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From the Editor

We are pleased to present the Fall 2013 Issue of *Perspectives on Social Work.* This edition is significant to us as this semester marks not only the 20th anniversary for our Ph.D. program, but the 10th anniversary of our journal. It has been a great experience acting as Editor-in-Chief for the 2013 Fall edition of *PSW*. Acting as editor-in-chief for the journal has been an amazing experience and has supplemented my doctoral education in ways I could not have anticipated. Furthermore, our 10th anniversary sees our journal growing in exciting ways. We received a record number of submissions this year, and as our journal has grown, so has the responsibilities. I'd like to share with you some of my experiences as both a doctoral student and an editor.

You may or may not have heard the phrase, "you only get out what you put in." This common advice given when one is entering graduate school and many of you may have heard this without giving it a second thought. As doctoral students, our schedules beyond filled. We have classes, internships, teaching, just to name a few. We do not, however, learn everything we need to learn on campus, or in classrooms. We accepted the challenge of a doctoral education, but our classes and internships cannot complete our education. We need to go beyond our classrooms and challenge ourselves to do more. Although we could stick to our set schedules, we will be doing so much more as academics and it is completely up to us to seek out opportunities to enhance our learning and growth. Working as reviewers not only builds our CVs, but also helps fill in the gaps in our learning, by developing our own writing, and preparing us for work we will be doing outside of our institutions.

Finally, as our journal has grown rapidly over the past few years, we have depended more on outside reviewers. Collaboration, whether between individuals or organizations, is an important part of our education and it is essential for our success as students, as academics and as professionals. Moreover, the collaboration we have formed with our reviewers is essential to our success and continued growth. We extend our deepest gratitude to all of those who submitted to our journal and all of those who acted as reviewers, and we look forward to the challenges and collaborations Spring 2014 will bring.

Sincerely,
Christine R. Bakos-Block

Social Work Education

A Fish Out of Water: A Seasoned Professor from a Small Private University Discusses her First Experience as a Teaching Assistant at a Large State University

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Abstract
The following article describes the teaching experience of a teaching assistant and PhD student at the University of XXX. The student is an associate professor at a small private college with no prior experience at a state university. The student teaches with a great breadth of latitude at the private college and does not have that same latitude in the role of a teaching assistant. She learns the meaning of the word ombud as well as other lessons from the chairs of the BSW and Doctoral programs. Additionally, she grows as an educator as she experiences more diversity in the classroom than she has in the past.

Keywords: ombud, teaching, university, assistant, professor, educator

Introduction

"Ombud. What's an ombud?" I said to the director of the PhD program. He graciously explained the role of the academic ombud on campus. I vaguely remembered hearing something about this in teaching assistant training. However, I did not expect to have any contact with anyone from this office. I have been teaching for over 8 years at a small private university and can only remember one student complaint that even went to my chair and that incident was quickly resolved. There is no academic ombud on the private campus. I think back to any experiences I have had with this term and remember that one of my BSW students did her field experience at the Ombudsman Joint Office of Citizen Complaints in XXX. She was often an advocate for people, who were experiencing injustice. She attempted to resolve disputes and sought justice for the oppressed. What injustice could I have done to require the chair of the BSW program to contact the ombud? I definitely felt like a fish out of water.

The Office of the Ombudsman

The history of the modern use of the term ombudsman comes from Sweden, with the Swedish parliamentary Ombudsman's Office instituted in 1809. Van Roosbroek and Van de Walle (2008) state, "Its task was to protect the rights of citizens against the executive branch" (p. 288). Additionally, they report ombudsmen "give recommendations that seek to alter laws, regulations, and/or organizational structures" (p.288). Universities and hospitals have recently adopted the notion of the ombudsman.

The ombudsman service seeks to mediate conflict with the hopes of finding a mutually acceptable resolution without the involvement of litigation (Alcover, 2009). When considering

the possibility of lawsuits and adjudication, it would seem that most organizations would consider ombudsman services a beneficial alternative. The role of the ombudsman, in and of itself, is a fascinating one. The possibility of helping someone with little power work through a conflict with a person in authority without repercussions seems like it would be satisfying for the ombud and positive for the disputants. Alcover (2009) found that use of the ombudsman process led to increased involvement by the participants with an increased "…level of participation in the processes of decision making leading to agreements and increasing their level of empowerment" (p. 283). Despite these positive results, Harrison (2007) reports a blatant under-utilization of ombudsman services on campuses and encourages universities to make students more aware of the services.

Teaching Experience

After practicing social work for thirteen years, I moved to academia. On one level, I was very excited about teaching. It is something I love to do and I enjoy seeing students grow and develop into professionals. On the other hand, I was very fearful of making a mistake that would affect social work clients all over the world. I am a woman of faith, so I prayed and prepared fervently for every class. I felt a burden to build up a capable pool of social work practitioners that would make a positive impact on the profession and the community at large. However, adjusting to academia was not easy. I was a fish out of water. There was a hierarchy and it was a man's world. I was one of very few female faculty members outside of the nursing major on campus. I also had no formal teaching experience.

When the university developed a Center for Teaching and Learning, I was the first to sign up for guidance and feedback. Prior to the development of the Center, I observed several professors known for their positive student outcomes. I sought feedback and had discussions with successful professors. I love to learn and try new things in the classroom, so I incorporated service and experiential learning opportunities into my classes and found a way to avoid presentation fatigue. I grew as my students grew and I was encouraged and rewarded.

Eventually, it was time to make this career move official. After taking my GRE in the summer, I proceeded to apply to PhD programs. Fortunately, I received acceptance to both programs to which I applied. The program I am attending is best for my situation. The PhD director was supportive and offered me an opportunity to be a teaching assistant for the undergraduate program, which comes with the benefit of a stipend and free tuition. The stipend is a blessing.

Teaching as a Teaching Assistant

Initially, I was very nervous, as I have never taught at a state university. I spent time preparing how to engage a new audience with a different demographic. The BSW Chair gave me the assignment to teach a junior level class that I had never taught in the past. I am used to teaching throughout the curriculum, so I generally develop a relationship with the students in the Introduction to Social Work class and continue that relationship throughout their four years. In this situation, I would be plopped right in the middle of their education. In addition, when the semester is over, I may never see them again. If I made a mistake, I couldn't correct it the next time I had them or if I didn't get to cover everything I wanted to, I couldn't just tack it onto the next class I taught them. I am still adjusting to this and love to hear from my past students.

The problem

In early August, a course syllabus was sent to me for the course I was assigned. The course was new and it took some components from a previous course. The BSW Chair gave me instructions to review the syllabus and make corrections and changes. Since I do this on a regular basis for the courses I teach at my full time job, I made changes (more than I should have) and proceeded with teaching the course later in the month. After the course started, the BSW Chair asked me to send the adjusted syllabus to her highlighting any changes made. I followed the directions and found out I made a major error. In my role as a teaching assistant, I did not have the authority to make the changes I made. In addition, since there was another section of the course I was teaching, it was important that the courses be nearly identical. (In the past at my full time job, if there were two sections of a course offered, the same professor generally taught them.) It was necessary to change the syllabus back to its original form. I made the changes, posted the new syllabus online (I was still navigating the online system, so I failed to post the previous one), told the students about my error taking full responsibility, and proceeded with instructing the course.

The university ombud

Since I already sent the original adjusted syllabus to the students, the BSW chair felt she needed to consult the ombud. Since I made a mess of things, there were concerns that there would be student complaints and repercussions for changing the syllabus after the start of the semester. The Academic Ombud gave the BSW Chair instructions how to proceed. However, I had no idea that I was to wait for directions on how to proceed. Thankfully, my own actions had not strayed too much from those of the ombud. Additionally, the chair was pleased that the only syllabus posted online was the current one.

With the students having two syllabi for the same course, there was a potential for a dispute. The chair wanted to avoid a complaint to the Office of the Ombudsman. In addition, in the chair's experience, it was best for the ombud to know of potential issues prior to having a complaint. Fortunately, the students were gracious and eventually became clear on which syllabus to follow. I was very thankful for the chair's intervention. It would have been very uncomfortable for me to be the cause of a grievance.

Future experience with the ombud

Will this be my last encounter with the ombud? Unfortunately, it may not be the case. I continue to make decisions and behave as if I am in the private university environment. I have to catch myself and remember that I do not have the same freedom as being at a smaller school. At the smaller university, my courses look different from one semester to the next avoiding presentation fatigue. I cover the material necessary for accreditation, but incorporate different activities and assignments. At the larger university, I have had to conform to standard assignments and timelines. The syllabus is the contract with the student and it is difficult to change deadlines for the convenience of the class when there is another section with students comparing and possibly complaining.

Current experiences

I love teaching at the large state university. I have learned so much from the PhD Director, the BSW Chair, and the students that I have the honor of teaching. There is a more diverse population at the state school than at the private school. This leads to more lively

discussions with differing points of view. However, at the end of the semester, it is very hard to say farewell, as I usually do not see the students again. How do adjuncts do this all the time?

Lessons learned

As aforementioned, I work at a private university. This university is in the process of reviewing its grievance policy. One of the sticking points has been the inclusion of an outside mediation service. Some feel that it would be in the best interest of the faculty members and university to have an outside party involved, whereas, others do not concur with this opinion. The concept of an ombudsman may be a possible compromise in resolving this issue. This fish may have learned something from being out of the water.

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A Perspective on the Historical Epistemology of Social Work Education

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Abstract

Social work has used several paradigms to guide its educational knowledge base. The writings, beliefs, and perceptions of three of social work's founders who have greatly influenced the history of social work education—Jane Addams, Mary Richmond, Edith Abbott—are examined here. This article seeks to explore the constructs and knowledge base of social work from this historical perspective. Specifically, it presents a discussion on the sources of knowledge developed in social work, explores the relationship between epistemology and research, discusses the historical context of the knowledge base, and concludes with some recommendations for social work education.

Keywords: social work, history, epistemology, education, research

This article explores the constructs and knowledge base of social work. Specifically, the source of knowledge developed in social work is examined and the relationships among epistemology, research, and social work are discussed in an historical context, concluding with recommendations.

The Sources of Knowledge

For the purpose of this exploration, Greene's (1990) work identifying three sources of knowledge- (a) historical ideologies, (b) meaning given to ideologies, and (c) concrete claims resulting from the synthesis- is used as the platform. For the identification of social work education, we deconstruct the knowledge claims from our historical actors and the meaning they gave to that knowledge and try to define the intention of the primary actors in the profession's creation and knowledge base. The result from this synthesis is the acquisition of knowledge claims used to build the body of specialized knowledge asserted as the premise for social work's academic, social, and contextual stance.

Historical Ideologies of Social Work Founders – Three Women

In the determination of social work knowledge, several paradigms help to guide the current and historical knowledge base. For instance, some scholars espouse it was a triad heritage resulting from the works of Jane Addams, Mary Richmond, and Edith Abbott which led to the rich history of social work education (Agnew, 2004; Brieland, 1990; Costin, 1983; Feldman & Kamerman, 2001; Franklin, 1986; Wisner, 1958).

Historically Jane Addams has been known as the chief founder of the Hull House Settlement Movement. Her philosophy was to serve the poor and the needy within the community of Chicago. More specifically, Addams' ideology was more of practical activism; she refused to use an impersonal approach with the people she served (Brieland, 1990). She instead surrounded herself with the people she served; she lived in the neighborhood. According to Franklin (1986), Addams did not refer to her neighbors as clients or cases. Consequently, Addams disregarded the younger social workers who served the needy with an eight-hour day in the community but resided in homes which were far from the slums and poor (Breiland, 1990).

Another key historical character was Mary Richmond. Richmond was a clerk who rose to the rank of General Secretary in the Charity Organization Society (COS) (Frankin, 1986). The COS approach for responding to the poor and needy was through "friendly visitors" versus Addams' approach, which was much more personal. Richmond contended with Addams' approach and the mission of the Hull Settlement House. She condemned their service as an old-fashioned mission which provided cheap charity. Brieland (1990) argued that Richmond approached her mission as a gatekeeper for the welfare system rather than truly caring for the needs of the poor and destitute. Richmond assessed who constituted the deserving poor by examining characteristics of those who were seeking help, which contrasted with Addams' socialization as a means of helping. Despite Richmond's approach leading to the case management of social work, she was later criticized for excluding some of the deserving poor (Brieland, 1990).

Most studies on the progression of social work education have examined the dynamics between the aforementioned two women, Jane Addams and Mary Richmond. However, there is one other influential woman discussed intermittently in the body of literature, Edith Abbott. Abbott was interested in the academic program of social work and joined the faculty at the Chicago School of Civics and Philanthropy with the intent to incorporate social research into the curricula (Brieland, 1990). She seized the opportunity to observe the Hull Settlement House when she moved to Chicago and was instrumental in the formation and definition of social work education (Brieland, 1990; Costin, 1983). Abbott argued that social work education needed to embody several fields of study, and proposed social experimentation as integral to this body of knowledge (Wisner, 1960).

However, the body of knowledge rested also on the influences of these historical women in social work. Influences of Addams' peaceful intellectual activist approach, Richmond's casework ideology and her involvement in COS, and Abbott's influence in political science persisted in the shaping of the social work profession. Addams remained influential in the curriculum of social education but opted not to become a member of the faculty in the school of social work. Richmond argued that universities and colleges should not impede the practical training of social work over theory and academics (Agnew, 2004; Costin, 1983). Abbott's quest was to integrate a research emphasis in social work education and to make the profession similar to other disciplines (Shoemaker, 1998). Although the opposing paradigms existed between Richmond and Abbott, the challenge for the social work profession was finding a place in academia -- an arena dominated primarily by males (Costin, 1983). Abbott's intellectual stance allowed her the confidence to insist that social work be considered a social science. All three women came from distinctly different academic and social backgrounds. Addams was a first-generation college woman and came from a wealthy family. Richmond was a high school graduate and an orphan who was raised in poverty by her grandmother. Edith Abbott, having been educated in England, went on to receive a doctorate in political economy. She was considered to be highly intelligent and an elitist (Brieland, 1990; Costin, 1983; Shoemaker, 1998). In addition to the significance and influences on social work education by the key actors, it is imperative that a social context be set to ground their ideologies. Specifically, during the time of Jane Addams (1860-1935) there were numerous political and social activism such as a call for human right issues, female suffrage, civil liberties, social and economic justice (Reichert, 2011; Steen, 2006; Zinn, 2003). More specifically, Steen (2006) writes that Addams' influence on the social context of her time led to human rights as an all-encompassing social work curriculum, and its core values such as dignity or human worth and social justice were

established. Yet, this is very different from Richmond (1861-1928) whose context was driven by the need for practical experiences, assessment and evidence, and accountability for work with clients – setting rules for predicting experiences (Festenstein, 2009). The social context of Abbott's influence seemed to rest on the need for more than just practical experiences and a call for justice. There was a call for scientific and academic education to aid policy reform (Shoemaker, 1998). The dialogue about each in the social work literature demonstrates their conflicting ideologies (Brieland, 1990; Franklin, 1986) and their influence on the epistemology of social work.

Epistemology of Social Work Education

With science widely accepted as a knowledge-producer and epistemology basically a deconstructor of knowledge layers, any effort to recognize the social determinants of science may be considered a common construction of epistemology. This discussion on epistemology is categorized as defining knowledge, acquiring knowledge, and knowing and assessing knowledge.

Defining social work knowledge

Through the examination of the work of these three primary actors, we present an initial list of defined sources for social work knowledge. The list is not exhaustive but highlights the main areas of knowledge in the literature. Sources of social work knowledge include:

- Information about groups,
- Knowledge of social problems and disabilities,
- Personal experiences and beliefs about personal experiences,
- Knowledge of human behavior,
- Information on understanding the individual and family life,
- Discussions on the effect of mind upon mind,
- Information on the theory of the wider self,
- Knowledge of how to eliminate imperfect thought about creating autonomy from oppression and domination,
- Information on how to overcome the *bourgeois* ideology,
- Discussions of advocacy and charity,
- Information on creating a society that satisfies the needs and power of both political and social actors,
- Knowledge of how to interpret and to intervene in changing a society,
- Critical science to provide moral and social criticism,
- Ways to liberate and create autonomy for the disadvantaged in society,
- Knowledge of the systematic process in which practitioners gathered facts, made hypotheses, and revised them in the light of additional facts from individual cases

(Agnew, 2004; Feldman & Kamerman, 2001; Greene, 1990; Stuart & Reid, 2001; Woodroofe, 1962).

Outlining sources of social work knowledge provided a lens to view the accumulation of knowledge and assessment of the social work knowledge claims. Although questions remain as to what constitute justifiable scientific knowledge in social work (Greene, 1990), the next step is to establish how social work knowledge has been acquired.

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Acquiring social work knowledge

Social work knowledge has been acquired through many avenues. For instance, during its first seven years, the social work school curriculum in New York was a combination of lectures, readings, assignments, field work, and opportunities for research (Agnew, 2004). A close reading of the literature about the creation of social work standards also describe research methods and topics of inquiry relevant for researchers in the social and behavioral sciences (Brieland, 1990; Stuart & Reid, 2001). Methods to acquire social work knowledge included surveys, interviews, focus groups, oral history, participant observation, observations of public behavior, and the analysis of existing data. Topics included research perception, motivation, cognition, identity, language, communication, cultural beliefs or practices, and social behavior (Hepworth, Rooney, Rooney & Strom-Gottfried, 2006).

Knowledge was acquired inside and outside the classroom through direct and indirect sources. The field work component relied on knowledge from practitioners and visiting lecturers (Wisner, 1958). Lectures were initially held in agencies and disseminated the guidance for practice as well as gleaned information to improve services (Shoemaker, 1998). Readings and assignments were influenced by other social science theories (Costin, 1983). In addition, Stuart and Reid (2001) asserted that social workers extracted general scientific knowledge from research studies conducted by sociology and psychology scholars. Social workers used the findings from these research studies to assess social problems and to embark on intervention methods in the profession. However, social workers were assumed to be incapable of carrying out their own scientific inquiries because they were not trained to do so (Stuart & Reid, 2001).

This assumption implied a lack of emphasis on research knowledge in the early curriculum. As social work education grew, a lack of scientific and research training persisted in schools of social work, a situation that posed concerns. The ongoing argument against research as part of the social work curricula in universities was that social work students were not likely to use research skills upon graduating (Howard, Allen-Meares, & Ruffolo, 2007). Sadly, even today the discussion continues on online social work Listservs. Despite many of the skills used in the professional practice of social work, research knowledge is still viewed as not effectively taught. Several social work educators believed that this is due to a lack of homogeneity in social work research pedagogy (Howard et al., 2007; Knee, 2002; Tripodi, 1974). This also posed a concern as we tried to examine how the knowledge gained in social work was recognized and assessed.

Identifying current problems of social work education

The current problems of social work education--the place of research and theory for practice in social work -- have emerged from its complex formation and history. First theory in social work is a controversial theme fostering a debate; one side vying for theory-free and the other vying for theory in practice as a necessity for organizing research and relationships (Lam, 2004; Simon, 1994; Thyer, 2001). Researchers like, Thyer (2001) argues that "it is neither essential nor necessarily desirable for research on social work practice to be theoretically driven" (p.22). Yet others like Simon (1994) suggest that "theory is a conceptual screen that helps social workers sort quickly through masses of data for salient informational cues to action" (p.144). Second, the historical dissention on the relevance of research in particular, rested on the stance and ideology of key social work actors. For instance, Epstein (1987) contended that no other part of the social work curriculum has been so unswervingly "received by students with as much

groaning, moaning, eye-rolling, hyperventilation, and waiver strategizing as the research course" (p. 71). As such there have been attempts to tease out this part of the curriculum and its relevance. In 2001, in their study Green, Bretzin and Leininger found a significant level of anxiety related to research in social work students in comparison to students from other disciplines, namely psychology and business. In fact some scholars fear that because of uninterested student attitudes there may be a direct translation to a lack of competence in applying research presumable resulting from practitioners' failure to prioritize and effectively integrate research in social work curriculum (Epstein, 1987; Green, et al., 2001; Howard, et al., 2007). Although both subjects are represented in the current curriculum the historical stance helps to explain the contention and on-going debate.

Development of social work curriculum and philosophies at play

With an understanding of how social work curriculums were developed and how social workers were trained, it still seemed unclear how the knowledge set and knowledge assessments were conducted. In fact it was hard to determine what counted as appropriate for social work knowledge and thus even harder to recognize. In reviews of Wisner's (1958) writings he noted that 12 years after the start of the New York Charity Organization Society (COS) Summer School in 1915, only five cities had schools of social work: New York, Chicago, Boston, Philadelphia, and St. Louis, none of which had any significant university affiliation at that time. The first classes of social work were held in summer school (June 20–July 30). The lecturers were leaders of charity departments and organizations, public officials, and university faculty from other cities who joined in this historical period in social work education (Feldman & Kamerman, 2001). At the first class in the New York Charity Organization Society Summer School, 27 graduate students were in attendance. The students' tuition was $10 (Feldman & Kamerman, 2001). This brief review showed that there was some anticipation that the knowledge would be recognized if it were affiliated with a university, sessions were longer than one month, faculty were trained in the profession, and there was a higher cost for the services.

Although several factors contributed to the slow integration of universities affiliated with social work education, one of the main factors was the universities' lack of acceptance of social work as a discipline. In fact the claim dates back to Abraham Flexner's 1915 proclamation stating that social work was not a profession but merely a handmaiden of related enterprises (Flexner, 2001). Even in 1979, Austin contended that social work was not a discipline as it failed to provide a knowledge claim which had rigor and scientific premise as did other disciplines. More recently, critics of social work education, such as Gambrill's appeal for a thorough review of the social work curriculum as being timely, and Howard, Allen-Meares and Ruffolo's (2007) dissention that some of the social work educational paradigms and models have outlived their purpose (cited Jenson, 2007). It is in recognition of these past disclaimers that led to historical inquiries for changes in the social work curriculum which demonstrates the infusion of topic similar in other professions, such as in theories and research to create a progression toward pedagogical uniformity (Knee, 2002; Howard, Allen-Meares & Ruffolo, 2007).

Another concern, regarding the historical construct of social work education originating in Flexner 1915 assertion was that the social work profession was branded as a profession for women (Shoemaker, 1998). This may be because in the early development of social work education, programs were unstructured and taught by a diverse cadre of lecturers from different disciplines (Feldman & Kamerman, 2001) across different geographic location. This emergence of schools of social work, in varied geographic locations, accounted for the large variability in

the formation of the curriculum. Aspects of this are still evident and exist in how social work is taught. In fact, the dissimilarity of social work education in the geographic location is attributed to and connected to the philosophical perspective of the location of leaders who influenced the curriculum (Franklin, 1986; Shoemaker, 1998).

Between 1911 and 1912, attempts were made to improve the level of training that students received at the New York School of Social Work by mandating that students complete a second year of applied study in an approved agency (Agnew, 2004). This initiative was well received by Edward Devine, founder and director of the New York School of Philanthropy, who introduced a new curriculum upon his return from a 5-year hiatus. This shift in the curriculum was articulated by the historian Elizabeth Mier who wrote that the social idealism gave rise to practicality (Agnew, 2004). The result was a reduction in the courses in economics, social forces, and social legislation to less than one-half of the school's curriculum and Devine hired practitioners rather than university men to serve as the full-time faculty.

Richmond's and Devine's approaches to restructuring the curriculum and faculty hiring aligned with the pedagogical convictions of a pragmatic philosophy such as that of Dewey and James (Shoermaker, 1998). Although this paradigm shift toward pragmatic or experiential learning while remaining cautious about academia's influence was not entirely embraced, Philip Ayers of the New York Summer School in Philanthropic Work contended that universities only "prepare, but do not train" (Agnew, 2004, p. 147). Yet it was believed that those who advocated for Richmond's pragmatic ideological approach wanted to preserve the social work profession's self-determination as they debated social work's place in academic social sciences.

Conversely, Abbott, in her curriculum planning at the School of Social Work in Chicago, focused on a broad professional preparation rather than on narrow specialization for just a particular agency setting (Wisner, 1960). For example, she felt that the knowledge disseminated in the school of social work must exemplify both cultural and disciplinary subjects in their own rights. Abbott advocated for an emphasis on scientific knowledge for and by those who were concerned with the development of social services and policies that would improve the lives of those served. She refuted the notion that preparation for the field of social work should be delegated to others who are in an inferior position within academia.

In 1920, Abbott proposed to the Chicago School of Social Work six domains which she claimed offered justifiable knowledge for social work education: (a) the field of social treatment, (b) public welfare administration, (c) social research and social statistics, (d) the field of law and government in relation to social welfare, (e) social economics and social politics including social insurance, and (f) the history of social experimentation (Wisner, 1958). Although Abbott's main focus was the academic emphasis on social work education, she expressed interest in the practical aspects of social work education as well (Wisner, 1960). Abbott stated that the subject of social experimentation was tremendously relevant and needed to be incorporated into the teaching content of social work (Wisner, 1960). She argued that "this subject is of great importance because experiments involving the lives of human beings are very costly and ought never to be unnecessarily repeated" (Wisner, 1960, p. 266). Moreover, Abbott claimed that building on the knowledge of the past would only enable the profession to advance and not slide backward. Abbott was very optimistic about the future of social work education in academia. She felt hopeful about the potential for the schools of social work to transition from what she considered limited vocational training to adequate standards of graduate preparation under university sponsorship. In 1931, Abbott contended that "the failure in the past to apply scientific

method and scientific leadership to the needs of the poor wasted the taxpayers' money and left behind a trail of good intentions and futile efforts" (Dunlap, 1993, p. 293).

Abbot emphasized that social work field work must consist of more than field trips and observations. She contended that students must be active participants in the practice of social work (Wisner, 1960). In 1928, Abbott argued that students were too often "farmed-out" to social services agencies without adequate supervision. She advocated for field instructors to be employed as full-time faculty members to help solve the problem of inadequate supervision. Abbott wanted to ensure that the knowledge claims of social work remained consistent, and she stated that with field instructors becoming more connected to academia; they would provide an integrated learning experience for the social work students (Wisner, 1960).

Still, the curriculum was not structured, explicit nor standard, but reflected the values of the founders. For instance, Richmond argued against including extensive academic coursework in the curriculum. Her emancipatory interest was a critical factor in shaping the orientation of social work as a profession. Her ideology was that social work knowledge was an instrument of action, included an understanding of human behavior, and reflected both knowledge and evaluation of individual and family life (Woodroofe, 1962). Some scholars in the literature referred to Richmond as the most influential person in the history of social work as a profession (Agnew, 2004; Feldman & Kamerman, 2001; Woodroofe, 1962), but Jane Addams and Edith Abbott were contributors and founders about the purpose of the profession. Addams' human rights advocacy is embedded in the core values of social work education and practice. More specifically, The National Association of Social Work Code of Ethic by which is the benchmark of social work curriculum encompassed human right practice. Also, Addams early human right activism represents a humanist generalist approach by which several social work foundation course follows. Addams community advocacy within community-based practice is reflected in social work curriculums specifically in the individuals and families in the context of the larger social environments that they inhabit (Kondrat, 2001).

Abbott's pursuit to integrate social work as a science led to not only the inclusion of research in the curriculum but endeavors to compete on similar spheres as other disciplines (Steen, 2006). Social work education has incorporated research based courses which allow students to conduct empirically based studies. As such, one can credits Abbott's fight for a social work curriculum to include research and for fostering the research resistance dialogue in the profession (Steen, 2006) resulting in the noted historical dissention today. Thus, it was through this interactive historical context that we began to recognize and to assess what would be counted as social work knowledge and to frame the first curriculum of social work education.

Assessing social work knowledge

The three historical scholars considered critical science as a lens through which to view traditional research assessment—an approach not necessarily involving inquiry into the key social actors' interpretations—versus research that concentrates on those interpretations that cannot be ignored. From the latter perspective, it was considered more appropriate for knowledge to be manipulated, publicized, taught, and shared. Thus, when knowledge is acquired and used, the basis for assessment should rely heavily on the research grounding the actors' thought (Greene, 1990). The result was the integration of many courses to make up the first school of social work that resembles what is available today.

Specifically, according to Wisner (1958), courses in philanthropy and methods of social investigation teaching materials were where social work education could be found and assessed. In fact, even the on-the-ground work of Mary Richmond, in her analysis of the underlying philosophy of social work, suggested that social work knowledge and its assessment could come from questionnaires as a means of collecting information about groups with various social problems and disabilities (Woodroofe, 1962). Richmond and her followers also believed that social work knowledge could be found in the systematic process by which practitioners gathered facts, made hypotheses, and revised them in light of additional facts from individual cases (Stuart & Reid, 2001). Richmond's pragmatic approach to understanding social phenomena was evident in her drive to exclude intensive academic courses from the social work education curriculum. Agnew (2004) argues that Richmond was committed to a pragmatic epistemology focusing on personal experience rather than on an abstract rationale as a source of knowledge. Richmond's ideology was influenced by both pragmatic philosophers such John Dewey and William James (Festenstein, 2009).

The literature showed that early leaders believed social work knowledge could be found and assessed through fieldwork but not through the scientific investigation of fundamental social welfare policy issues conducted through university-based research and coursework (Dunlap, 1993). In the end, when one considers the knowledge base construction for social work they may derive that the historical founder's use of the *friendly visitors* are still present.

Summary Social Work Education and Where We Are Today

In summary, social work education has a rich history that frames what it was and what it is today. Albeit a blurred line between social work education and social work research — no indication of professional underdevelopment (Lorenz, 2012). The terms are often used interchangeably in the literature but a distinction must be made. Social work education is often referred to as the disseminating of the social work knowledgebase. Social work research on the other hand is referred to as the process of making and developing hypotheses and conducting inquiries to gather evidence and propose explanations about work conducted in social work (Gibbs & Gambrill, 1998). Today, both subjects are effectively interwoven into and distinctly present in the curriculum responding to calls from the early leaders.

For instance, Feldman and Kamerman (2001) asserted that national leaders and agencies' leaders were in constant dialogue, seeking ways to address the growing phenomena of the purpose of social work after the Civil War. The writings of Anna L. Dawes in 1893 and Mary Richmond in 1897 illustrate the enormity of the discussion of social problems, social reform, and the need to create a formal institution to prepare reformers and home visitors. At that time no formal schools or colleges provided training for friendly visitors; they were trained within the agencies by visiting lecturers from the university and community leaders.

In 1865 we saw the formation of the American Social Science Association. This later evolved into the National Conference of Charities and Corrections in 1874 (Feldman & Kamerman, 2001). Subsequently, in the aftermath of the Civil War there was an increase in the number of staff in the State Boards of Charities and Corrections. This increase led to the escalation of paid staff for agency administration or what was known as "friendly visiting" in the Associations for Improving the Conditions of Poor (AICPs), Charity Organization Societies (COSs), Children's Aid Societies, the State Children's Home Societies, and the sectarian family

agencies, which increased the need for more workers (Feldman & Kamerman, 2001). The friendly visiting encompassed the dutiful advocacy for and empathy with poor families' plights and welfare. Feldman and Kamerman (2001) inferred that there was an emerging need for recruitment of reformers and friendly visitors to meet the rising need in the post–Civil War period. He stated that reformers and friendly visitors both needed knowledge. As a result of political and social changes, different and unique social problems were being manifested in society beyond the scope and capacity of the current charitable and corrections staff but collaborations were brewing.

One such emergent, collaborative effort to address the need for workers was in professionalizing or constructing the knowledge base of the friendly visitors/social work. Feldman and Kamerman (2001) pointed to the divide in the ideological stance between 'professional method and community sensibilities" (p. 379). More specifically, the emerging social phenomena in 1897, the shift in paradigm of charitable organizations' ability to address the social problems, required an accumulation of a knowledge base on patterns of relationships. Much of this knowledge was thought to be achieved through the saturation of courses over the curriculum to prepare students for work in the profession (Holloway, et al., 2008). This is not the case today, however as there is "no longer a mandate for academic content and the expectations have been loosen regarding curriculum form and structure" (Holloway, et al., 2008, p.1).

Because knowledge of the past often educate current work, through the exploration of the historical epistemology of social work it is clear to see how content in the curriculum was driven to the point of overload. As persons and influences changed in social work education so did the curriculum swell to a point where it was hard to teach all that was expected. As such the driving force in social work education curriculum today, Council on Social Work Education (CSWE), noted this constant swell and authored a change to competency based education (Holloway, Black, Hoffman, & Pierce, 2008). The result was what is now considered the common epistemologies of social work education or the ten outcome competencies expected from students and practitioners:

1. Professional use of self
2. Ethics and ethical decision making
3. Critical thinking
4. Diversity
5. Human rights
6. Research informed practice and practice informed research
7. Human Behavior
8. Policy Practice
9. Response to Context
10. Engagement, Assessment, Intervention, and Evaluation (Holloway, et al., 2008, p.9).

We can only be hopeful that this shift for the future will value the work of the past, the influences of the founders, and the purposes of the historical creation and context of the profession. And that the shift to competency can move us forward on the on-going debates on theory and research relevance and of being a viable profession like all the other disciplines.

Next step recommendations

We offer a few recommendations to support this move forward from where we have been. First, the key historical actors examined herein recommended that we remember to continually examine where we are heading and what we want to achieve as a profession. Abbott specifically reminds us that research does have a place. It can rise to the same level of research skills as other social science fields. The debate must end; we must now make it happen.

The second recommendation is to examine whether some advocacies of the past are worth revisiting. For instance, Richmond, who was very active in formulating the structure of the curriculum, advocated for the development of professional standards based on the widespread knowledge fundamental to charitable work. She proposed a social work training school located in a large city with direct access to philanthropic agencies; that practical work for college or university students was needed; and association with the university should not impede the emphasis on social work training over theory and academic requirements (Costlin, 1998). The Chicago School did not support Richmond's curricular proposals and instead developed an academic curriculum (Franklin, 1986). Abbott and her supporters developed a social work education curriculum based on social theory with an analytic and reform orientation that emphasized social policy and social philosophy. The differences in educational backgrounds were apparent, with Abbott's doctorate contrasting with Richmond's limited higher education exposure. Evidently these two opposing paradigms influenced and continue to influence social work education and curricula. We do not question who was right, but whether the discussion is still relevant today to ensure the grounding of the profession.

Conclusion

Clearly, any attempt to fully assess the historical epistemology of social work education lies beyond the scope of this article. Hence this analysis and evaluation of the historical epistemology of social work education in no way claims to be conclusive in the length and breadth of such a rich history. The authors are humbled by the opportunity to revisit the history of the social work profession ingression into academia. The magnitude of advocacy that took place as social work education progressed as a discipline was daunting. Clearly, the premise of social work epistemology has undertaken several paradigm shifts since its inception in the 1890s. As a result, the profession has earned its status among those disciplines that have withstood the rigor of finding a place in academia.

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Conceptualizing Ethics Education under the Joint JD/MSW Degree Program: An Overview

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Abstract

Several factors inhibit effective collaboration of social workers and lawyers. Notably are their respective professional codes of conducts which mandate divergent approaches to practice. As a result most of the dilemmas encountered by social workers and lawyers are often due to the clash of the respective ethics provisions. Interdisciplinary education has been embraced as a way to enable students to acquire the necessary skills and competencies for resolving ethical challenges in order to effectively collaborate at the several instances where their practices overlap. In view of the strategic relevance of the ethical imperatives of both professions, this article highlights various issues in developing interdisciplinary curriculum and pedagogical methods under the framework of the joint JD/MSW degree program.

> … It is recommended to the faculties of law schools and schools of Social work that by dialogue or other methods, they become ever more aware of their mutuality of interests and the increasing number of matters of common concern to both professions. *If a feeling of mutual understanding and trust is to exist between members of the legal profession and members of the social work profession, it would seem that the best way of creating this feeling would be to have it started at the heart of the educational work*

> Several methods may be explored to achieve that dialogue which is desirable between students of law and students of social work. Among such methods is *a joint enrollment of students in courses of interest to both professions.... a working collaboration between students of both professions in a clinical experience in which both groups are exposed to the complexities surrounding the legal rights, responsibilities and possibilities of those living in poverty* …(emphasis added) (NCLSW, 1969).

Introduction

Although now moribund, the National Conference of Lawyers and Social Workers (NCLSW) provided the framework for the establishment of joint JD/MSW degree programs that are currently available in dozens of schools of law and social work across the nation. In issuing the above recommendations the NCLSW's main goal was to "improve working relationships between the professions of law and social work" (Hazard, 1972, p. 423). Evident in the overall statement are, among other cogent reasons the needs to check unauthorized practice of law by determining or promoting cordial working relationship between both professions thereby reducing the tension that often manifest in situations where the practices of both professions overlap. In an evaluative study of schools that offer interdisciplinary law and social work programs, Hazard noted:

> An important aspect of promoting better relationships and wider dissemination of information between the two groups

concerns the basic professional training in each of the two
disciplines. In particular, it is a matter of importance whether
at the professional school level there is an informed and
accurate picture of social work on the part of law students
and vice versa… (p. 423).

Hazard's article, published three years from the NCLSW recommendations, found that various educational programs had already been established by some schools of law and social work across the country. The study also found that there was the opportunity for much closer cooperation between schools of law and social work. At the time the study was published only one school had established a full joint JD/MSW degree program, but there was an overwhelming expression of possibility of more joint degree programs. According to documents obtained from the Council on Social Work Education (CSWE, 2005), 47 schools of law and social work have been accredited and currently offer joint JD/MSW degree programs.

This need raises the question as to how lawyers and social workers can be best educated to work in such settings (Madden, 1998). As Schroeder (1995) has noted, "Law is a useful tool in social engineering. The more clearly social workers understand this, the more creative they can be in using law to remedy social ills" (p. 3). In the same vein, lawyers are required to be educated in social work for mutuality to exist between both professional groups at their points of convergence.

In an article: "Interdisciplinary combined-degree and graduate degree programs: History and trends," Crane (1999 cited by Coleman, 2001) argued that "It is misleading to refer to the programs as joint degree programs because students are simply enrolled in two or more totally separate terminal degree programs in two schools within the same university simultaneously" (p. 131). That perception of the joint JD/MSW education is not wholly shared by Brigid Coleman, a product of the joint JD/MSW degree program. Thus in her article titled "Lawyers who are also social workers: How to effectively combine two different disciplines to better serve clients" Coleman (2001, p. 131) contends: "My experience has mostly been one of cooperation between the two schools and awareness of the special situation of dual degree students." Evidently, the notion of joint education is susceptible to varying interpretations depending on the lens, experience, or other special circumstances of the interpreter.

Despite its relevance and necessity as a new paradigm in law and social work education, the JD/MSW degree program suffers from lack of attention in scholarship as no major research, empirical or otherwise has addressed the phenomenon to date.

The problem

As noted above, the prevalence of conflict between social workers and lawyers stem mainly from the different methods of education and socialization that produce them, as well as the influence of the legal system and legislation over both the regulation and practice of social work (Madden, 1998; Schroeder, 1995; Smith, 1970). Although this paper is focused on ethics component mainly, interdisciplinary education and differences in approaches to practice are highlighted in the table below for helpful insight into the phenomenon.

Table 1: Major impediments to interdisciplinary education and collaboration between both professions

1. Education and Training differences

Social Worker	Lawyer
Focuses on human interactions and systems theory	Focuses on statute, cases, law, procedure and strategy
Evaluates and addresses underlying issues and non-verbal cues	Evaluates and addresses present legal problems
Develops ability to synthesize information	Develops analytic skills
Field-work based	Class-room based
Experimental and reflective.	Research oriented

2. Style differences in practice methods

Social Worker	Lawyer
Collaborative	Confrontational
Supportive/consensus-building	Adversarial approaches
Relies on shared decision making	Relies on individual autonomy
Process-focused	Outcome-focused (win or lose)
Defines goals diffusely	Defines goals narrowly
Uses professional relationship to effect change in client and/or environment	Uses legal system to resolve problems

3 Differences in Ethics

Social Worker	Lawyer
Assessment driven decision-making	Client-determined decision-making
Individual and society	Individual client
Confidentiality (Disclosure required by law in limited situations)	Confidentiality (Disclosure permitted, but not required, only in very limited situations)
Mandated reporter	Not a mandated reporter

Sources: ABA Model Rules of Professional Conduct, (2001); Legal Aid Society, October, 2010; NASW (Code of Ethics, 1999).

The American Bar Association (ABA) provides leadership in legal ethics through adoption of professional standards that serve as models designed to be adapted by different jurisdictions or agencies both as an inspirational guide to the members of the profession and as a basis for disciplinary action when the conduct of a lawyer falls below the required minimum standards stated in the code. Similarly, the National Association of Social Workers (NASW) Code of Ethics sets forth the values, principles and standards to guide social workers conduct. The Code is relevant to all social workers and social work students, regardless of their professional functions, the settings in which they work, or the population they serve. The social work profession has an obligation to articulate its basic values, ethical principles, and ethical standards. Consequently, both Social workers and Lawyers face ethical and legal choices in a wide range of practice settings (Reamer, 2005). There is therefore, a need to address ethics concerns in the curriculum and pedagogy of joint education in law and social work.

Conceptualizing Ethics Content in the Joint JD/MSW Degree Program

Conceptualization requires the setting of a goal which students are expected to attain at the completion of the training in order for them to become capable of resolving ethical dilemmas among other things (Walsh, Gordon, Marshall, Wilson & Hunt, 2005; Weil, 2005). Its conceptualized should take cognizance of the historical, theoretical, and contextual factors that characterize each discipline. To be meaningful the conceptual framework needs to further be grounded in the objectives and values of issues associated with ethics, and the culture of collaborative practices.

Curriculum and ethics content

Curriculum drives how teaching and learning goals are to be accomplished. It influences the learners' perception of society while helping to shape their approach to future undertaking and roles in a variety of ways. In an interdisciplinary context, curricular development is a shared corporate responsibility needing widespread participation of all stakeholders, notably faculty and administrators. This guarantees and ensures a sense of community and connectedness, thus eliminating any cultural issues that may threaten the interdisciplinary ideal (Beyer & Apple, 1988; Cole, 2012; Hultgreen, 2006).

Joint education curriculum must contain specific learning objectives supportive of interprofessional practice-based learning and oriented toward interprofessional collaboration competencies (Colarossi & Forgey, 2006; Slater, 2007). These competences are vital in the sense that a strong grounding in ethics and related skills will help to enhance interprofessional collaboration. The literature in this domain focuses on the potential gains, and less discussion on ethics content in a curriculum with which to educate the legal and social work professionals. Ethics contents are to ensure that education provides students the opportunity to strengthen the variety of intellectual faculties that they possess or which curriculum demands (Beyer & Apple, 1988; Hultgreen, 2006).

1.Pedagogy: Instructional and learning models

Advances in modern technology have expanded the scope of Instructional Design Theory (IDT), enabling the use of new educational technologies. For example, the cutting-age technology of the World Wide Web, sources and computer-based legal research (Lexis-Nexis, West Law, among others) are important tools for social workers to update their knowledge about current changes in the law. IDT is that branch of knowledge concerned with research about instructional strategies and the process for developing and implementing those strategies. As a *science*, it is the science of creating detailed specifications for the development, implementation, evaluation, and maintenance of situations that facilitate the learning of both large and small units of subject matter at all levels of complexity, and as *reality:* it can start at any point in the design process

IDT and learning theories present guidelines for the design and application of appropriate instruction as well as offer descriptions of how people learn. Although typically grounded in learning theory, IDT is more easily applied to educational problems to describe specific methods of instruction for helping people to learn. IDT is probabilistic, not deterministic (Watson, 2007). Learning theories describe how learning occurs and are descriptive. The contemporary view of instruction is a systematic process in which every component – instructor, learner, material and learning environment- is crucial to successful learning (Dick, Carey &

Carey, 2001). This means that IDT does not guarantee but instead increases the probability that the desired instructional and learning outcomes will occur (Watson, 2007).

Distinction is made between an IDT method that defines how to organize the whole design process and an instructional model that represents a class of a pedagogical design with stronger focus on learning theory than IDT methods, for example: how to teach or how to bring people to learn. Models help a designer to visualize the problem, to break it down into discrete, manageable units. The value of a specific model is determined within the context of use (Dick, Carey & Carey, 2001).

Methods of instructional delivery

In his article titled "Teaching Ethics Seriously: Legal Ethics as the most important subject in Law School", Pearce (1998) observed that: "Despite lip service given to the importance of legal ethics, most law schools, with a notable exceptions, fail to give legal ethics the same respect and attention given to other courses, let alone a central role in the curriculum" (p. 720). A comparison of law school teaching of legal ethics and that of social work ethics by schools of social work shows that the latter is mandated by the regulatory bodies, and integrated in the social work curriculum.

Historically, the teaching of legal ethics or professional responsibility had consisted of lecture series by judges or other guest lecturer series. As Rhodes (1992) observed "For many of these series, no credit and no grades were given, sometimes, as it turned out, neither were there lectures" (p. 35). Law schools' lack of commitment to the teaching of ethics courses is blamed on what some experts termed: "character building function" of legal education (Pearce, 1998). It is widely thought that law is a science, hence the case method legal education, the use of appellate cases as the raw materials and law libraries serve as laboratories for educating legal professionals (Burns, 1993; Weinberger, 2007).

Theoretical Frameworks: Ethics, Learning Models, and Collaboration

Early ethical theories were dominated by the Divine Will and Command doctrines that also had links with Natural Law Theory (Boeree, 1999). Historically the various ethical traditions that existed across different societies did not encompass a true universal theory. However, they represented altruistic rather than egoistic attitudes towards humanity (Boeree, 1999; Freud & Krug, 2002). In its broadest sense ethical theories promoted the idea that nothing is right or wrong outside of God's will.

Contemporary ethics epistemology is split between the Utilitarian theory, concerned with the maximization of satisfaction of all relevant people's preferences and interests. The other is the Categorical Imperatives which promotes the ideal that a person should act only in ways that she or he thinks would be advantageous if everyone else did likewise .(Boeree, 1999; Freud & Krug, 2002).

In a nutshell, these principles exist to ensure: (1) *Beneficence* meaning that ethical theories should strive to achieve the greatest amount of good because people benefit from the most good. (2) *Least Harm* suggests that in a situation where doing good is impossible, a person should choose to do the least harm possible and to do harm to the fewest people. (3) *Respect for Autonomy* provides that an ethical theory should allow people to reign over themselves and to be able to make decisions that apply to their lives, and (4) *Justice,* represents the notion that is the hallmark of ethical principle of fairness to all (Rainbow, 2002).

In view of the respective ethical mandates of the two professions, lawyers and social workers need to be adequately prepared educationally to collaborate. According to a study by the Santa Clara University's Markkula Center for Applied Ethics (2010): "Making good ethical decisions requires a trained sensitivity to ethical issues and a practical method for exploring the ethical aspects of a decision and weighing the considerations that impact our choices of a course of action" (p. 3). Consequently, both the conceptual and pedagogical choices for imparting the necessary knowledge, skills, and competencies to students are of the essence.

Instructional and learning theories: Constructivism

Constructivist theory is used in this paper to justify possible the learning method. However, to better place it in context, it is briefly contrasted with Cognitivist paradigm. Cognitivist is concerned with the internal mental process of the mind and how they could be utilized in promoting effective learning. The influence of the cognitive instructional design is evidenced by the use of mnemonic devices, metaphors, chunking into meaningful parts and the careful sequencing of materials from simple to complex (Mergel, 1998). The overall benefit of this approach is its integration of new knowledge with previous information through the process of knowledge coding and representation, information storage and retrieval (Saettler, 1990). Elaboration Theory (ET), which applies to the design of instruction for the cognitive domain aims to help select and sequence content in a way that it will optimize attainment of learning goals (Reigeluth, 1999). ET is learner-centered and intended primarily for medium to complex kinds of cognitive and psychomotor learning.

Constructivism on the other hand stresses the process of learning rather than trying to identify cognitive stages. It is based on the assumption that all knowledge takes place as learners construct their own meaning from their own experience, back grounds, and attitudes. Constructivism makes learning more relevant to students by imbedding in real authentic situations, helps them learn to solve problems, think critically, and learn how to learn (Watson, 2007). Bruner (1966) and Vygotsky (1978) made substantial contributions to constructivist approaches to learning. Their works within the constructivist movement highlighted the virtues of integrated curriculum model. Curriculum integration is a generic term for varied approaches that draw on more than one subject or discipline (Klein, 2005).

Adult learning

Both the JD and MSW are graduate programs, and students enrolled at such levels are considered adults. This article employs the following three important methods for fostering learning in adults: i) Andragogy, ii) Problem-based-learning (PBL) and iii) Situated learning. Each of these methods support the assumption that adults are more self-directed, have a need for direct application to their work, and are able to contribute more to collaborative learning and practice through their experience.

Andragogy

Its relevance is based on the assumption that learning builds upon a prior knowledge that learners have (Fosnot & Perry, 2005). Malcolm Knowles defined it as "the art and science of helping adults learn" (Knowles, 1980, p. 43). This, he contrasted with pedagogy which is "the art and science of teaching children" (p. 40). Andragogy is sometimes referred to as critical pedagogy. Adult learners are intrinsically motivated hence andragogy is based on the developmental interests and self-concept of adults. The instructor has a responsibility to create

conditions and provide tools and procedures for helping learners discover their needs to know, Adult learners see education as a process of developing increased competence to achieve their full potential in life. They want to be able to apply whatever knowledge and skill they gain.

Problem-based-learning (PBL)

PBL seeks to increase problem-solving and critical thinking skills. It grew out of the field of health science education and has evolved over the years. It enhances learner-centered, multidisciplinary education that promotes life-long learning in professional practice (Boud & Felett, 1997). PBL is an instructional and curricular learner-centered approach that empowers learners to conduct research, integrate theory and practice, and apply knowledge and skills to develop a viable solution to a defined problem. According to Savery (2006), critical to the success of the approach is "the selection of ill-structured problems (often interdisciplinary) and a tutor who guides the learning process and conducts a thorough debriefing at the conclusion of the learning experience" (p. 12).

Situated learning

Situated learning targets specific technical skills that can be directly related to the field of work basically considered an off-shoot of the concept of apprenticeship and authentic tasks in learning that began in the late 1980s (Watson, 2007). Traditionally, the social and physical environment that enhance situated learning are identified by researchers, notably Herrington and Oliver (1995) to include 1) authentic context about use of knowledge in real life, 2) authentic action, 3)access to expert performances and process modeling, 4) multiple perspectives and roles 5) construction of knowledge, 6) through collaboration 7) coaching and scaffolding, 8) reflection, 9) articulation to make task knowledge explicit, and 10) assessment of learning integrated within the tasks. Computers have been identified as suitable alternatives for producing an authentic context. An advantage in applying adult learning concept in this context is the greater need for applied learning and the immediate usable knowledge which learners already possess (Silver & Leslie, 2009).

Interprofessional collaboration: *Reflective Practitioner Theory* (RPT)

Lawyers and social workers collaborate in many different ways and in different practice settings including in government offices, private agency/organizational level, in private practice whereby a lawyer employs a social worker or vice versa, or by a short term consultancy arrangement. Each of the above settings impacts collaboration and outcome one way or another. The RPT is appropriate in this context. According to Schon (1983), reflective practice enables professionals to understand how they use their knowledge in practical situations and how they can combine practice and learning in a more effective way. Therefore, knowing how to frame situations and ideas help professionals of law and social work to achieve greater flexibility and increase capacity of conceptual innovation. RPT stresses the importance of explicit training that would enable professionals to understand the cognitive maps and values maps of others. The framework suggests, accordingly, that the capacity of professionals to practice in a collaborative environment depends primarily upon their ability to understand and respect the cognitive patterns such as (a) the way others conceptualize problems and interventions, and (b) the values of every professional (Clark, 1994; Cole, 2012; D'Amour et al., 2005).

Integrating Ethics Contents under the Joint Degree Framework

Following the definition provided above, curriculum integration is characterized by "thematic studies," "multidisciplinary" and "multisubject" designs, integrated units, skills across the curriculum... There is no unique or single pedagogy for integrative interdisciplinary learning" (Klein, 2006, p. 9). Issues concerning integration of courses in an interdisciplinary education receive attention in the literature (Hanson, 2005). Since a lot of emphasis is placed on interdisciplinary education and training at various levels, the question that needs to be addressed is: should law and social work ethics lessons be integrated? On-going efforts by scholars and practitioners have focused more on proposing clinical or training programs especially adapted to the needs of few selected practice settings rather than an integrated model (Forgey & Colarossi, 2003; Kopels & Gustavsson, 1996; Madden, 2000). Few areas of intervention are mostly focused, including domestic violence, divorce, juvenile and geriatrics for which strong clinical curricula are in place at several schools.

The primary objective of education in this context is that if social workers and lawyers learn together they will be better prepared to deliver an integrated model of collaborative care and services to their patients and clients. By implementing an integrated learning model in the joint JD/MSW degree ethics contents, collaborative work habit, trust, and rapport would be promoted between the learners. Above all, curriculum should be designed to provide follow-up support to avoid creating a gap between what classroom instructors do and what clinical facilitators do to support practice-based learning. Also, each discipline would enhance the knowledge base of the other by contributing a new perspective, which could enhance experimental learning across both disciplines. Implementation of the joint degree program further requires that authorities take proactive team stance on creating the necessary structure and infrastructure, including staff development and funding needs.

Conclusion

The gap in the literature on ethics education under the JD/MSW degree program is obvious. However, literature related to ethics contents and pedagogy in law and social work institutions provides insight into the importance of teaching ethics to students as a required or core course. Given that mastery of ethical provision is key to professional decision-making in the event of a dilemma, its educational relevance to interdisciplinary education and interprofessional practice between lawyers and social workers cannot be over-stated.

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The Social Work Profession

In Critical Demand or Crisis: The Identity of the Social Work Profession

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Abstract
Social work as a profession in Canada spans many decades and can be dated back to 1927 when professionalization was established through the Canadian Association of Social Workers or may even be traced further back to 1914 when the formal training of social workers began at University of Toronto (Hick, 2010). Despite its long history, and like most other professions, there still exist core issues within the profession which need to be addressed. The purpose of this paper is to identify critical issues in the profession of Social Work. Foremost among these issues is social work's identity and relevance in today's society. We contend that identity and relevance are not dichotomous entities but are intricately linked. If the profession social work is to remain relevant, we must grapple with and solve some of the identity issues at large. The exploration of social work's identity will be undertaken within the framework of a comparative analysis of social work and psychology.

Key Words: Professional identity; relevance of social work

Introduction

The profession of social work in Canada can be dated back to 1914 when the first formal training of social workers began at the University of Toronto (Hick, 2006; OASW, 2011). Despite its long history, and like many professions, there still exist core issues within the profession that need to be addressed (Gibelman, 1999; Mellin, Hunt & Nichols, 2011). The introduction of the Psychotherapy Act as well as continued changes in the political landscape of Canada, call into question the relevance of social work as a profession. The aim of this paper is to identify and explore critical issues in the profession of social work. Foremost among these issues is social work's identity and relevance in today's world and particularly in relation to psychology. We do not believe identity and relevance are dichotomous entities but they are intricately linked. Hence, if social work is to remain relevant it must grapple with and come to resolution of the identity issues at large.

When we speak of social work's identity we are referring to the distinctiveness of social work as a profession and what sets it apart – primarily psychology and its related streams. When we speak of social work's relevance we are referring particularly to the expressed need for the distinctiveness of social workers. As a doctoral student in social work holding two master's degrees in psychology, the first author observed some striking overlaps between the two professions which caused some struggles in identifying what was unique to social work. The desire to understand the areas of convergence and divergence between these two professions resulted in the exploration and comparative analysis presented within this article. Questions that emerged included: What title should be used when one is both a psychologist and a social

worker? Which profession takes precedence in one's identity alignment? Can someone be a social worker without an MSW and only a PhD?

In contrast, the second author completed a BSW, MSW, and was in the process of finishing doctoral work in social work when this article was written. Despite being entrenched in the profession of social work, issues of identity and role have emerged in practice. For example, as a social worker in interdisciplinary health settings, colleagues from other professional backgrounds sometimes had roles that intersected with social work. Thus, whether someone has recently arrived to the profession of social work or has a longstanding history in the profession, issues surrounding professional identity emerge. In this paper the authors will position the discourse on social work's identity and relevance as a necessary exploration. Such an investigation will be conducted by means of a comparative analysis of social work and psychology, given their relatedness and the authors' experiences in both disciplines.

Grappling with professional identity

Examination and debates in social work about professional identity, status, and scope of practice have persisted since the earliest days of the profession. According to Payne (2007), "the concern about social work's identity is not just a modern phenomenon; it has been going on for as long as the term 'social work' has been in use" (p. 30). Gibelman (1999) provides a thorough overview of internal and external professional identity issues that have surfaced in the past, at the time of her article, and expectations of what she saw for future challenges regarding social work's struggles with professional identity. Thus, there are numerous examples of social workers grappling with professional identity issues throughout history. Professional issues within the literature encompasses a broad scope including: struggles to define philosophy and identity (Abbott, 1995; Baylis, 2004; Hopps, 2000), employment context shaping functional tasks (Titmuss, 1954) the impact of organizational structures (Nathan & Webber, 2010; Neuman, 2003), the effects of cost containment policies (Dziegielewski & Holliman, 2001), the impact of shifting labour markets (Healy, 2004), disagreements around scope and boundaries (Hugman, 2009), technological impacts (Pecukonis, Cornelius & Parrish, 2003) and even questions that explore whether social work is even a true profession (Bar-On, 1994; O'Neill, 1999).

Although it may seem redundant to have such lengthy conversations about social work's professional identity and role, it is necessary. Such discussions ensure that social work continues to remain relevant and responsive to changing sociopolitical and economic environments by way of our goals, priorities, and intervention strategies (Gibelman, 1999). Thus, this article aims to contribute to the ongoing conversation to foster further critical reflection on social work's professional relevance and identity particularly in relation to psychology. By examining the historical background of social work and psychology, we aim to increase the understanding of how the professions emerged and the points at which some of the similarities and subsequent identity diffusion occurred.

The historical background of social work and psychology

The birth of the professions of social work and psychology are not similar. Social work emerged in response to those ravished by poverty, taking up advocacy for change in social policies and social conditions on their behalf (Lundy, 2004). The emergence of modern day psychology on the other hand is largely attributed to Wihelm Wundt's work with experimental psychology and evidence-based research (Pillsbury, 2005). While the historical backgrounds may be different, there appear to be vast similarities in ideologies and practices.

As the two professions evolved, lines of similarities began to emerge. For instance, some in the profession of social work saw the need to establish evidence-based practice (Hall, 2008), while psychology extended more into the area of social justice and advocacy (Prilleltensky and Nelson, 2002; Vera & Speight, 2003; Goodman, Liang,Helms, Latta, Sparks, & Weintraub, 2004). In the 1950s and 1960s, community psychology began to emerge. It represented a shift away from socially conservative, individual focused practices into a progressive period concerned with issues of public health, prevention and social change after World War II (Dalton, Elias & Wandersman, 2001). This new social change agenda placed psychology and social work in the same domain and increased practice similarities between the two professions. In the practice of both psychology and social work there is now a focus on the micro, meso, and macro levels of analysis.

The therapeutic domain offers another similarity between the two professions. The bulk of psychology discourse promotes therapeutic strategies. Clinical and counseling psychologists are specially trained in understanding, preventing, and relieving psychologically-based distress or dysfunction and to promoting subjective wellbeing and personal development (Plante, 2005). The shift to employing more psychological analyses in social work practice using Freudian thought occurred in the 1920's. According to Hick (2002), "social work shifted from a concern with the societal context to a concern with a person's psychological make-up as the source of the problem (p. 47). Although some social workers may also provide a variety of services generally focused on social problems, their causes and solutions, social work training, outlook, and methodologies are quite different than that of psychologists. This distinction is most clearly seen in social work's emphasis on person-in-environment fit which is not a prominent feature of psychology

Both professions are strongly influenced by ideological lenses, though the make-up of these lenses differs. Psychology emerged from a positivist paradigm concerned with scientific methods and empirically sound research (APA, 2012). As the profession evolved, there was a shift to include more constructivist approaches, which focused on other ways of knowing. Social work evolved in the reverse order. Social work began within a constructivist paradigm; however, tensions gradually arose within the profession calling for greater evidence-based practice thus encouraging the shift towards the inclusion of a positivist paradigm. These tensions continue to remain unresolved. The table (Table 1) below depicts, in summary form, some of the key distinctions between social work and psychology. *(Table 1 on next page).*

	Social Work	Psychology
Foundations	Began as an extension of charity work	Experimental psychology (1879)
	Settlement House Movement (1880's)	Research and evidence-based practice
	Charity Organization Societies (1870's)	
	Enforcer of social order	
	In the 1900's research and evidence-based practice added (scientific philanthropy)	
Ideology	Constructivist and some argue for positivist	Positivist: empirical, objective 'value-free'
	Based on humanitarian and egalitarian ideals. Social workers believe in the intrinsic worth and dignity of every human being and are committed to the values of acceptance, self-determination and respect of individuality	Based on the medical model. It defines people in terms of pathology and disorders with a strong commitment to treat
	Governed by self – determination to the degree that such respects the rights of others	Places less value on self-determination
Practice	Ambiguous	Clearly drawn, monitored and defended boundary lines. There is little or no ambiguity in what psychology is and where it starts and ends
	Multiple foci (micro, meso, macro) individuals, families, society	Multiple foci (micro, meso, macro) individuals, families, society
	Focused broadly on social change	Focused mainly on individual level change and social change (community psychology)
	Has a prevention focus	Focuses mainly on treatment but community psychology has a prevention focus
	Focused on transforming the context in which individuals operate	Mainly focused on ameliorating individual problems within the context. Community psychology focused on transformation
	Issues of power and authority (control is justified by public policy)	Issues of power and authority (control is justified by psychologist assessment). Community psychology
	Several branches (IFG, community or integrated) but no clear distinction between them	Several distinctive branches each with their own particular focus for example clinical, social, community, industrial, experimental.

Table 1: Comparing Social Work and Psychology

Though there are striking similarities between the two professions, the scope of practice differs in important ways. Given that psychology is rooted in clinical therapeutic approaches, tensions may arise at the point that social work intersects with this area. However, in a study by Mellin, Hunt & Nichols (2011) that investigated how general therapists distinguished themselves from psychology and social work, the perception was that psychology was more focused on testing, assessing, and research than social work. Interestingly, there was a small group of participants that were unable to identify any differences between psychologists and social workers within the therapeutic domain (Mellin, Hunt & Nichols, 2011). This further highlights the challenges around professional identity relating to the role ambiguity in social work.

From an epistemological perspective there is disagreement among social work scholars about where the profession rests paradigmatically. Some scholars such as Bremmer (1956), Gibbs (2003), and Thyer (2008) suggest that social work is inclusive of a positivist epistemology. However, others like Rodwell (1998) suggest that it occupies more of a constructivist space. She notes that "social work values hold that human knowledge is never final or absolute, as does constructivism" (p. 4). Also arguing for social work's constructivist nature, Lorenz (2004) states that "once social work surrenders to the rationalistic requirements of the system and therefore adopts the dogma of positivism, it becomes set on an instrumental perspective on action and its identity becomes negatively constituted" (p. 151). That being said, social work continues to face challenges in its identity regarding its paradigmatic stance as there is a powerful emphasis placed on evidence-based knowledge encouraging a shift towards evidenced-based practice (Gray, Plath, & Webb, 2009).

Heinonen & Spearman (2006) identify another significant factor threatening the professional identity of social work, role ambiguity. The role ambiguity in social work concerns the dilemmas faced by social workers in the client relationship. While social workers are helpers, they are often expected to enforce rules and regulations in the helping relationship with the client. For example, roles related to social welfare practice have historically been associated with social control (Rodger, 1998). Acting as a helper and a social control agent are two roles that can beat odds with each other. One of the threats of such ambiguity is that the vast diversity of roles may lead to an inability to develop competence (p. 49). The all-encompassing nature of social work means that there are several competing views within the profession, which only adds to its identity crisis.

Another factor that may give rise to social work's tenuous identity is that it is not a consistently regulated profession in Canada. This is problematic in terms of professional identity. If social workers were to remain in community-based settings where they are the primarily professional, this fact may not be an issue at all. However, engaging in practice, particularly within hospital settings and clinical practice amongst professional interdisciplinary teams contributes to tensions within the profession. For example, social workers within professionalized settings such as hospitals are required by their employer to register with the local social work governing body – even if it is not an overarching professional expectation. Not only is there a lack of consistency with professional regulation, there are longstanding tensions in the profession between those who support regulation and those that do not. This further contributes to the diffusion of professional unity in social work.

Typology of social work

What is to be distinctively social work? Payne (2005, 2007) suggests that social work comprises three distinct elements: the therapeutic, social order, and transformation. Payne (2005, 2007) describes these three fundamental views of social work with each of these views delineating a particular way in which this interplay manifests itself. "Every bit of practice, all practice ideas, all social work agency organization and all welfare policy is a rubbing up of three views of social work against each other" (Payne, 2007, p.12). Although these distinct areas are reflective of social work practice, the emphasis shifts depending on the context and focus of practice.
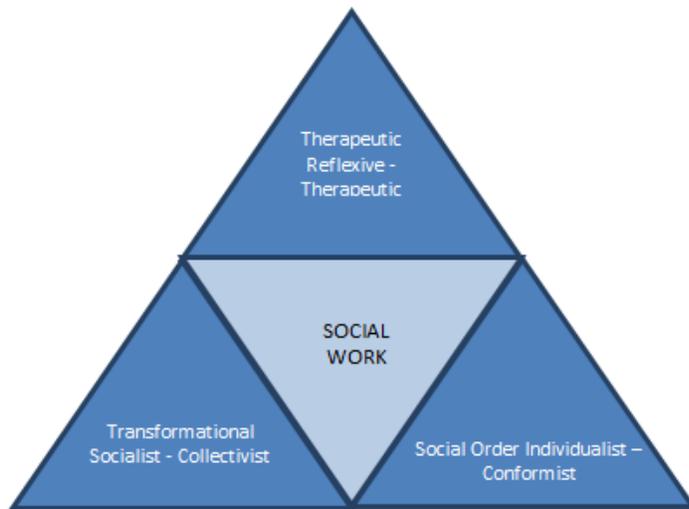
Figure 1: The three views of social work (Payne, 2006)

According to Payne (2007), the therapeutic view conceives of social workers as striving for the optimal well-being of individuals, groups, and communities by encouraging and facilitating growth and self-fulfillment. This view focuses on the interface that takes place between social workers and their clients when the goal of the former is to achieve the wellbeing and growth of the latter. It is through this dynamic interaction that clients then gain power over both their internalized processes and the external world in which they live.

From the social order perspective social work is seen as a component of welfare services to individuals within society (Payne, 2007). Social workers meet individuals' needs by adopting maintenance approaches with intent to assist people during periods of difficulties until time that a state of stability is achieved. According to this view, the aim of social work is to solve people's problems in society by providing help or services thereby facilitating a better individual fit within general societal expectations (p.14, Payne, 2007).

According to the transformational view of social work, transformation of societies is first necessary to benefit the oppressed in a meaningful way. The transformational perspective sees the elites in a society as accumulating and perpetuating power and resources for their own use and benefit (Payne, 2007). This, in turn, oppresses and disenfranchises those who are most disadvantaged. Thus, social workers should strive for more egalitarian relationships in society so that the most disadvantaged within society can obtain power. In this view, social workers embrace the value of equity and believe that individuals cannot achieve personal or social empowerment until large-scale transformations take place. The transformational view asserts that social workers must then, "identify and work out how social relations cause people's problems, and make social changes so that the problems do not arise" (Payne, 2007, p.14).

Although the therapeutic aspect as it relates to striving for the well-being of the client is a foundational idea of social work, making clear what this means appears to be challenging. For example, diagnosis is included as one of social work's functions in the following description:

> The scope of practice of the profession of social work, means the assessment, diagnosis, treatment and evaluation of individual, interpersonal and societal problems through the use of social work knowledge, skills, interventions and strategies, to assist individuals, dyads, families, groups, organizations and communities to achieve optimum psychosocial and social functioning (OCSWSSW, 2008).

The concept of diagnosis has a lengthy history of controversy in Canadian social work (Turner, 2005). For some, diagnosis refers to a formal series of judgements that provide the foundation for action or inaction with a case. The authors' aim is not to diminish the importance of professional judgment in social work as this is a crucial role and "the hallmark of social work" (Pollack & Rossiter, 2010, p. 160). However, the flipside of the controversy surrounding the use of diagnosis in social work is that it is a term adopted from medicine and gives an impression

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that social work is aligned with the use of the Diagnostic and Statistical Manual of Mental Disorders (DSM) to make formal conclusions about pathology (Turner, 2005). If so, the term diagnosis is employed inappropriately and promotes a tension with social work's strength based foundation. Despite the fact that some social workers embrace the term diagnosis, which signifies a formalized approach to judgment, it is concerning that there are "very few social work diagnoses are available for comparison" (Turner, 2005, p. 104). Thus, the ambiguity in language around what social workers actually do contributes to the challenges of identity that the profession faces.

Although important in shaping social work in some contexts, the transformational element is not distinctive only to social work. Transformation features prominently in community psychology as well. Looking at the employment trends of Wilfrid Laurier graduates of the MSW program, the majority indicated that they were involved in some kind of counseling which speaks to the prevalence of some type of therapeutic involvement despite there being some ambiguity of what that might be (Wilfrid Laurier University, 2007). However, data drawn from two hundred and six graduates of Wilfrid Laurier University, between 2003 and 2007 showed that less than five percent of graduates each year indicate involvement in any kind of social or political action or advocacy (Wilfrid Laurier University, 2007). Striving for large scale social transformations and making social changes in order to circumvent problems requires much greater involvement in social or political action or advocacy than what is reported here. However, data from this same study showed that there was an excess of sixty-five percent of new graduates involved in case management activities. Such figures corroborate the contention that social work may not have as large a stake in social or political transformation as perceived.

Where social work seems most consistent in maintaining a role is in the social order domain. This assertion is again well supported by an analysis of the employment trends of social work graduates from Wilfrid Laurier University. For instance, the data shows that Family and Children Services consistently remained the second largest employer of MSW graduates (Wilfrid Laurier, 2007). Social work began as an extension of charity work and to enforce social order. From the literature, though social work shares some of the transformational and therapeutic domains our largest contributions to date seem to be in the area of social order (Hick, 2010). In conjunction with the social order view, some in social work believe that, "helping citizens find a way through complex welfare systems should be its main role. It remains central to social work" (Levy & Payne, 2006, 323). Although social work practice may take on diverse forms such as clinical, community, and policy focuses, an emphasis on the social order element of Payne's (2006) typology appears to be the most prevalent in social work discourse. Thus, Figure 2 depicts the authors' conceptualization of the most dominant of social work discourse in comparison to psychology.
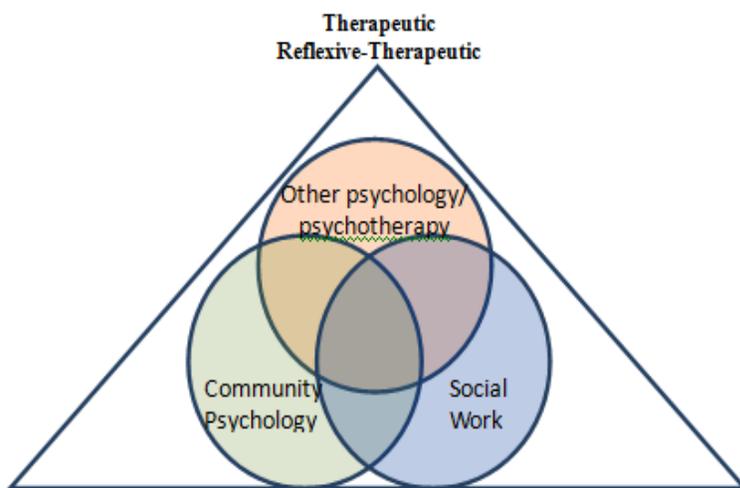
Figure 2: Social work and psychology

Values as Distinctive

Hick (2002) suggests that the defining characteristic of social work is "the opportunity to make a difference" (p. 66). Since the roles are ambiguous and the practice overlaps with other professions, what is distinctively social work then are the values held by social work. At best this assertion seems elitist and reeks of an air of unsubstantiated grandiosity. In reality, the values that undergird the social work profession are not unique but are also the underlying values of professions that do similar work especially in relation to the transformative domain. For example, the Canadian Code of Ethics for Psychologists (Canadian Psychological Association, 2000) outlines four key principles to help guide ethical practice of psychologists. These are i) respect for the dignity of persons; ii) responsible caring; iii) integrity of relationships; and iv) responsibility to society (Canadian Psychological Association, 2000). Similarities are evident when these are compared to the six core social work values and principles disseminated by the Canadian Association of Social Work (CASW) (CASW, 2005). These are: i) respect for the inherent dignity and worth of persons; ii) pursuit of social justice; iii) service to humanity; iv) integrity in professional practice; v) confidentiality in professional practice; and vi) competence in professional practice.

Differences within social work

Another factor that seems to contribute to the identity crisis in the social work profession is the vast differences in social work practice across jurisdictions. Although, this is not unique to the social work profession in Canada, it stands as a barrier to forging a solid professional identity. "From the definition of social work practice through the regulations and on to the design of the organizational structures, there are more differences than similarities among the jurisdictions" (MacDonald & Adachi, 2002, p.11). These differences become problematic as social workers cross international, national, and provincial lines. Our identities can become mired in a pool of inconsistencies. Within the Canadian context, it seems that one logical way to address this was through compliance with the Agreement on Internal Trade (AIT). The AIT refers to an agreement signed by Canadian First Ministers in 1994 which came into effect in 1995 (AIT, n.d.). One of the purposes of implementing the AIT was to remove labour barriers that exist when workers in regulated occupations move and work in different provincial jurisdictions (AIT, n.d.). The AIT encourages greater consistency through standardized regulation (AIT, n.d.).

What is the Future of Canadian social work?

The 2000 sector study (Schmidt, Lafrance, Knowles and Westhues) predicted growth of the profession. Employment opportunities will continue to be good (CASSW, 2001, p. 8). Schools of social work across the country seem to be graduating larger numbers of students each year. This is one indication of growth in the profession. Another indicator of growth is the new social work programs that have emerged at some schools; for example Ryerson University in Toronto has introduced a new MSW program as of 2007, University of Windsor began an expansion of their MSW program beginning 2007, and Wilfrid Laurier University added a MSW in the Aboriginal field of study. Despite these promising signs, there are at least two variables that were not taken into account at the time of the sector study: the current economic downturn and the emergence of the College of Psychotherapists and Registered Mental Health Therapists of Ontario.

An uphill struggle in a downhill economy

It was projected that employment in the social work and social service sector would grow by two percent per year, consistent with Canadian population growth projections (CASSW, 2001 However, in the last few years government cutbacks in social spending have led to a reduction in the availability in of social work jobs in government settings. As the economy faces a recessionary period, such trends are likely to increase.

One of the redeeming aspects of these employment reductions is the opportunity for social workers to align their practice with their values. Social change, social justice, and the transformative values of social work are often at odds with government agendas. Therefore, unless social workers are consciously engaging in subversive maneuvers working within government funded and mandated agencies, government settings can compromise the inclusion of the transformative element of Payne's (2007) typology.

Psychotherapists or social workers: Choosing a membership

The introduction of the Psychotherapy Act has given rise to the professional regulating body called the College of Psychotherapists and Registered Mental Health Therapists of Ontario (CRPRMHTO), an accrediting organization. This has caused a stirring in the profession of social work (Cooper & Freeland, 2007). The inclusion of social work into the CRPRMHTO prompts consideration of what this means for social work as a profession. Will social workers opt for membership with the CRPRMHTO instead of with social work? Will the inclusion of social work into the CRPRMHTO further diffuse social work's attendance to transformational elements and social change? A number of scenarios are possible, one of which is that social work's identity will further be obscured as more persons holding social work degrees migrate towards registration of CRPRMHTO (Cooper & Freeland, 2007). This will inevitably lead to shrinkage in the numbers of registered "social workers" and more importantly potentially lead to a shrinkage of social work strength. Our main concern with this endeavour revolves around the increased secularization of social work and an increase in "fuzziness" in understanding the uniqueness of social work. However, these perceived threats to the profession may in fact serve as tremendous opportunities for social work to further refine and define itself. One possible redefinition of the profession could be to ground itself firmly in the social order domain and aggressively pursue its identity in the area of transformation. This in part is consistent with Olson (2007) who believes that the core identity of social work is intertwined with the promotion of social order (Hugman, 2009). Furthermore, if we truly are going to make a difference then taking a stance that aligns social work with transformation is also required.

Conclusion

Social work has had considerable relevancy, in part because it fulfilled a role that it was seen as vital to society. That reality has changed significantly with the emergence of other professions that intersect with social work's role. For example, community psychology evolved carrying the same social justice torch as social work with a similar transformative aim. Therefore, psychology began to encroach and make claims in the same arena as social work. Although Payne's (2007) typology provides a useful tool to reflect upon social work's identity and role, it also highlights that some of the elements within this typology are not unique to social work – such as with the comparison of psychology. The comparison presented here between social work and psychology is not to imply that either of these professions have a unilateral approach to practice. However, this comparative analysis has highlighted some key areas of

convergence and divergence between the two professions. Given these areas of convergence, it is necessary for social work to make some determinations about what it is that makes us relevant. Perhaps the threats we currently face as a profession also present great opportunities for us to critically reflect on our intentions, stake our claim, and prove our relevancy.

As we conclude, it should be noted that the dichotomy between the self and social work experienced by the first author no longer exists. Both authors find their niche and stake their claims solidly within the profession of social work. Although there are professional issues that remain to be resolved, we are convinced that there are brilliant minds at work who will continue to make advances to ensure that the profession remains relevant and that these critical identity issues are dealt with so that practice can continue for the betterment of our world.

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Will History Repeat Itself? An Overview of the Development of Knowledge for the Professional Social Worker

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Abstract

The Industrial Revolution transformed the social, economic, political and intellectual landscape of the United States. This transformation also manifested in a philosophical shift within social work practice, eventually leading to the field seeking professional status. In addition to briefly elaborating on this shift, this paper will discuss how the process of, and commitment to, professionalizing social work has affected the pursuit of knowledge over time, and has resulted, for better or for worse, in a professional emphasis on building practice knowledge through scientific research. As described in more detail herein, there have been mixed reactions and conflicting implications to social work's commitment to positivist and neo-positivist methods as a means of garnering relevant knowledge. The conclusion of this analysis will address how these themes in social work's history influence current practice, and will provide concrete suggestions toward a new direction for the profession.

A Brief History of the Professionalization of Social Work

Early social work

Prior to the advent of the professional social worker in the United States, volunteer-based charity organizations and settlement houses attempted to address the urban social problems caused by the Industrial Revolution. Although this charity work was initially motivated by a spirit of Christian brotherhood, the zeitgeist at the turn of the 20th century called for scientific, rather than exclusively religious, explanations of cause and effect. This ideology affected the pursuit of knowledge for unpaid social workers. The new idea that poverty could be caused by discord between individuals and their environment, rather than a moral failing, suggested that pragmatic action could be taken to alleviate suffering (see Addams, 1910; Richmond, 1917; Franklin, 1986). Knowledge employed by these volunteers was acquired through an apprenticeship model and advanced through practical experience. Using practice-based knowledge grounded in a rational, and therefore scientific, approach put the field in a position to focus on the "development of a discipline that could be widely practiced and communicated by education" (Johnson, 1947, p. 300). Formalizing social work education would be the first major step toward professionalizing the field.

The laboring oar in establishing social work education was taken up by social caseworkers who focused their intervention on individuals, rather than settlement workers, who emphasized changing social conditions. Mary Richmond, then director of the Baltimore Charity Organization Society, and Edward Divine, executive director of the New York Charity Organization Society, advocated for social work education and the first course was offered in New York in 1889 (Austin, 1983; Richmond, 1917). Because social work education was established by caseworkers, the focus on knowledge and methods relevant to casework grew as the field continued to professionalize. The formal education model of transmitting social work knowledge did not eclipse the value of practicing in the community, however. Mary Richmond described that "case work cannot be mastered from books or from class room instruction alone,

although both have their place in its mastery" (Richmond, 1917, p.32).   Attaining social work knowledge, then, implied a synthesis of education and practical experience.

The Flexner factor

Schools of philanthropy proliferated and the number of career caseworkers grew.   As a means of furthering the professionalization of social work, the 1915 National Conference of Charities and Corrections convened to discuss education for social work. Abraham Flexner, who authored a transformative report on medical education five years earlier, was invited to address whether he believed social work to be a profession (Austin, 1983; Flexner, 2001). His answer was no, social work was not a profession. Flexner's analysis was largely due to his perception that the field lacked a scientific knowledge base (Flexner, 2001).   Although the casework approach was scientific in that workers sought rational explanations for social problems based on information obtained through the five senses, Flexner pointed out that social work did not employ its own scientific knowledge to solve the problems it identified. Rather, Flexner argued, social workers acted as mediators between individuals and actual professions (Flexner, 2001). While it is unclear based on social work literature the extent to which Flexner's speech shook the confidence of practitioners on the front lines, it certainly spurred a century of academics and authors to actively pursue scientific social work knowledge, to once and for all prove social work's professional status.

Possibly in response to Flexner's critique, by the First World War social work had largely abandoned its community reform focus, instead pursuing full-throttle the advancement of knowledge regarding "family dynamics and individual personality development" (Axinn & Levin, 1975, pp. 152-153). Mary Richmond authored her seminal work, *Social Diagnosis*, in 1917. The goal of the book was to provide a basic foundation for social work knowledge through casework. Richmond saw that casework and social reform were both important to improving the lives of social work clients, however, she recognized that methodological techniques for casework would thrust social work toward professional status (Richmond, 1917).

Social Work as Casework

The primacy of casework within the burgeoning profession was unequivocally agreed upon by the social work community at the Milford Conference between 1925-1929. The Milford Conference included twenty-five of the nation's leading social workers who convened annually during its four years to discuss aspects to the ongoing development of the profession (Lee & American Association of Social Workers, 1929). The Milford Conference report discussed that social work was on the precipice of fully professionalizing and that in order to achieve professional status the field should focus on general practice, education and, for the first time, research. The Conference report urged social caseworkers to undertake research themselves. Importantly, the Milford Conference participants suggested that social work research should be purposeful. "The research of the social case worker should go beyond the discussing of data and principles necessary for the discharge of his own immediate function. It should aim to throw light upon deep-seated factors in social life which lead to difficulties of adjustment between the individual and his social environment" (Lee & AASW, 1929, p. 42). By explicitly calling for social work research, the field furthered its aim at professionalization. However, the problem of undertaking this research—who, what, when, where, why, and how—only seemed to further complicate social work knowledge and its ability to obtain, per the auspices of Flexner, true professional status.

The Professional Social Work Researcher

Arguably, one of the most significant outcomes of the profession's research agenda following the Milford Conference was the beginning of a shift in social work authority from the practitioner to the academic. This had enduring implications for the way knowledge was developed and disseminated. The shift was instigated by a number of professional activities including the creation of the Council on Social Work Education (CSWE) in 1946. In order to actualize the field's focus on research, the CSWE commissioned a series of reports to evaluate social work education, starting with the Hollis-Taylor report in 1951 that criticized social work's knowledge base as unsystematic (Dunlap, 1993; E. V. Hollis, 1951). A second report by Mencher in 1959 called for a specialization in social work research, similar to specializations in casework or group work (Dunlap, 1993). By training researchers in schools, the field could further build its academic cohort and, hopefully, its professional status.

These newly trained researchers went to work to prove, using positivist methods, that social work interventions were useful. However, Joel Fischer's (1973) metaanalsyis of experimental studies on social casework suggested that in half of the studies "clients receiving services in the experimental group were shown either to deteriorate… or to demonstrate improved functioning at a lesser rate than control subjects" (pp. 15-16). The professional reaction to this research was not to remain loyal to practice knowledge by questioning the applicability of methodology or measurement, but rather led to widespread critique of the effectiveness of social work interventions. These results were indicative of a repetitious effect caused by professionalizing: in order to garner professional respect, social work needed to scientifically research its practice, but the results of these studies were grim; so, motivated by the perceived need for supportive studies to grant social work true professional status, thinking about practice shifted toward obtaining better scientific results. This finalized the transfer of the responsibility of developing professional social work knowledge from the front line workers to the academics, and prompted a period of self-consciousness in the field that persists to the present.

This insecurity regarding the capabilities of social work practitioners, and subsequent power transfer, was apparent in William Gordon's (1965) article, "Towards a Social Work Frame of Reference", which was written in follow-up to the *Working Definition of Social Work Practice* formulated by Harriet Bartlett and the recently formed National Association of Social Workers. The discussion by this time had shifted from "Is social work a profession?" to "What is social work *doing* as a profession?", the pejorative subtext of the latter suggesting the field was hanging onto its professional status by a thread. Gordon proposed that the crux of social work, and its only hope for professional survival, had to do with its knowledge and values, not its practice methods or techniques. He pointed out that developing this prescribed body of scientific knowledge would require "a focusing and concentration of effort on a more restricted range of phenomena than [social work was] used to dealing with and a concentration on a relatively fewer number of main ideas or themes" (Gordon, 1965). Since social work had originated from a bog of social problems, and was historically committed to helping the vulnerable, oppressed and disenfranchised—a complicated population—Gordon's suggestion pointed to a sentiment within the field that would cause further fractioning between practice and research, and between researchers: will our knowledge-base be enhanced by developing simpler interventions that can be easily researched?

How to do social work science: The epistemology debate

A rash of criticism to the reductionist movement in social work academe arose during the following decades. Florence Hollis (1968), writing about social work education, urged educators to maintain some skepticism about research, highlighting the fact that social work research was still in its infancy and relied heavily on methods from psychology and sociology which often fit poorly with social work practice. She also pointed out that "not all findings in social work are reported in writing…. this phenomenon of the oral tradition leads to serious gaps in our knowledge of the history of casework practice and theory" (F. Hollis, 1968, p.188). This called for awareness in educators and social work scholars of the limitations of positivism, as well as the existence of subjugated or otherwise unavailable knowledge.

Roberta Wells Imre (1984) also fought back against professional allegiance to logical positivism. She argued that "the separation of knowledge and value is an epistemological issue that reflects some serious current problems in the profession" (Imre, 1984, p. 41). Importantly, Imre also acted as whistleblower on her academic colleagues who had seemingly become so obsessed with acquiring scientific knowledge that values, social work's bread and butter, were being ignored. Her point was not that the scientific method should be categorically discarded, but that it was only one of many ways of acquiring knowledge.

Most recently, two key pieces highlight the ongoing epistemological discussion originating in social work's drive to professionalize. Cnaan and Dichter (2008) point out the complicated nature of social work in that it is a type of work and a discipline, as well as an art and a science. The authors make this point to argue that "overquantifying social work" both deteriorates our profession and overlooks the "art of practice" (Cnaan & Dichter, 2008). However, despite this acknowledgment, the authors suggest that in order to maintain professional status, social work must focus on slowly acquiring social work knowledge through neo-positivist research. The authors advocate for continued use of "evidence-based practice" using Gibbs and Gambril's five stages of knowledge use (see Cnaan & Dichter, 2008).

On the other end of the epistemological continuum, Longhofer and Floersh (2012) convincingly argue that social work research should employ critical realism, a philosophy of science that "allows us to rethink positivist and conventionalist assumptions about the fact/value relation" (Longhofer & Floersch, 2012, p. 499). The approach offers an alternative to positivist research questions, measurement tools, causal determination, etc. Using this progressive research paradigm, the authors suggest, would allow social work to close the "theory-to-practice gaps" still present in the field. However, the authors recognize that employing this philosophy of science would be subversive and may require researchers to "relinquish the benefits of academic/disciplinary inclusion, upward or lateral mobility" (Longhofer & Floersch, 2012, p. 513). Reviewing these recent articles, it is clear that due to social work's focus on professionalizing, social work research still maintains an air of intellectual superiority to practice wisdom, and that the field lacks consensus regarding a suitable research paradigm.

In summary, social work's impulse to professionalize has mainstreamed the nature of knowledge throughout the history of the field: first, by establishing schools that taught casework methods for working with individuals and families; second, by unifying behind generic practice and calling for social work research; third, by shifting the responsibility for knowledge development from practitioners to scholars and researchers; and finally, at present, by concurrently employing and criticizing traditional research methods. What this boils down to is

the field's ongoing search for approval from external mechanisms (i.e. Flexner, the scientific community, and funding sources), which seems to be achieved, at least partially, by meeting the status quo rather than advocating for change. The premise of the ongoing epistemological debate in social work begs the question as to how social work research can actually contribute to practice. Despite the critiques highlighted above, positivist and neo-positivist research methodology has maintained a premiere position, and researchers continue fighting for research-based practice in order to enhance the field's credibility. Repeating history like this keeps us going in circles and valuable information is lost in the process.

Where Do We Go From Here?

Our field is in a position to break free from, and transcend, the cycle of divisiveness within the field. The theme of professionalization pushing social work towards scientification highlights the limited capacity of research to enhance practice. The original purpose of research in the field was to ensure that practice was actually helping the people we were trying to help. This is an honorable goal. However, by all but dismissing traditional casework as ineffective, as was done by many authors (e.g., Fischer, 1981; Gambril, 1999; Reid, 1977), and returning to research to find answers for practice, the field has arguably fallen further from its professional goals as well as its values. Neo-positivist research, while conceding that no research is value-free, can still limit the expression of social work values by utilizing outcome measurements that do not reflect the experience of the oppressed and vulnerable—the folks we are trying to help.

On the other hand, participating in research can help our client population in certain ways: by bringing in funding for practice-based projects, and offering a platform for our voice. If social work were to abandon the components to our field that meet external standards of professionalism, including research, we may lose the chance to help our clients altogether. Therefore, it seems, reconciling these competing elements, and capturing as much knowledge as possible, is best accomplished by embracing a pluralist research paradigm to examine practice-based phenomena from multiple angles, using multiple, competing, methodologies (i.e., utilizing neo-positivist, heuristic and critical realist paradigms, etc.), all grounded in our values.

Implications for Education, Research and Practice

Imbuing our values at all levels of social work has implications for how the field operates. Specifically, an environment of mutual respect, exemplifying the importance of human relationships, must be fostered in classrooms. This is not to say that professors of social work do not have valuable knowledge to transmit to students; but it is imperative that social work professors impart such knowledge in a way that empowers students to love learning, and that will encourage them to maintain an interest in continuing education after school. The push to communicate research findings in a user-friendly way must continue so that all social workers can participate in discourse regarding research findings. This also asks that social work researchers question findings which suggest a wholesale failure on the part of practitioners. Research questions, measurement instruments, statistical tools and researchers themselves are fallible. Social work researchers must strive to find harmony between research findings and practice wisdom; to live the values of our field.

Social work practitioners can learn from the experience of their foremothers by participating in, and expanding upon, the research-to-practice and practice-to-research communication pathways. Implications for practice also include a commitment to maintaining mutual respect for social workers involved in education and research. On the ground this would

manifest in practitioners reaching out to researchers with questions that arise in practice, and staying connected to research findings to incorporate into practice. Practitioners and researchers should not be pitted against one another, each attempting enforce their preferred epistemology on the other. Rather, they should be working in tandem to build many types of knowledge, such as quantifiable, values-based or intuitive, that aid our clients. Supporting the field in all of its demonstrations from within encourages problem-solving by all.

Conclusion

Grounding this profession in its stated values necessarily involves social workers practicing the social work principles with their all of their colleagues, whether they be researchers, practitioners or educators. Fostering professional unity and mutual respect, whereby power differentials between social workers are diminished, will mitigate ongoing division in our attempts to build knowledge. Our profession's development, as described in this paper, suggests that the urge to choose a single mechanism for harvesting and generating knowledge is misguided. Privileging one source of knowledge is also antithetical to our values. Counter-intuitively it is by embracing pluralism, the manifestation of professional self-determination, that is required for the field to unite and avoid repeating history.

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Qualitative Review

Reality TV Therapy: Implications for Mental Health Stigma and Service Utilization among African-American Adolescents

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Abstract

The literature has documented the presence of mental health stigma in African-American communities. Researchers have investigated the impact of this stigma on treatment seeking behaviors for different sub-groups of African-Americans. Recently, a number of reality television (RTV) programs with African-American casts have broadcast episodes where their main characters engage in mental health counseling to address a range of concerns. While there have been some investigations into the impact of television programming on a number of youth behaviors, research has not yet explored the impact of these RTV programs on mental health stigma and service utilization among African-American teens. This paper suggests that examining the influence of this form of RTV programming may have noteworthy implications for addressing mental health stigma and African American adolescent mental health service use, and references some implications for social work practice with this population.

Introduction

In the United States, less than 25% of children and adolescents who need mental health services receive them (Hammack, LaVome Robinson, Crawford, & Li, 2004). There are particularly low rates of mental health treatment for psychological issues in low-income communities where mental health needs are reported to be high (Thomas, Temple, Perez, & Rupp, 2011; U.S. Department of Health and Human Services [USDHHS], 2001). African-American adolescents' patterns of mental health service use have been given significant attention in the literature (Alicea, Pardo, Conover, Gopalan, & McKay, 2012; Chandra et al., 2009; Husky, Kanter, McGuire, & Olfson, 2012). Some of this discourse focuses on mental health stigma and has specifically examined how stigma deters African-American adolescents' from accessing treatment (Lindsey, Korr, Broitman, Bone, Green & Leaf, 2006). While discussion has focused on family, community members, and peers as sources that help perpetuate stigmatized beliefs regarding mental illness and mental health treatment (Breland-Noble, Bell, & Burriss, 2011; Lindsey et al., 2006; Lindsey, Joe, & Nebbitt, 2010), an investigation into other sources of influence may contribute additional perspectives to this conversation. This paper suggests that research is needed to examine the impact of reality television (RTV) programs on mental health stigma and treatment seeking behaviors among African-American adolescent viewers, and to explore the implications of this programming on social work practice with this population.

Background

As detailed by the Surgeon General's Report (SGR) (USDHHS, 2001), "racial and ethnic minorities bear a greater burden from unmet mental health needs and thus suffer a greater loss to

their overall health and productivity" (p. 3). Other literature suggests that African-American adolescents are among youth of color whose mental health is likely to be further threatened by poverty (Brown & Grumet, 2009). Given these presenting risks, there is an increased concern about the relationship between mental health stigma and patterns of untreated mental health issues among African-American teens. There is also a concern about this group's vulnerability to negative outcomes (i.e. poor school performance, distressed family relationships, delinquency, and engagement in sexual risk taking behaviors) as a result of African-American adolescents' untreated mental health needs (Chandra et al., 2009; Schwarz, 2009).

Mental Health Stigma

Several factors have been discussed in the literature as discouraging African-American youth and their parents from seeking mental health care, including experience of racism, discrimination, and oppression within the health care system (Willie, 1995); lack of knowledge about mental illness (Brown & Grumet, 2009; Chandra et al., 2009); financial barriers to accessing care (Kapphahn, Morreale, Rickert, & Walker, 2006); distrust in clinical treatment modalities and professionals (Kapphahn, et al., 2006); absence of community-based, culturally competent services (Alicea et al., 2012); reliance on informal social networks and religion/spirituality for mental health support (Parks, 2007; Pratt & Brody, 2008); and stigma associated with mental illness and mental health treatment (Breland-Noble et al., 2011).

Among these factors, the presence and impact of mental health stigma has been repeatedly investigated with African-American teenagers (Breland-Noble et al., 2011; Lindsey et al., 2010). The results show a complex and dynamic picture of how stigma presents and influences attitudes, beliefs, and behaviors related to mental health service use. For example, based on focus group discussions with African-American caregivers, Breland-Noble and colleagues (2011) described African-American parents as being "concerned that if an African-American teen was identified as having a depressive disorder, he or she would automatically be exponentially stigmatized" (p. 231). The authors suggested that a resulting "unfortunate consequence of this perspective is that families may allow a depressed teen to suffer in silence as a means of 'protecting' the teen from mental health stigma associated with seeking care" (Breland-Noble et al., 2011, p. 231). Researchers examining the perspectives of African-American adolescents have reported similar discussion of mental health stigma, but also suggested that African-American adolescent's peers reinforce this stigma and sometimes indirectly discourage youth from accessing care (Lindsey et al., 2010). However, aside from stigma generated through social networks, Anglin, Alberti, Link, and Phelan (2008) indicated that other factors may also play a role and suggested that more research is needed.

Media Exposure and Adolescent Behavior

Media has been highlighted as one powerful sphere of influence for adolescents in the United States (Martin, 2008). The literature suggests that youth potentially internalize what they observe on television, computers, music videos, video games, and other forms of media based entertainment, and that these materials directly and indirectly influence their behaviors (Villani, 2001). Particularly for adolescents engaging in the complex tasks of identity formation and development, television may be used as a "toolkit of possible ways of being" (Brown & Witherspoon, 2002, p. 155). Recently, reality television has become a dominating force in media programming that attracts adolescent audiences. Research is just beginning to examine the implications of this particular type of television show on viewers.

Reality television programming

Reality television has been defined as television programming that involves everyday people and their real life experiences as opposed to strictly using actors and scripts (Reiss & Wiltz, 2004; Stefanone & Lackaff, 2009). Orbe (2008) describes different forms of reality programming, including celebreality, which chronicles the lives of celebrities; documentary style reality shows; competition shows; and transformative improvement programming, which follows individuals as they actively work on making-over some part of their life. RTV has existed in the form of news programs and biographical and historic shows; however, contemporary adaptations of this form of television programming have helped RTV become a significantly popular genre of entertainment over the past few years (Orbe, 2008).

Rose and Wood (2005) proposed that the ability to see one's self in reality television characters creates a potentially powerful dynamic between these programs and their viewers: the appeal lies in observing "common people engaging in uncommon (wilderness survival, international travel) and common (dating, home redecorating) tasks, giving viewers a chance to compare and contrast their own lives with those of the show's 'protagonist'" (Rose & Wood, 2005, p. 284).

Mental health related RTV programming

Some recent reality shows with African-American casts have included mental health messaging in episodes where reality personalities engaged in individual, couples, and/or family therapy. These shows documented African-Americans seeking services to address domestic violence related trauma, marital discord, parent-adolescent conflict, and adolescent behavioral issues, among other challenges (see Table 1). In many cases, African-American reality stars from these shows openly discussed reservations about going to therapy; some of the cast members directly referenced mental health related stigma in the African-American community as playing a significant role in their ambivalence about treatment. As a result of their clinical experiences, some of these RTV stars ultimately televised the journey of pushing past this stigma to get help, and they used segments of the show to directly articulate their transformed perception about the utility and effectiveness of receiving mental health support. *(Table 1 on next page).*

Table 1

Examples of African-American Reality Television Programs*

Network	Show	Genre	Program Description	Mental Health Content
BET	Keyshia & Daniel	Celeb-reality	Documents the marriage of R&B singer Keyshia Cole and NBA player Daniel Gibson.	1. Couple attends marriage counseling 2. Couple shows the emotional impact of dealing with a substance abusing parent 3. Couple shows the process of helping a parent access substance abuse treatment
TVone	Save Our Sons	Transformative Improvement	Documents the efforts of African-American families hoping to change the negative behaviors of their African-American sons.	1. Families receive counseling to address adolescent defiance and delinquency, communication and trust issues, residual trauma, substance abuse, single parenting, and other concerns 2. Adolescents engage in talk therapy to address anger and aggression, insecurities, and problem behavior 3. The show depicts positive transformations and adolescents and families grappling with denial and resistance to change
TVone	R&B Divas	Celeb-reality	Documents the experiences of five award-winning singers working on a tribute album and entrepreneurial endeavors.	1. Celebrities deal with domestic violence and related psychological trauma 2. Celebrities document ambivalence around accessing mental health treatment Celebrities directly discuss mental health stigma 3. The show documents celebrities changing their outlook on the effectiveness of mental health counseling

Network	Show	Genre	Program Description	Mental Health Content
WeTV	Tamar & Vince	Celeb-reality	Spin-off of reality show documenting the marriage of music producer Vincent Herbert and Reality TV Breakout Star/R&B Singer Tamar Braxton.	1. Couple receives counseling for communication issues 2. Episodes document the impact of childhood grief and loss 3. Show documents an African American male grappling with ambivalence about self-expression and engaging in a healing process 4. The show depicts a cross-cultural clinical relationship
WeTV	Mary Mary	Celeb-reality	This program follows the life of sister, celebrity gospel duo Mary Mary and their families.	1. Singers who identify as having a strong Christian faith articulate value in accessing mental health service in addition to their faith to help work through life issues 2. The singers use counseling support to address issues of family discord and balancing gender roles and celebrity status

List is not exhaustive

Cultural studies have examined African-Americans' presence on reality television and addressed the ways in which RTV reinforces stereotypes about people of color and encourages viewing audiences to engage in negative behaviors (Bell-Jordan, 2008; Tyree, 2011). Scholars have argued that there is much less media promoting positive health and health related behaviors than there are glamorizing health risks (Brown & Witherspoon, 2002). However, as discussed here, African-American reality television programming with mental health related contents might be offering a positive portrayal of African-Americans in the media and endorsing constructive messaging about mental health and service use.

Considering RTV viewing as a reflexive process (Rose & Wood, 2005), this mental health messaging may be particularly significant for African-American adolescents who are described as avid consumers of this form of television and who have been exposed to mental stigma in their community (Martin, 2008; Villani, 2001). Having celebrities and RTV personalities that these adolescents look up to, and identify with, expose their vulnerabilities and openly acknowledge the clinical process as a helpful alternative for addressing these concerns may be laying the groundwork for transforming African-American adolescents' mental wellness related attitudes and behaviors. Therefore, research in this area can help identify whether or not RTV provides a useful platform for promoting positive mental health messaging and for reducing mental health stigma among African-American teens. While there will also be a need to examine the quality and accuracy of the messaging being transmitted through these RTV shows, developing basic knowledge about whether or not the presence of mental health contents on

these programs is having an impact on stigma and African-American adolescent service use may be an important first step in this research.

Implications for the Social Work Profession & Practice

Social work is among the top providers of mental health services in the nation (Dworkin, 2010). The literature documents some of the presenting challenges associated with connecting people with mental health needs to clinical treatment programs, and particularly highlights this struggle among members of the African-American community (USDHHS, 2001). Research investigating how reality television influences mental health concerns for vulnerable communities can provide important information for wellness goals and initiatives of the profession, including efforts to reduce mental health stigma and unmet mental health needs among African-Americans teens.

Martin (2008) outlined the importance of understanding the effect of television programming on African-American youth and specifically highlighted the contributions of this awareness to culturally competent practice with this subgroup of African Americans. The research on reality television suggested in this paper may similarly support more effective clinical work with African-American teens; if reality television is beginning to shape African-American adolescent's expectations for the clinical process, this information may be important for practitioners attempting to engage these youth in mental health treatment. Furthermore, Villani (2001) suggests that knowledge of a patient's media history helps clinicians gain a more comprehensive understanding of all the sources of influence on their client. The proposed research may offer an additional use for the inclusion of media history in assessment, and may identify reality television programs as a tool for helping to engage a hard to reach population in the clinical process. In this way, this research may inform intervention and service delivery practices with African-American adolescent clients.

Conclusion

Supporting healthy growth and development is extremely important during the critical phase of adolescence. While the literature commonly documents abundant risks that threaten the well-being of African American youth, it is equally important to recognize the resources and protective factors that support healthy, holistic development for adolescents from this racial group. In spite of skepticism about its authenticity and quality, reality television is emerging among the genres of media that attracts the attention of adolescents and influences the minds of impressionable teenage viewers. When the content of these shows addresses an important social issue as mental health, it proves imperative for the profession to be aware of the impact of this phenomenon and its implications for practice. Future research in this area may prove important to burgeoning dialogue about reality television and may be extremely beneficial for helping to address critical mental health issues with an underserved population.

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Community Based Participatory Research and Youth Tobacco Control:
A Qualitative Interpretive Meta-Synthesis

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Abstract

Researchers have long sought to document best practices in both youth smoking prevention and cessation programming. Of the numerous interventions targeting tobacco use among youth, community based participatory research (CBPR) has increasingly gained popularity. Through the use of qualitative interpretive meta-synthesis (QIMS), this article provides a synthesis of CBPR studies used as the intervention approach involving youth and tobacco control. The exploratory research question was: what do CBPR projects add to the tobacco intervention spectrum? Several themes emerged including challenges, solutions, and opportunities. Results indicate as these interventions continue to be realized and their processes and outcomes assessed, partnerships can enhance the quality and effectiveness of such approaches. Implications include a greater need to document tobacco prevention CBPR projects in the scholarly forum and a need for clarity in documenting the impact, not just the process, of a CBPR project utilized for tobacco prevention and cessation.

Key Words: CBPR, tobacco prevention, youth, community interventions, qualitative interpretive meta-synthesis (QIMS)

Introduction

The days of "Joe Camel" are long gone since the groundbreaking Tobacco Master Settlement (TMS) in 1998 when the tobacco industry was legally prohibited from intentionally marketing their products to anyone under the age of 18 in the United States (National Association of Attorneys General, 2008). Yet since the TMS, the American Lung Association (ALA) reports that youth in the United States on average have been exposed to over 559 tobacco ads annually (ALA, 2010). Even with legislation to hamper youth tobacco access, such as the 1992 Synar Amendment which required states to enact an age-of-sale law restricting purchases to buyers under age 18 (Forster & Wolfson, 1998) youth are clearly exposed to and accessing this product. For example, the National Institute on Drug Abuse report that nearly 90% of smokers start before the age of 18 (National Institutes of Health, 2007). In 2009 approximately 17.2% of high school students and 5.2% of middle school students were current smokers; percentages that have minimally changed since 2007 (Substance Abuse Mental Health Services Administration, 2009). Researchers have been tenacious in seeking to document best practices and effective measures that prevent youth from smoking and help them quit if they start, but no systematic synthesis of qualitative work on this topic has appeared to date.

To address and prevent the burdens of tobacco on society, particularly to proactively target youth prevention and cessation, different forms of intervention have been operationalized through public health, social work, nursing, and other disciplines (Lantz, Jacobson, Warner, Wasserman, Pollack, Berson & Ahlstrom, 2000). One such intervention and approach that has gained popularity in recent years is community based participatory research (CBPR) (Dick, 2004). Organically derived from the community at hand, CBPR allows for co-learners (the

participants from the community) to voice their needs, identify their assets, and set priorities throughout the process. It is therefore tailored to specifically accommodate the community involved in the process (Rhodes, Hergenrather, Yee, Wilkin, Clarke, Wooldredge, Brown, & Davis, 2007). Tobacco has created many health disparities and each community presents different and often unique types of problems and potential solutions.

CBPR has been attributed to having its roots derived from a combination of action research and other research paradigms (Leung, Yen, and Minkler, 2004). CBPR has been described as an overarching term often inclusive of a variation of terms such as action research, participatory action research, and action-oriented research (Gustavsen, 2008). In essence CBPR is grounded in a framework that is inherently empowering; being exploratory in nature, new theories can be derived from the process. CBPR is much like action research in that it is a change methodology, growing in use and exposure to various disciplines (Dick, 2004). Within the spectrum of CBPR, the process itself engages a collaborative partnership between a community and trained researchers (Gronhaug & Olson, 1999). The goal of CBPR is to engage members of a community affected by a problem in generating knowledge and pragmatically helping to address their shared concern. In this process, the role of researcher becomes equal with the role of participant in terms of hierarchical constructs (Mendenhall, Whipple, Harper & Haas, 2008). Methodologies utilizing CBPR have been discussed as having a foundational relationship to empowerment where oppressed populations can improve contextual issues in their lives (Israel Schulz, Parker & Becker, 1998; Gustavsen 2008; Mendenhall, et al. 2008; Taylor, Fayter, Misso, Ogilvie, Petticrew, Sowden, Whitehead, & Worthy, 2004; Van Der Riet & Boettiger 2000). Not surprisingly, funding sources have increasingly endorsed CBPR as an intervention engaging a community-academic partnership (Viswanathan, Ammerman, Eng, Gartlehner, Lohr, Griffith, Rhodes, Samuel-Hodge…&Whitener, 2004) some of which have supported tobacco prevention and cessation efforts (see for example Clegg Smith, Bone, Clay, Thames, & Stillman, 2009; Horn, McCracken, Dino, & Brayboy, 2008; Mendenhall, Whipple, Harper, & Haas, 2008; and Ribisl, Steckler, Linnan, Patterson, Peyzner, Markatos…& Peterson, 2004). The popularity of this methodology has increasingly produced quality reports (Viswanathan et al. 2004), yet because of the individuality of each project and the differing needs of each community, credibility can be a challenge, particularly for researchers looking to the literature for relevant evidence. Furthermore, as CBPR continues to be a part of health education particularly with tobacco prevention, a qualitative interpretive meta-synthesis may be a useful resource for researchers from various realms of action inquiry who are seeking a starting place of examples, styles and lessons learned in and from the process. As CBPR gains popularity in addressing tobacco issues, the body of youth centered CBPR projects has not yet been systematically examined. This qualitative interpretive meta-synthesis (QIMS) attempts to provide a synthesis of findings and identify themes presented in qualitative papers discussing the results of CBPR as a prevention and cessation intervention involving youth and tobacco. The research question of this synthesis was: What do CBPR projects add to the tobacco intervention spectrum?

Youth Tobacco Prevention/Cessation Interventions

Any review of youth- focused CBPR to address tobacco prevention should be grounded within the context of more general interventions targeting youth and tobacco. Such interventions have encompassed a wide variety of approaches including comprehensive life skills programs as well as other techniques including social influence methods, comprehensive community based programs, mass media campaigns, and policy initiatives (Backinger, Fagan, Matthews, & Grana,

2003). Further, youth-focused efforts have included school-based interventions, peer support coupled with educational sessions, motivational interviewing, laser-acupuncture (Garrison et al. 2003), and the use of behavioral and pharmacological aids, (Backinger et al., 2003). Together, two systematic reviews (Garrison, Christakis, Ebe., Wiehe, & Rivara, 2003; Backinger et al., 2003) noted above found that school-based programs coupled with media campaigns and smoking policies are more effective than the individual components when implemented alone, which are generally ineffective. Other studies have also found that the combination of interventions aimed at both prevention and cessation are the most promising for reducing youth tobacco consumption (for example, Lantz, Jacobson, Warner, Wasserman, Pollack, Berson, & Ahlstrom, 2000). Although these reviews have not specifically included CBPR interventions, one systematic review concluded that population-based tobacco interventions may contribute to a reduction in health inequalities because of its far reaching capabilities in touching disadvantaged groups (Thomas, Fayter, Misso, Ogilvie, Petticrew, Sowden, Whitehead, & Worthy, 2008). Furthermore, Kulbok, Rhee, Botchwey, Hinton, Bovbjerb, & Anderson (2008) identify a CBPR approach as being potentially appropriate for integrating youth from diverse backgrounds to investigate and aid in the development of tobacco prevention programs. CBPR is indeed a natural fit for diverse populations (Wallerstein, Oetzel, Duran, Tafoya, Belone, & Rae, 2008); however several questions remain: What types of CBPR projects have been implemented to aid in tobacco prevention and cessation with youth?; What themes emerge from these projects that others can potentially use for background knowledge prior to embarking on their own project?; and Collectively, what do CBPR projects add to the tobacco intervention spectrum?

Methodology

Qualitative interpretive meta-synthesis (QIMS)

Qualitative interpretive meta-synthesis (QIMS) was the method used for this study and is

a means to synthesize a group of studies on a related topic into an enhanced understanding of the topic of study wherin the position of each individual study is changed from an individual pocket of knowledge of a phenomenon into a part of a web of knowledge about the topic where a synergy among the studies creates a new, deeper and broader understanding. (Aguirre & Bolton, 2013, p.8).

There is a dearth of synthesis of qualitative research in social work, with only a handful of published syntheses to date, several of which have borrowed from other fields (e.g. Hodge, Horvath, Larkin & Curl, 2011; Watkins, Walker, & Griffith, 2010). Others (Saini & Shlonsky, 2013) have developed a qualitative systematic review process to assess the quality of qualitative studies. QIMS was chosen for the current study to arrive at an interpretive meaning from a collection of qualitative studies (excluding mixed methods and quantitative studies) on a particular topic. By bringing together the findings of several qualitative studies, some of the common concerns about qualitative studies are overcome such as small sample sizes, as well as concerns about representativeness of the sample and settings since this bringing together of different qualitative studies results in increased diversity among participants and setting; this, therefore, increases the transferability of findings. Furthermore sample size in QIMS is not defined by the number of studies, but by the number of participants, and, in this QIMS, the number of partnerships in each qualitative article. The goal of a QIMS is to create a synergy of qualitative findings based on identified qualitative articles including gray literature, books, and studies across disciplines.

Research question

This QIMS was not a linear process; there were several steps incorporated that followed the iterative path toward synergistic understanding (Refer to Aguirre & Bolton, 2013 for a clearer illustration of the process). This path demonstrates the rigorous process involved in identifying articles, followed by the steps that yield data extraction and translation, leading to the synergistic understanding of the phenomenon. The first step in the process was to identify a research question. In developing the research question I sought to understand some of the differences in a CBPR intervention when compared to the other tobacco control interventions as described in the literature review. In the various systematic reviews of tobacco interventions, there was no mention of CBPR, yet the literature includes a number of CBPR-specific youth tobacco interventions. Three questions guided the process: What sort of CBPR projects have been implemented to aid in tobacco prevention and cessation with youth? What themes emerge from these projects that others can potentially use for background knowledge prior to embarking on their own project? Collectively, what do CBPR projects add to the tobacco intervention spectrum?

Instrumentation

The use of bracketing strengthens the credibility of qualitative research by addressing pre-conceptions, so as to not inject a hypothesis or personal experiences into the study (Creswell 1998). The following section describes my experiences with the topics in this study and I note them in order to identify what I bracketed throughout the QIMS. My introduction to CBPR began with training where I learned experientially how to engage youth through collaborative movement regarding an issue of their choosing and keep them engaged through the duration of one full school year. I then had the opportunity to facilitate three additional CBPR projects this time in my capacity as a professional.

There is one particular moment that continues to inspire me. Several years ago, I worked with a group of elementary aged youth in a low-income housing complex who were engaged in the CBPR process, utilizing photo-voice and focusing specifically on how tobacco has had a presence in their lives. After the photographs were developed and the youth began to thematically analyze their photos, one of the participants had a sudden realization as he looked at his picture of hundreds of cigarette butts stuffed into a flower pot; he said, "I never realized until just now that when my mom makes me dump out these cigarettes it makes me sick to my stomach and it makes me hate her sometimes." An amazing process was unfolding for this participant, and where he never had one before, he now had a voice and a way to describe his emotions about something he had never previously or consciously thought about. The presentation of their photographs and findings encouraged the residents to start their own public health campaign; here I saw firsthand how research influences people to challenge themselves. This experience proved to me that it is possible for anyone to be inspired by research and its findings. While many of my experiences have incorporated the topics in this study, they have been bracketed to the extent that is possible and the use of triangulation provided a checks and balance system to my position in this QIMS.

To assist with this bracketing of personal experiences, the checks and balances system encompassed triangulation with a research mentor, who brought a level of expertise and objectivity. She co-developed the QIMS process and provided methodological guidance

throughout the project. She also has worked for one year in a federally funded smoking cessation project with high school students across five counties though CBPR was not employed.

Sample

CBPR has been discussed as being on a continuum (Jones, Koegel, & Wells, 2008), for example some projects emerge from the ground up within the community and others stem from partners in academia. Often the problem is identified by the local community but in the case of youth, tobacco is rarely on top of their issue list (or even on their radar). Therefore, the CBPR projects engaging youth on tobacco prevention and cessation tend to be more toward to middle of the continuum, where the outside researcher or funding agency has identified the topic but youth then are engaged in other aspects of studying and addressing the problem. The aforementioned projects were the targeted papers sought for this analysis. To identify the sample, electronic databases were searched (i.e., Academic Search Complete, Health Source: Nursing/Academic Edition, Google Scholar, EBSCO including Social Work Abstracts, Pro-Quest Dissertation and Theses Abstracts, PSYInfo, and One Search). The keywords used in varying combinations for the searches were those relating to the terms "CBPR" "Tobacco," and "Youth." Those search terms broadened using words such as adolescents, high school, action research, participatory action research, and cigarettes. For the sample, a quorum chart was used to document and organize the process of collection, elimination and inclusion (Figure 1).

Figure 1: Quorum Chart
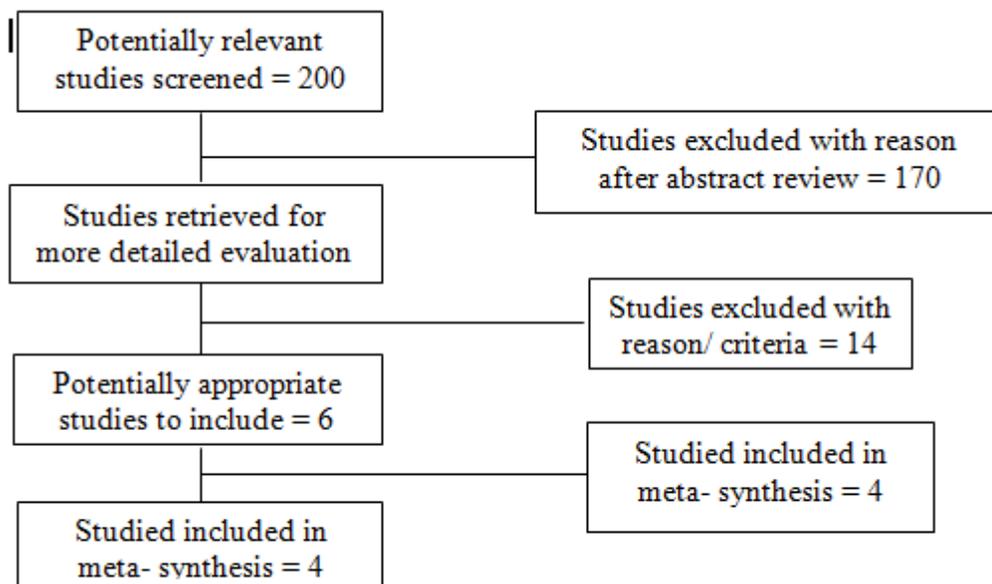
To be as inclusive as possible within these search terms, all years were included up to and including 2010, the current year at the time of beginning this manuscript. The first two searches broadly resulted in approximately 200 articles with any of the words above either in the text or title. Along with a research mentor as a co-analyst, we scanned each of the article titles and abstracts, duplicates were removed, followed by those that were not on topic in substantive areas, population, or methodological approach. After this process, the number of articles was reduced to 30. These remaining abstracts were then reviewed to ensure the articles reflected the necessary criteria: each one must discuss a CBPR project that prioritizes youth and targets tobacco

prevention and/or cessation. After reviewing the 30 articles, only 6 met the inclusion criteria. After the first triangulation meeting with the research mentor and a closer look at the sample, 2 additional articles were removed from the sample due to these not being all inclusive of the specific criteria. The final sample consisted of 4 articles which fit the following parameters: (1) CBPR project targeted toward youth tobacco control (prevention or cessation); (2) University and community partnerships were incorporated; (3) rigorous, credible, and included participant quotes.

Data Extraction, Synthesis, Triangulation

Descriptive data were extracted systematically from each article including the year published, location and population, number of collaborative partnerships if reported, sample size, project duration, primary research goal, and data collection methods. Simultaneously, a demographics chart was created to capture this information (see Table 1). The total number of collaborative partnerships was 10 and the total sample size was 499 participants. The sample consisted of a diversity of cultural and community representations within the United States; this included African American young adults, North Carolina American Indian youth from 8 different tribes, young adults from Minnesota ages 16 to 24, and adults of all ages and cultures involved in the community partnerships. The average length of these CBPR projects was three years. All studies concerned tobacco prevention or cessation with a community-academic partnership. In Table 1, the sample size represented the number of youth and adults whereas the number of partnerships represented the number of community/academic partnerships involved in each project.

Table 1: *Studies included in the sample*

Authors & Discipline	Target Populations	Location	# of Partnerships	Sample Size	Project Duration	Data Collection Methods
Clegg-Smith et al. (2009) **Public Health**	African American Young Adults (ages 18-24)	Baltimore, MD	4	14	1 year	14 key informant interviews.
Horn et al. (2008) **Social Work & Public Health**	American Indian Youth (8 Tribes)	WV and NC	6	264	3-4-years	Guided by 7 CBPR Principles, Interviews, focus groups, and spontaneous storytelling.
Mendenhall et al. (2008) **Public Health; Family Medicine & Community Health**	Youth/Young adults age 16-24	St. Paul, MN	2	23	Unspecified/ Ongoing	Active Discussions (focus groups); Social marketing

Table continued on next page

Authors/Disciplines	Target Populations	Location	# of Partnerships	Sample Size	Project Duration	Data Collection Methods
Ribisl et al. (2004) **Public Health**	Ethnicity reflective of state-wide demographics.	Charlotte, NC.	2	237	3-years	Participatory feedback evaluation and post-survey; Telephone interview & focus groups

Once the studies were selected, a grounded theory approach was used as an iterative and contextual process: (1) open coding was implemented to identify themes within each article; (2) axial coding was then used which connects codes and identifies the overarching themes; (3) triangulation with co-analysts was used to increase rigor and generate further understanding of the phenomenon. Grounded theory was chosen to analyze the studies because of its rigorous process and systematic approach to generate themes about a particular phenomenon (Creswell, 1998). During this process I used triangulation, which is a technique in qualitative research that facilitates validation of data through cross verification from more than one source (Creswell, 1998). Triangulation consisted of a research mentor examining each article thoroughly, conducting the same grounded theory approach (as described above), and followed by comparing axial codes until saturation was achieved (Glaser & Strauss, 1967).

The diversity in the sample allowed for overarching themes to represent each article and provide greater insight into CBPR interventions for tobacco control. As suggested in **Table 2** summarizing the overarching themes in each project, several commonalities were seen including themes representing new possibilities for projects, obstacles within the projects, and solutions to challenges.

Table 2**:** *Extracted Themes*

Article	Themes (extracted using authors' words)
Clegg Smith et al., 2009	Opportunity: Young adults in a mindset to see change in their lives Opportunity: Existing mentorship relationships with "caring" adults Challenge: Role of tobacco in the lives of young adults Challenge: Tobacco use in the education and job training programs Solutions: Need for continued discussion among the leaders themselves about participants' need for basic tobacco education as it relates to health Solutions: Any tobacco control intervention should take a holistic approach and occur in conjunction with other ongoing programs

Article	Themes (extracted using authors' words)
Horn et al., 2008 **Used a framework of principles and organized their themes under those existing principles.**	(Principles guided by Israel et al., 1998) Goal: Reduction in teen tobacco addiction, using 7 principles. Principle 1: Recognizing community as a unit of identity and community needs Principle 2: Building on strengths and resources within the community Principle 3: Facilitating partnerships in all phases of the research Principle 4: Promoting a co-learning and capacity building Principle 5: Integrating knowledge and action for mutual benefit of all partners Principle 6: Utilizing a cyclical and iterative process Principle 7: Disseminating findings and knowledge gained to all partners
Mendenhall et al., 2008	a. Framing the problem b. Strong and shared sense of trust and identity as a collaborative and community-based initiative began to evolve c. Fighting job stress and boredom d. Maintaining and ensuring sustainability e. Measuring community-wide impact f. Democratic Decision Making
Ribisl et al., 2004	Goal 1: a. Participatory Research Component b. New Groups and Lack of Adult Time Constraints c. Groups dispersed across the state d. Turn-over/Attrition Goal 2: a. Growth and Characteristics of Youth Groups b. Youth feeling discouraged Goal 3: a. Lack of involvement due to fear or retaliation b. Tobacco-Free School Policies and Youth c. Local movement vs. critical mass (state-wide) d. Training and resource issues e. Questionable adult responses to youth ideas

Findings

These projects were very eclectic and iterative in their own processes, yet shared similarities across groups. Based on the commonalities that emerged from the axial codes, the

findings of this QIMS fall into three overarching categories initially modeled after the themes found in the Clegg-Smith et al. (2009) article: Opportunities, challenges, and solutions.

Opportunities

Opportunity is about the possibilities that can or may result once a CBPR project has been initiated. Participants from the sample identified that "relationships matter" in a tobacco focused CBPR project and they can be translated into successful outcomes alongside future opportunities. One participant said:

> *Once you have the young people in a safe environment, a nurturing environment staffed with staff that they know really care, and that they trust, and the relationships are formed—once you create that environment, [then] you can deal with the smoking, you can deal with the drugs, you can deal with the life changing issues and the young people will be responsive* (Clegg-Smith et al., 2009, p. 13).

Relationships encompass the opportunity for mentorship, motivation and overall change in this type of intervention.

Likewise, "empowerment" was another sub-theme within the category of opportunity. As participants became empowered more opportunities arose. One participant noted, "Although the project initially focused on teen-cigarette-smoking cessation, capacity building efforts helped to identify other areas of tobacco control that the community wanted to address" (Horn et al., 2004, p.61). Feeding back into the iterative process, communities saw opportunities to continue work together broadening their scope beyond the initial project. In these studies the concept of empowerment was integral to the overall outcome of each project.

Challenges

Challenges had three integrated sub categories that lent themselves toward understanding obstacles that are faced within CBPR tobacco interventions. "Group cohesion" was one challenge faced by many participants who acknowledged facing attrition and addressing a level of readiness for change. One co-learner commented in their summary, "Although community leaders were ready to intervene with tobacco use among youth and adults, community members were not consistently at the same level of readiness, especially the youth" (Horn et al., 2008, p. 60). Group cohesion tended to be impacted by conflicting obligations for staff members (e.g.. multiple jobs, roles in the community), different levels of readiness for the youth (e.g.. not ready to quit) and an understanding of how turn-over needed to be addressed within the process (e.g.. addressing attrition of youth who either grow up or move on).

Another set of challenges faced by participants was a general sense of "fear and retaliation for participation." These challenges included a lack of involvement in the process due to fear and a sense of frustration resulting from minimal communication and other issues. One participant remarked, "Adults just don't listen to us" (Ribisl et al., 2004, p.608). Perhaps youth working towards action related to tobacco control felt they did not have the power, or did not feel supported or mentored. Others were empowered yet felt there were too many limitations:

> Don't get me wrong, I love our group, and we are really good at getting our message across, but we also, since we work for the state, we have a hard time doing things against the state, and taking a big stand on things like that, so a letter-writing campaign is the thing we can do that is least likely to get us fired or have some bad blood there. (Ribisl et al., 2004, p.608)

Finally, the "hampering role of tobacco" became a sub-theme among challenges which included social norms, retaining the spiritual aspects of tobacco, and framing the problem. Although each of the aforementioned challenges was closely related to opportunities, they began first as challenges. The perception of tobacco as a role in the lives of individuals dictated their level of readiness for change. Two very powerful quotes from co-learners imply how the role of tobacco can be hampering for prevention and cessation: "Teenage pregnancy, homelessness, running water and electricity in the home, parents not parenting them, food, employment. Cigarettes are just not at the top of the priorities for the ones that do smoke" (Clegg-Smith et al., 2009, p.14). In addition to being a lower priority in some communities, American Indians felt conflicted with the term tobacco, "[We] recognize, be amenable to learn, and understand that sacred tobacco use and smoking commercial cigarette tobacco have separate purposes and functions. The challenge…is to retain the cultural use and value of tobacco while addressing the abuse and chronic effects of cigarette smoking" (Horn, et al., 2008, p.50). Tobacco being normative in so many communities due to commerce, group culture, and social norms, meant each group in the sample had to address this challenge prior to targeting solutions.

Solutions

Solutions to challenges and implications for future projects were derived from within the process for each project. "Framing the problem" addressed how to solve the problem of defining the role of tobacco from the American Indian perspective, "Addiction is an evil spirit; [tobacco is not]" (Horn et al., 2004, p.55). Framing the problem meant analyzing what the problem really was before moving forward: "Many of our students who smoke miss class because they're running back and forth from the smoking area during breaks. So they're missing class" (Mendenhall et al., 2008, p.227).

Another solution was acknowledging the importance of "tailoring the project locally." For some it occurred in the process as an immediate solution: "American Indian youth also asked for a greater focus on group identity versus individually focused cessation efforts" (Horn et al., 2004, p.58). For others it became a lesson learned at the termination of the project: "Replicating the CBPR process is key (as opposed to straightforwardly replicating one project into another area, population, or group) insofar as it enables communities to create and tailor interventions immediately relevant to their needs" (Mendenhall et al., 2008, p.230). These solutions became a part of the internal process of each project, which provided clarity and a direction for the next step of the iterative process.

Discussion

Qualitative interpretive meta-synthesis (QIMS) was developed to address the lack of a consistent approach to synthesis of qualitative research. The current QIMS on CBPR and youth tobacco control demonstrates the usefulness of the QIMS method in creating a holistic, synergistic understanding of CBPR and tobacco control informed by multiple qualitative studies. Findings indicate that 1) the opportunities in using CBPR with tobacco control are created through emphasizing the importance of relationships and empowering the community through those relationships; 2) the challenges in conducting CBPR with tobacco control are group cohesion—providing further emphasis on the importance of relationships, fear of retaliation, and the hampering role of tobacco; 3) and the solutions to these challenges include both framing the problem and tailoring the project with according to the community's culture and needs through their involvement which is inherent in the CBPR approach. This third item is consistent with the

recommendations by Israel et al. (2005) that the CBPR process should include the researchers and community jointly developing and implementing core values of the CBPR project—an essential step in the process.

There are two important aspects of this QIMS I found necessary to address after considering the findings of this study. First, tobacco interventions take all shapes and forms with a common goal of youth tobacco control. CBPR projects are just one type of approach used for health promotion and empowering diverse communities in the process, often removing the barrier to intervention accessibility. Based on the findings of this paper, CBPR as a tobacco control intervention appears to be a true hands-on approach in addressing a central goal. Given the need to tailor each project to the individual community, one clear theme appeared to be an absence of a "how to" manual for just this purpose. This finding lent itself to contextual and iterative processes in each project. Furthermore, one important finding was that the value of replication of the process, not the replication of the events, was a consistent implication. Therefore, although a "how to" manual was not appropriate, the documentation of the process was necessary and useful, particularly if future CBPR projects would like a guidance model.

One consistent theme in triangulation with the literature on tobacco control interventions is the need for them to be comprehensive, not just single, one-time events (Lantz et al., 2000). Consistent with this QIMS, the projects in our sample identified new goals and issues affecting the community lending themselves to new projects. Unfortunately, in today's American health systems, time-limited groups are gaining popularity due to their cost-effectiveness. This research adds to the realm of interventions that may be more effective outside of time constraints.

Implications

This study had a number of implications of research, policy and practice. Implications for research were prevalent throughout this study including first, a greater need to document CBPR interventions tailored to tobacco control. Although an exhaustive search of the literature returned articles that had at least one key term as depicted in the quorum chart, the final sample consisted of only four articles that fit the criteria. Albeit rich in information, the limit of articles left us with more questions than answers. It appears that the process is a common phenomenon reported in these interventions however, there is a great need to additionally document the impact as well. The impact was implied in these articles, yet there were no overarching themes across or within articles indicating the overall impact. One article mentioned that after the pilot study, another article would be written to document the impact (see Horn et al., 2008). Still, this message is clear, and considering the need to document outcomes for funding sources, CBPR tobacco interventions ought to consider this implication for future research. It may be argued that the process is the impact, and if this is the case future research should consider documenting this more extensively. Furthermore, this implication informs a second implication which is a call for researchers to create a model which assesses the impact of these types of community based research interventions. Lastly on impact, intentional credibility, as I use in this article, went unreported across the board; although several articles mentioned some of the reasons why certain individuals were included as co-learners. The impact of each intervention may have been strengthened had there been credibility statements by the co-learners. Even if only brief, these statements can provide insight into the preparations of each project as well as increase the rigor necessary to overcome some of the limitations in qualitative research.

Other research implications concern one of the findings related to challenges: fear of retaliation. For example, the Ribisl (2004) article had co-learner quotes discussing the limitations of state funding. An examination of all the articles included a cluster of publishing between 2004 and 2008 that may be related to funding from sources with similar priorities during that time frame, and this finding might be a non-generalizable phenomenon, only impacting those particular studies. On this same note, this challenge also indicated a need for communities to seek ways in which to open safety nets for policy advocacy. Certainly, in states where tobacco is an economical concern (eg. a part of the farming economy), groups may be more hesitant to advocate for change in this area. CBPR projects being collaborative in nature may find it useful to engage key stakeholders in these tobacco CBPR projects, particularly in areas where tobacco has a strong weight on economic outputs.

Finally, given that CBPR interventions are the blending of research and practice, many of the research implications also apply to practice. One specific practice implication is for future practitioners to incorporate a proactive intention to address sustainability. Due to the widely reported need to address turnover in the projects, CBPR practitioners ought to prioritize attrition in their initial project goals. This is especially true when targeting a youth population. After some time, youth age out of programs, drop out, or change interests. Incentives such as stipends and even encouragement may be helpful to address attrition unrelated to age-out factors.

Limitations

Although the sample size of participants was increased in this QIMS, the small number of articles was the greatest limitation of the qualitative interpretative meta-synthesis. As CBPR is a diverse approach to research and interventions, it is possible the search terms did not exhaust all related projects documented in the literature. Another limitation of this article is making comparisons. For example, some studies were tailored to create an intervention, some were the intervention and some were a combination of both. Perhaps there were more divergent cases available as opposed to similar cases. Despite these limitations, several implications were formed on the basis that CBPR tobacco intervention projects are inherently different in nature, because they are supposed to be different. There are lessons that can be learned and useful information that can be relevant to future projects.

CBPR projects focused on tobacco control have important promise in the field, however, more documentation beyond the process is needed to demonstrate impact. Essential elements that should be included in assessing impact include the hampering role of tobacco, i.e. the dynamics of addiction, and the interfering role of fear of retaliation, especially when tobacco control has economic impact. Documentation of impact, added to the extant literature on process, will move the field forward in understanding the importance of a CBPR approach to the control of tobacco use and possibly inform other possible uses of CBPR.

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CV Builder

University of Houston Graduate College of Social Work
Perspectives on Social Work congratulates the following doctoral students on their
accomplishments during Fall 2012 through Fall 2013.

Christine Bakos-Block

Publications
Ledoux, T., Nguyen, A.S., **Bakos-Block, C., &** Bordnick, P. Using virtual reality to study food
cravings. *Appetite* (In Press).

Presentations
Bakos-Block, C., McIngvale, E., Hart, J., & Hader, A. (2013). *Bridging the gap: The global
implications of a self-help website for obsessive compulsive disorder*. (July 29). The
International Obsessive Compulsive Foundation Conference. (July 20).

Traber Giardina

Publications
Giardina, T.D., King, B.J., Ignaczak, A., Paull, D.E., HOeksema, L., Mills, P.D., Neily, J.,
Singh, H. (2013). Root cauase analysis reports help identify common factors in delayed
diagnosis and treatment of outpatients. *Health Affair (Millwood), 32*(8), 1368-75.

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in the diagnostic process and system performance. *BMJ Qual Saf*. Online. Doi:
10.1136/bmjqs-2012-001661.

Becca Keo

Publications
Keo, B., Moody, C., Meier, S., & Babcock, J. (2013). Sexual identities of romantic partners of
female-to-male trans men. (In Review).

Presentations
Sharon, M., Pula, J**., Keo, B. &** Meier, S. (2013). *Clinical training issues*. Panel participant at the
National Transgender Health Summit. Oakland, CA. (May 17).

Keo, B. (2012). *Exploring transgender negativity in a virtual reality environment.* Social Work
Research Conference, University of Houston Graduate School of Social Work. Houston,
TX. (December 15).

Meier, C., & **Keo, B.** (2013). *Introduction to gender diversity.* Plenary presentation for the
Gender Infinity Conference at DePelchin Children's Center, Houston, TX. (July).

Weaver, L., & **Keo, B**. (2013). *Transgender 101: A safe space for dialogue*. Presentation for the Texas Transgender Nondiscrimination Summit, Houston, TX. (July).

Weaver, L., & **Keo, B**. (2013). *Transgender service delivery.* Presentation sponsored by the Ryan White Planning Council for Ryan White funded frontline staff. Houston, TX. (July).

Weaver, L., & **Keo, B.** (2013). *Serving transgender and gender diverse clients*. Presentation sponsored by the National Association of Social Workers at Legacy Health Community Services for National LGBT Health Awareness Week. Houston, TX. (March).

Anny Ma

Publications
Ng, W-C.I., Cheung, M., & **Ma, A.K.** (2013). Sentencing preadolescent rape offenders in Hong Kong: A law reform advocacy journey. (In Review).

Presentations
Cheung, M., Yip, L.A., **Ma, A.K**., & Leung, P. (2013). Laughing yoga: *Teaching clients about relaxation.* National Title IV-E Rountable Conference. Galevestion, TX, (May 30).

Elizabeth McIngvale

Presentations
Bakos-Block, C., **McIngvale, E**., Hart, J., & Hader, A. (2013). *Bridging the gap: The global implications of a self-help website for obsessive compulsive disorder.* (July 29). The International Obsessive Compulsive Foundation Conference. (July 20).

Holly Oxhandler

Awards
2014 Dr. Fernando J. Zuninga y Rivero Doctoral Fellowship in Gerontological Social Work

2012-2014 Gulen Institute Doctoral Fellowship

Publications
Parrish, D.E. & **Oxhandler, H.K.** (2013). Social work field instructors' views and implementation of evidence-based practice. *Journal on Social Work Education.* (Under Review).

Oxhandler, H.K. & Pargament, K.I.. (2013). Social work practitioners' integration of clients' religion and spirituality in practice: Measurement and current integration. (Under review).

Parrish, D.E., **Oxhandler, H.K.,** Duron, J., & Bordnick, P. (2013). Utilization of Virtual Reality Technology for Treating Social Anxiety Disorder in Adolescents: A Feasibility Study. (Under review).

Presentations

Oxhandler, H.K. & Parrish, D.E. (submitted). *Field instructor views and implementation of evidence-based practice: A cross-sectional survey.* Paper to be presented at the annual meeting of the Society for Social Work and Research, San Antonio, TX. (January, 2014).

Duron, J.F., **Oxhandler, H.K.**, & Parrish, D.E. (accepted) *Feasibility of Virtual Reality Exposure Therapy for Adolescent Social Anxiety.* Poster to be presented at the annual program meeting of the Council on Social Work Education, Dallas, TX, (November 2013).

Oxhandler, H.K. & Militello, P. (accepted). *The virtue of gratitude: Research, barriers, and practices in social work.* Sixty-minute workshop to be presented at the annual meeting of the North American Association of Christians in Social Work, Atlanta, GA, (October 2013).

Oxhandler, H.K. (April 2013). *Examining the dissemination of empirically-supported, spiritually-sensitive mental health interventions using the Diffusion of Innovations Theory*. Poster presented at the Bridging the Research and Practice Gap: A National Symposium on Critical Considerations, Successes and Emerging Ideas, Houston, TX.

Monique R. Pappadis

Awards
FAHS-BECK scholar, Doctoral Dissertation Grant, $5,000 (2013).

Publications
Sander, A.M., Maestas, K.L., Nick, T.G., **Pappadis, M.R**., Hammond, F.M., & Hanks, R. (2013). Predictors of sexual functioning and satisfaction one year following traumatic brain injury: A TBI model of systems multicenter study. *Journal of Head Trauma Rehabilitation, 28*(3), 186-94.

Pappadis, M.R., Sander, A.M., Leung, P., & Struchen, M.A. (2012). The impact of perceived environmental barriers on community integration in persons with traumatic brain injury. *Acta Neuropsychologica, 10*(3), 385-97.

Presentations
Pappadis, M. R. (2014). *Awareness of Deficits and Realistic Goal-Setting Among Black American Males With Traumatic Brain Injury*. Poster abstract accepted for presentation at the 2014 Annual Conference of the Society for Social Work and Research, San Antonio: TX, (January 15 – 19).

Pappadis, M.R., Struchen, M.A., Mazzei, D.M., & Sander, A.M. (2013). *A preliminary model of social integration and emotional functioning for persons with TBI*. Poster abstract

accepted for presentation at the 2013 American Congress of Rehabilitation Medicine—American Society of Neurorehabilitation (ACRM-ASNR) Joint Educational Conference, Orlando, FL, (November 12).

Pappadis, M.R., & Sander, A.M. (2012). *Perspectives of survivors of traumatic brain injury (TBI): Positive and negative influences on quality of life and self-concept*. Abstract presented for oral presentation at the Social Work Development 2012: Action and Impact Conference, Stockholm, Sweden, (July 8).

Melissa I.M. Torres

Awards
2013 Gulen Institute Doctoral Dissertation Fellowship.

2013 Doctoral Fellow in Clinical Training, CSWE Minority Fellowship Program, sponsored by SAMHSA.

2013 Student Award for Distinguished Service to Women, University of Houston's Commission on Women.

Presentations
Padgett, P.M., **Torres, M.I.M**., & Wilkinson, M.L. (2013). *HIV risk perceptions and risk behavior among IDUs in Houston, Texas.* Society for Applied Anthropology 73rd Annual Meeting: Natural Resource Distribution and Development in the 21st Century. Denver, CO, (March 20).

Torres, M.I.M. (2013). *Impacto de explotacion a los immigrantes Latina/os.* Panelist at Conferencias Academicas de las Ciencias Sociales, Universidad de El Salvador, San Salvador, El Salvador, (July 1).

Torres, M.I.M. (2013). *Trata de personas: Explotacion sexual de Latinas en los Estados Unidos.* Panelist at Conferencias Academicas de las Ciencias Socialies, Universidad Pedagogica de El Salvador. San Salvador, El Salvador, (July 1).

Jankowska-Bradley, R., & **Torres, M.I.M**. (2013). *¡Ni una más (Not one more!) – Using art, education, and polictical action to eliminate femicide and human trafficking.* Parallel Event at the United Nations 57th Session of the Commission on the Status of Women: Elimination and prevention of all forms of violence against women, girls. New York, NY, (March 5).

Mark H. Trahan

Publications
Trahan, M. H. (2013). Forum theater. In M. Cheung (Ed.), *Therapeutic games and guided imagery, Volume II: Tools for professionals working with children and adolescents with specific needs and in multicultural settings.* Chicago, IL: Lyceum

Trahan, M.H., & Cheung, M. (2012). Responsible fatherhood in child welfare practice: Building a framework for research. *Journal of Family Strengths, 12*(1), 1-24.

Micki Washburn

Awards

2013 Gulen Institute Pre-Dissertation Fellowship.

2013 Phi Alpha Mu Lambda Chapter Honor Society Award.

Publications

Washburn, M. (In press) Gender identity game: Who am I? In M. Cheung. *Therapeutic games and guided imagery, Vol. II: Tools for professionals working with children and adolescents with specific needs in multicultural settings*. Chicago, IL: Lyceum Books.

Washburn, M., & Parrish, D. (2013). A review of DBT-self help application for mobile devices. *Journal of Technology in Human Services, 31*(2), 175-183.

Presentations

Washburn, M., (2013). *Social work with transgender and gender diverse clients: Increasing competence for community practice*. Training Workshop for the 37th Annual NASW Texas State Conference, Weaving Threads of Resilience and Advocacy: The Power of Social Work. Austin, TX, (September 2).

Washburn, M., Eckhart, G. (2013). *Creating visible space: Development, implementation and evaluation of LGBT specific MSW curriculum*. Faculty Development Institute for the CSWE 59th Annual Program Meeting. Global Social Work—the World is Here Dallas, TX, (October 31).

Guidelines for Submission

In order to be considered for publication in *Perspectives on Social Work*, all submissions must meet the following criteria:

- The first author must be a currently enrolled doctoral student.
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