Practice Matters

Newfoundland & Labrador Association of Social Workers

Practice Matters was created as an educational resource for social workers in Newfoundland and Labrador. It is intended that this resource will generate ethical dialogue and enhance critical thinking on issues that impact social work practice. Practice Matters is provided for general information.

Ethical Ponderings on Anti-Oppressive Social Work Practice
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Social work is a relationship based profession. It is well recognized that the social work relationship is a significant factor impacting client change and outcomes regardless of the intervention or theoretical approach used. Yet, many social workers struggle ethically with the power differential that exists in social work relationships, and question how they can practice anti-oppressively while staying true to their ethical responsibilities.

The purpose of this edition of Practice Matters is to ponder and explore the perceived dichotomy as social workers strive to practice anti-oppressively, while owning the power that we have as social workers, and to navigate our way through the ethical complexities.

A Reflection on Anti-Oppressive Practice

Oppression as outlined by Mullaly (2002), "is generally understood as the domination of subordinate groups in society by a powerful (politically, economically, socially and culturally) group" (p. 27). Anti-oppressive social work practice is an approach to practice that involves an understanding of the complexities and origins of the oppression that exists in our society and impact on individuals. It encompasses many theories including, but not limited to "radical, structural, feminist, anti-racist, critical, and liberatory frameworks" (Campbell, 2003).

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While social workers hold power and privilege by virtue of their positions and education, this power may not necessarily be oppressive. Therefore, in considering the issue of oppression in social work practice, we first need to be reflective and critical on how we define power. Parsons, Gutiérrez, and Cox (1998) note that "in its most positive sense, power is (1) the ability to influence the course of one's life, (2) an expression of self-worth, (3) the capacity to work with others to control aspects of public life, and (4) access to the mechanisms of public decision making" (p. 8).

Social workers bring a unique perspective to working with individuals, families, groups, organizations and communities. Through our practices, we use our knowledge to affect change (individual and systemic), to help individuals realize their own power in creating change, and to reduce, prevent and eliminate oppression in our society. It is also through our social work knowledge, skills and abilities that we demonstrate our competency to engage in the practice of social work. As outlined in the CASW Code of Ethics (2005):

- Social workers uphold the right of clients to be offered the highest quality service possible.
- Social workers strive to maintain and increase their professional knowledge and skill.
- Social workers demonstrate due care for client's interests and safety by limiting professional practice to areas of demonstrated competence. (p.8).

Oftentimes, we may undervalue the knowledge and expertise that we have with regards to social work intervention and theory. Consider narrative therapy as an example. In using narrative therapy, one is encouraged to take a "not-knowing" approach to allow the client to articulate his/her own preferred story. Yet, a "not-knowing" approach does not mean that we don't know anything. The use of narrative therapy in social work practice requires one to have a thorough understanding of the therapy approach and techniques, how to competently incorporate the techniques, and to evaluate if this approach is meeting client needs. It is through this knowledge and expertise that social workers foster a professional relationship where the client drives the change process. In this regard, we are being anti-oppressive because of the knowledge and expertise social workers hold as professionals. This translates into the highest quality of client care.

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Systems and Oppression

Scenario 1: Sarah is a BSW student completing her first year of studies. She is considering a field practicum in child welfare, but recently had a discussion with a peer about whether "the system" was being too intrusive in the lives of families and wondered how she could practice anti-oppressively within this system.

Scenario 2: John is an 89 year old gentleman requiring level three care. He was recently admitted to hospital for an acute illness. He is adamant that he does not want to go to a long term care facility, and twenty-four hour home care is not an option. He has been medically discharged from hospital. An application to long term care has been made on his behalf.

The argument is often made that the "systems" we work in are oppressive and ultimately impacts the social work relationship. Yet consider for a moment what our society would be like without systems and structures. What if there was no system to ensure that children and youth were protected and safe? What if there was no system to ensure access to health care in this country? What if there was no system to provide income support for those in need? While "systems" may never be perfect, social workers continue to use their power and knowledge to inform policy changes that improve the health and well-being of individuals, families and communities across the social determinants of health and enhance the social work relationship. Through our advocacy work we are being anti-oppressive.

In reflecting on scenario 1, it would be important for the student to examine oppression in the broadest sense. Child welfare legislation (s) and the Convention on the Rights of the Child were created to ensure the protection and safety of children and youth. As social workers, we use our knowledge and skills to complete comprehensive risk assessments, work with individuals and families to minimize risk, and foster a culture of respect and dignity even as tough decisions are being made. Sometimes, children have to be removed from their homes, or social supports and services have to be put in place, to ensure their safety. These decisions are not being made to "dominate" a vulnerable or oppressed group. In fact the opposite is true as social workers strive to ensure that children and youth are given every opportunity to thrive and meet their full potential.

Scenario 2 is quite complex with many ethical issues to consider (i.e., client self-determination, informed consent, fair and equitable access to resources). A social worker involved in this case scenario may experience moral distress, as none of the options are desirable given the lack of resources available to assist this particular client.

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While the purpose of this paper is not to provide direction on how cases of this nature should be resolved, there are several areas the social worker may want to consider – starting with the social work relationship. As social workers and facilitators of change, the social worker in this case can work with the client and his family (if appropriate) to ensure that he has all the information needed to make an informed choice (informed consent) and to open the space for the client to share his thoughts and frustrations. Ultimately, this will make a difference in how the client perceives the situation. The social worker can also use his/her knowledge and experience to continue to advocate for services, programs and policies to meet the needs of seniors and their families. The key to successful advocacy is based on relationships. Relationships with organizations and governments can be built and maintained by giving a credible voice and perspective to the issues impacting on the health and well-being of individuals, families and communities. This is anti-oppressive practice.

Regardless of area of practice, it is through the social work relationship that social workers can incorporate anti-oppressive principles in their practices. It can be as simple as addressing some of the personal biases that we have that may be impacting on our work or challenging stereotypes and prejudices that exist in our communities. Engaging in open dialogue with colleagues and mentoring students on how to incorporate anti-oppressive principles in practice is also fundamental to reflecting upon power and oppression in social work practice.

Anti-Oppressive Practice in the Context of Professional Boundaries

Given the inherent power differential in the social work relationship, it is the responsibility of the social worker to set and maintain appropriate boundaries. As outlined in the CASW Code of Ethics (2005) "social workers establish appropriate boundaries in relationships with clients and ensure that the relationship serves the needs of clients" (p.7). Consider the following scenario.

Scenario 1: Julie is a recent BSW graduate and is employed with a community organization. In addition to providing individual and group counselling, Julie is involved with a community arts project which she attends with several of her clients as part of her work. Recently, one of the clients sent her a friend request on Facebook. Julie expresses to a colleague she does not see an issue in accepting the friend request given that she practices from an anti-oppressive framework.

It would be important for the social worker to consider whose needs would be met by accepting the friend request and engaging in a dual relationship with a client. While dual relationships are not always unethical or harmful, the social worker would need to consider issues such as the client's

intent for initiating the request, impact on client confidentiality, professional self-disclosure, and how client information obtained through Facebook could potentially impact the social work relationship? Is there potential for the relationship to become oppressive?

Empowerment practice "strives to develop within individuals, families, groups, or communities the ability to gain power" (Parsons, Gutiérrez & Cox, 1998, p. 4). While one might propose that boundaries are oppressive, and would consider accepting the friend request to reduce the power (real or perceived) in the relationship, it can be argued that the existence of professional boundaries can actually mitigate the impact of the power differential. It is through established boundaries that safe, caring and professional relationships are formed. The boundaries set the parameters for what is considered acceptable and professional and places the client in a "knowing position" of what to expect from the professional relationship. This is anti-oppressive practice.

Summary

This article was intended to explore power and ethical responsibilities within the context of anti-oppressive practice. It is anticipated that the focus taken will generate continued dialogue, debate and critical reflection. It is by opening space for this on-going discussion that we will be able to grow as professionals and to become critical thinkers in our practices. Social work is a profession fraught with ethical, legal and practice dilemmas; yet it is the social work relationship that remains the cornerstone of our profession. It is by focusing on the social work relationship that we can put these ethical, legal and practice dilemmas within context and foster an environment of sound ethical practice.

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