ But it was a whole room full of people and some people may well have believed what he was saying, and it doesn’t do the organisation any good. It doesn’t do your staff morale any good. And there’s two people, two senior managers, who don’t have any mechanism to control an individual that’s very disruptive.

… It’s just happened in an informal way that one of ( ) actually it’s the [name of the county council community services department], we’ve been asked ‘how do you find him?’ and we were honest and said ‘he’s aggressive, he’s very challenging, he puts people down, and he’s not terribly constructive’ and they were saying ‘yes, we’ve heard that’, so we’re kind of ( ) so in an informal way they’re addressing that perhaps he’s not working as effectively as he should be, so you do have an informal network, and then I should think that if it becomes serious enough, I will be approached to make a formal complaint. How do you do that with a community member? You have no informal network, and you have no formal means of controlling them. And they’re dangerous!

… I think partly why people don’t do it [challenge them] is because the backlash would be so huge, the amount of time it would take dealing with it,
mopping up the mess, you do a quick calculation in your head and you just think it’s not worth it, but they should be challenged. But they can make life so difficult ( ) I don’t know. It is a big dilemma, and again, I don’t know how to address that one, but it needs to be sorted.

This practitioner is articulating a current dilemma for her, one that she does not know how to address – that is, it seems irresolvable. She mixes discussion of a specific example with the general issue of what to do in cases like this. Her language seems like that of what Dingwall (1977) calls ‘an atrocity story’. She repeats the term ‘horrific’ twice in the first paragraph and characterises these kinds of people as not only ‘disruptive’ but also ‘aggressive’ and ‘dangerous’. She does not tell us precisely what the specific community representative to whom she is referring has said in public about her worker/her organisation, but it is clear she feels the accusation to be unjustified. She says in the first paragraph that this kind of situation ‘does worry me’, but this is clearly an understatement. In characterising the attitudes of such people as ‘outrageous’ and the situation as ‘ridiculous’ she is conveying her own feelings of outrage and powerlessness (she has no means of controlling such people).

Unlike the team manager in the previous case, this practitioner does not offer any reflection on the dilemma in ‘textbook’ ethical terms. She is focusing on telling her story, rather than doing any work for the interviewer to show how it fits into the ‘ethical dilemma/problem’ category. But the dilemma is obvious and has the feel of ‘whatever you do will be wrong’ about it. As she says in the last paragraph: ‘they should be challenged, but they can make life so difficult’. The ‘should’ here is the moral ‘should’ or ‘ought’. If we expand the dilemma it would be along the lines of: do you allow community representatives to make wild accusations in an aggressive, obnoxious and despotic manner, which is both unfair and damaging to those accused, or do you challenge them and risk a huge ‘backlash’ which would be very time consuming and difficult to deal with? The Director did not explicitly articulate the nature of the backlash, perhaps because she assumed that she and the interviewer shared the same understanding of the power of the simplistic rhetoric of community participation – namely, that community participation is a good. But it is implicit that this backlash could be equally as damaging to the reputation of her agency as the accusations being made. The Director chose the first course of action (allowing the
community representative to get away with it) in the immediate context of the specific
accusation made in a public forum, in that although she questioned the accusation, she
did not challenge his right to make such unsubstantiated and damaging comments in
an aggressive manner. This ‘solution’ leaves her with a residuum not of regret, blame
or guilt, as is often the case with dilemmas, but a sense of injustice and outrage. But
the dilemma is on-going for her, as she is following up the matter in different arenas
(with the district and county councils) and pondering on how to tackle similar
situations in the future. Particular features of this account are: 1) it explicitly features
the teller as a moral agent, facing a dilemma – a choice about what to do and not
knowing what to do; 2) it uses ascriptions of moral character (‘racist’, ‘sexist’,
‘decent’, ‘aggressive’, ‘honest’) which, perhaps, serve to mark it as a story with
ethical import (as opposed talk of rights, responsibilities and so on); 3) as with the
other accounts, this teller offers a reflective moral evaluation at the end, including
identifying the situation as involving a dilemma, as if to confirm to the interviewer
that she has given what was requested.

Concluding comments

This paper has explored a number of accounts given by social welfare practitioners
when asked to describe ethical dilemmas and problems in their work. We have been
interested in how such accounts are constructed by practitioners and how they can be
interpreted by us as intelligibly ‘ethical’ in character.

Our analysis and discussion of this material has obviously drawn on a set of
theoretical and conceptual resources that has enabled us to identify what we regard as
the ethically significant components of the accounts. In particular we have used
familiar concepts and distinctions found in the field of moral philosophy (relating, for
example, to rights, responsibilities, character and emotions). However, we were not
looking to see how far the accounts given by practitioners of ethical difficulties fitted
with the kinds of hypothetical or edited accounts (‘textbook cases’) commonly used in
moral philosophy and professional ethics. Instead we wanted to discover what could
be learned from the direct examination of these practitioners’ accounts about their
versions of matters relating to right and wrong action, good and bad motives, valid
reasons and compelling emotions.
That their stories are selective, situated, complex and messy – with political, ethical, technical and practical elements intertwined – comes as no surprise. For that is what professional life is like. Professional practices and the surrounding conventions of those practices provide an essential ‘embedding network for concepts, standards and criteria’ (Jayyusi, 1991, p. 233). That the accounts are usually not neatly constructed in the format recognisable as an ‘ethics case’ (with a clear ‘plot’, an embedded ethical dilemma or choice and a set of reasons for action justifiable with reference to general ethical principles) is also not surprising, since these people are social welfare practitioners, not moral philosophers. Their accounts instantiate the dominant professional and moral assumptions necessary to make them intelligible as concrete instances of specific ethical difficulties – for example, in the second case, the assumption that the role of the social worker is to carry (and balance) risks and responsibilities.

It is important to recognise that it is in the course of giving such accounts of actions and events as constituting ethical problems or dilemmas, that subjects reflexively construct their own identities as competent ethical, professional practitioners - as the kinds of people who possess certain kinds of character traits and behave in certain kinds of ways (see Taylor and White, 2000; Williams, 2000a & b). For example, Sandra’s account of her ethical issue provides the listener with resources for construing her as a social worker of ethical sensitivity, who experiences the emotion of embarrassment when making unjustified interventions. In the second case, the team manager presents himself as a person of experience and wisdom, able to carry the risks and responsibilities that are part of what ‘we [social workers] do’, whilst the Director in the last case describes herself/her organisation as ‘honest’. This suggests that character traits (traditionally described as ‘virtues’ in the literature of moral philosophy), notions of professional roles and emotional responsiveness are important features of the accounts given by professional practitioners about ethically difficult situations in practice. As Walker (2003, p. 77) comments, moral problems are ‘nodal points in progressive histories of mutual adjustment and understanding, not “cases” to be closed by a final verdict of a highest court’.
These observations, that such instances of professional discourse serve to constitute the identity of practitioners at the same time that they represent and evaluate the actions of others, are especially important for understanding the significance of our arguments in this paper. Above all else we have been concerned to find a way to begin an interrogation of the seemingly self evident understandings of chronic ethical difficulties encountered in the course of the routine and exceptional accomplishment of social work practice. It is our argument that the nature of these difficulties (and their resolutions) are not best understood by validating or invalidating the descriptive and evaluative resources relied on by participants by comparing them with the formal vocabulary and grammar of moral philosophy. Instead we want to understand the way in which these uses arise ‘from the meetings and interactions of everyday life’ (Bourdieu, 1984, p. 471). An essential feature of our approach is the necessity to remain sensitive to the contingencies of the organisational contexts in which these issues arise and within which their solutions have to be accommodated. The skilled explication, negotiation and resolution of these matters is the routine accomplishment of competent social welfare practitioners. It is hoped that the preliminary observations reported here based on practitioners’ accounts will be followed by further work based on more direct observations of the identification and management of ethical difficulties by social welfare professionals so that the nature of these accomplishments may better be understood.

But are our interests relevant to practitioners themselves? In other words, can our approach make any positive contribution to the education, supervision, or the direct practice of social workers? We believe it can, insofar as it directly encourages and facilitates the kind of self- and organisational- scrutiny that we might refer to as ‘practising ethical reflexivity’. This is a development of Taylor and White’s (2000, p. 35) concept of ‘epistemic reflexivity’, and entails subjecting our own knowledge and value claims to critical analysis. As they have pointed out, such scrutiny, whether carried out by students, supervisors or front-line practitioners, involves more than a simple reflection on what has been done (or not done), how, why, and with what effect. Instead it encourages practitioners to turn the ethical, professional and organisational resources that they implicitly use for competent practice into topics for explicit examination.
Students can be encouraged to write about or speak to each other about their own stories of ethical difficulties and then subject these accounts to critical scrutiny along the lines developed here. For example, a close examination of Sandra’s account with her supervisor or team will raise issues of how she constructs her moral and professional identity as sensitive and caring by drawing on certain types of professional ideals and values gained during her training. Through discussion and debate it may be suggested that this is at odds with other available identities of social workers, for example, as rigorous investigators. A more critical understanding of the ambiguities and complexities in such constructions of their professional role may help practitioners to implement and maintain a commitment to challenge some of the dominant assumptions that serve to humiliate and oppress service users.

Acknowledgements

We are grateful to the practitioners who gave us their accounts and to the Leverhulme Trust for a research fellowship that allowed Sarah Banks to collect the data.

References


