**IN-CLASS MICRO ETHICS EXERCISE***

**The Ethical Dilemma** (read silently)

Some years ago, a social worker was working with families and children in an outpatient psychiatric setting, Children’s Agency. In the previous year, she had completed her MSW, having practiced social work several years with an undergraduate degree. The Director of Social Services at the Children’s Agency was her supervisor. They used a team model in their work, with any particular team consisting of at least a social worker, a psychologist, and a psychiatrist. Sometimes other professionals, such as educational specialists, early childhood development specialists, and social group workers were also on the teams. She had first-rate colleagues in whom she could confide about clinical and ethical issues. Continuous learning was valued, especially as it related to clinical practice.

While the social worker was at Children’s Agency, Mary Jones (a fictitious name) applied for a job as a social worker at the agency. Four years earlier, the social worker had seen Mary as a client while working for an emergency service at Adult Hospital, a psychiatric facility for adults.

The social worker’s earlier contact with Mary had been rather brief at Adult Hospital. Mary came to be admitted to the hospital as her psychiatric condition was deteriorating. Mary told the social worker at that time that she (Mary) was a social worker with an MSW and had been in and out of psychiatric hospitals for many years. The social worker located her chart, noted that Mary was previously diagnosed with schizophrenia, undifferentiated type, did the basic paperwork that social workers did on admission, consulted with the admitting psychiatrist, and took her to the hospital ward. It was a rather simple, routine admission; there were no police or court documents, and she was a voluntary client.

So now, three years later, the social worker had her MSW, and Mary came for a job interview at Children’s Agency where the social worker was employed. The social worker had no responsibility for employment decisions; her supervisor, who was the Director of Social Services, and the psychiatrist who was also the Executive Director, made these decisions. But the social worker was faced with an uncomfortable dilemma—an ethical dilemma for which she did not see any clear answer.

On one hand, she was concerned about whether Mary would function as a competent professional colleague. Was Mary’s illness in remission? If so, would it remain in remission? If not, what would the impact be on clients? Would Mary be able to function adequately to work with clients who came to the agency? If not, would harm come to clients?

On the other hand, the social worker’s knowledge of Mary’s illness was unquestionably confidential. Further, what right or responsibility did the social worker have to suggest that a person who had a mental illness should not be hired? What right or responsibility did the social worker...
worker have to divulge information about Mary’s (past) condition to anyone?

There was also the possibility that the social worker could speak to Mary and verbalize her concerns to her. Would this be appropriate? Would Mary remember who the social worker was? After three years, did the brief encounter give the social worker the prerogative to confront Mary about her past or ask about her present condition?

**Group Assignment**

Examine each of the following sections of the NASW Code of Ethics (and any others you think may be applicable) and discuss the related questions listed below, assessing their relevance to a decision about how ethically to handle the situation described above:

- The first sentence of the Preamble to the Code of Ethics:
  1. Are the clients of the Children’s Agency the vulnerable people referred to in the Preamble?
  2. Does Mary qualify as one of the vulnerable people described in the Preamble?
  3. Which is more important, the vulnerability of a specific person (Mary) or the vulnerability of a general client population (the clients)?

- Section 1.07 Privacy and Confidentiality, paragraph (c):
  1. Does Mary’s mental condition qualify as threatening **serious, foreseeable, and imminent harm to a client**?
  2. Is the threat sufficiently compelling to justify breaking confidentiality?
  3. If the answer is affirmative, what does that infer about treatment of persons with mental illness?

- Section 2.09, Impairment of Colleagues, paragraphs (a) and (b):
  1. To what extent does the social worker have knowledge of Mary’s impairment?
  2. To what extent is it clear that Mary’s impairment would interfere with her work as a professional social worker?
  3. Does the social worker have enough information about Mary to justify consulting with Mary as paragraph (a) suggests?
  4. Would inferring that Mary’s impairment would interfere with her work as a social worker amount to prejudice toward persons with mental illness?

- Section 4.02, Discrimination:
  1. Does this section, which condemns discrimination on the basis of “mental or physical disability,” suggest that revealing anything about Mary’s condition or even confronting Mary with the situation would be discriminatory?
  2. Why would this section not be applicable in guiding the social worker’s ethical decision in this situation?

- Section 4.05, Impairment:
  1. Since Mary was a professional, didn’t she have the responsibility to make sure her “mental health difficulties” did not interfere with her professional judgment and performance?
  2. Since Mary is a professional, shouldn’t one assume that she needs to deal with these
issues?
3. If that is the case, what is the social worker’s role?

**General Directions**

You are to make a decision as a group by reaching *consensus* about how you would handle the situation based on the guidance of the Code of Ethics. Reaching consensus requires that you *talk out your differences* until everyone comes to *genuine agreement* on the best course of action.

One member of your group should be named to take notes on your discussion and one member should be named to report to the class on how you came to your conclusions.

Obviously, the Code of Ethics is your guide in such decisions. But other questions about how to make these types of decisions are also important—for example:

1. Is it appropriate for the social worker to discuss such issues with other colleagues?
2. If yes, under what circumstances should such issues be discussed, formally or informally?
3. Should a professional social worker consult with the National Association of Social Workers about such a decision?
4. In general, should a supervisor be consulted about such decisions?
5. In this instance, would consulting the supervisor have been appropriate, as the supervisor was also the person in charge of hiring.

**General Understandings**

It’s important to remember that there are times in social work practice when professionals are placed in situations, through no wrongdoing on anybody’s part, in which dilemmas occur because of a conflict in values or ethical principles within the situation itself. In those situations, *it is not a matter of choosing good versus evil, or choosing right versus wrong*. It is a matter of choosing between the better of two goods or, possibly more often, the lesser of two evils. Making those decisions is often not pleasant. In fact, it can be quite anxiety provoking. But it is also impossible to side step the issue when doing nothing will predictably yield a certain outcome.

* Based on a case study by Lee J. Zook, “To Tell or Not to Tell,” *New Social Worker*, 8(1):____ (Winter 2001).