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## **Everyday ethics in professional life: social work as ethics work**

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## Abstract

This article outlines and develops the concept of 'ethics work' in social work practice. It takes as its starting point a situated account of ethics as embedded in everyday practice: 'everyday ethics'. This is contrasted with 'textbook ethics', which focuses on outlining general ethical principles, presenting ethical dilemmas and offering normative ethical frameworks (including decision-making models). 'Ethics work' is a more descriptive account of ethics that refers to the effort people put into seeing ethically salient aspects of situations, developing themselves as good practitioners, working out the right course of action and justifying who they are and what they have done. After identifying seven features of ethics work, including work on framing, roles, emotion, identity, reason, relationships and performance, each element is illustrated with reference to two case examples from social work practice. It is argued that the concept of ethics work, with its focus on the practitioners as moral agents in context, is an important antidote to the rules-based managerialism of much contemporary practice.

**Key words:** professional ethics, social work, ethics work,

## Situating ethics: From professional ethics to ethics in professional life

In the field of social work ethics and professional ethics more generally, there is a growing body of literature that identifies the dominance of principle-based approaches (often linked with the work of Beauchamp and Childress (2009) in bioethics) and argues for a broadening of the scope of ethics to include virtues, emotions and relationships (for example, Oakley and Cocking, 2001; McBeath and Webb, 2002; Hugman, 2005; Banks, 2008, 2009; Banks and Gallagher, 2009; Koggel and Orme, 2010; Tascón, 2010; Weinberg, 2010; Barnes, 2011; Keinemans and Kahn, 2012; Keinemans, 2014). This is influenced by the resurgence of interest in virtue ethics in moral philosophy, alongside the ethics of care and other more 'situated' and particularist approaches, especially feminist ethics (for example, Tronto, 1993, 2012; Swanton, 2003; Walker, 2007). It is also influenced by the growth of empirical studies of how people talk, think and act in the ethical domain, ranging from studies in moral psychology and 'neuroethics' to sociological and anthropological accounts (for example, Hauser, 2006; Levy, 2008; Richland, 2010; Haidt, 2013).

These trends represent attempts to broaden the domain of professional ethics beyond dilemmas and decision-making requiring rational judgement (ethics as individual decision-making) and beyond conformity to codes of ethics and rules of ethical conduct (ethics as external regulation). Instead, a situated ethics is proposed, that places dilemmas and decisions in a broader social, political and cultural context and sees responsibility in a wider, more relational sense, beyond the isolated individual decision-maker. There is also an interest in acknowledging and accounting for the internal motivations and emotions of moral agents, seeing these not as characteristics belonging to individuals, but rather as part of a relational dynamic between people and contexts (including professional communities of practice).

I have characterised this general trend as a move from professional ethics to ethics in professional life (Banks, 2009). By this I mean a move from traditional textbook professional ethics where the focus is on outlining general principles, presenting ethical dilemmas/problems and offering decision-making models, to a view of ethics as embedded and embodied in everyday practice. Of course, to talk about the 'ethical dimensions of practice' requires us to identify, analyse and artificially dis-embed what are regarded as the ethical dimensions. However, this approach, 'ethics in professional life' or 'everyday ethics', attempts to keep in mind the context of the ethical issues identified – acknowledging that in pulling out features of an event, situation or problem that relate to ethics, we recognise the process of abstraction, framing and focussing. In other words, ethical theorists, and professional practitioners talking and thinking about ethics, need to be reflexively aware of what they are doing in the process of constructing an ethical issue, problem or dilemma (Banks and Williams, 2005).

In this article, I wish to stretch the concept of 'ethics' to acknowledge the embeddedness of ethical issues, as well as expanding the account of the work practitioners do in being and acting ethically beyond rational decision-making and following rules. I will do this by exploring the concept of 'ethics work'. I have introduced the idea of 'ethics work' briefly elsewhere (Banks, 2009, 2012, 2013), but this article expands on what it means in theory and practice –illustrated by accounts given by social workers. 'Ethics work' encompasses reasoning, but also includes work on emotion, identity, roles and responsibilities, for example. All these elements are inter-connected in the complex world of practice, which can be analysed in many different ways to highlight the work practitioners do in the ethical sphere. By 'ethical sphere', I mean aspects of everyday life (conversations, interactions, actions, demeanours, arguments and so on) that can be construed as relevant to matters of rights, responsibilities, harms and benefits.

### **Ethics work**

I am using the term 'ethics work' to refer to the effort people (in this case professionals) put into seeing ethically salient aspects of situations, developing themselves as good practitioners, working out the right course of action and justifying who they are and what they have done. Broadly speaking, 'ethics' relates to matters of harm and benefit, rights and responsibilities and good and bad qualities of character. I am using the term 'work' in this context to cover the psychological and bodily processes of noticing, attending, thinking, interacting and performing. This use of 'work' is influenced by social interactionist and social constructionist accounts of social life, including the thinking of Goffman (1969, 1974), who studied people's everyday interactions and performances; Foucault (2000b, a), whose later work explored the making of the ethical self; and discourse and conversational analysts, who study complex conversational moves (Sacks, 1992; Wooffitt, 2005), including discourse analytic accounts of social work interactions (e.g. Hall, Slembrouck and Sarangi, 1997; Hall, Sarangi and Slembrouck, 2004; Hall et al. 2014; Kirsi and Suvi, 2010) . This meaning of the term 'work' is analogous to its use by sociologists and social psychologists in relation to the concepts of 'emotion work' or 'identity work', where it relates to how people construct and perform identities or engender, manage and perform emotions. Often associated with social interactionism or social

constructionism, it includes the moves people make psychologically, conversationally and bodily to perform or achieve a particular persona or state of mind for themselves or others. In a similar vein, 'ethics work' is about the effort that people put into becoming and being certain kinds of people in ethical terms and accomplishing various responsibilities and actions of ethical import – for example, being a trustworthy person or making an ethical decision.

Ethics work is not the same as 'moral fluency' (Sellman, 1996; Hugman, 2005, p. 23) or 'ethical literacy' (Kline and Preston-Shoot, 2012, p. 65). These latter two concepts refer to capacities (understandings, skills, abilities) that enable people to discern ethical issues and act ethically – that is, they are required for and enacted in ethics work. Ethics work is a much broader concept that focuses around the 'doing' of ethics. I developed the concept of 'ethics work' in the course of analysing social workers' accounts of the ethical dimensions of their practice. Having conducted interviews and collected first person written cases over many years (see Banks, 2004; Banks and Nøhr, 2012), I began to look at what social workers were doing when they were giving an account of their practice in ethical terms. I identified initially six (Banks 2013) and later seven features that might be useful for conceptualising ethics work. This account of ethics work is not intended to provide a normative ethical framework (an alternative to existing sets of principles and virtues) to guide/prescribe practice. It is an analytical description of the ethical dimensions of some of the sense-making work social workers do in practice, as follows:

1. **Framing work** – identifying and focusing on the ethically salient features of a situation; placing oneself and the situations encountered in political and social contexts; negotiating/co-constructing frames with others (including service users and colleagues);
2. **Role work** – playing a role in relation to others (advocate, carer, critic); taking a position (partial/impartial; close/distant); negotiating roles; responding to role expectations.
3. **Emotion work** – being caring, compassionate and empathic; managing emotions; building trust; responding to emotions of others.
4. **Identity work** – working on one's ethical self; creating an identity as an ethically good professional; negotiating professional identity; maintaining professional integrity.
5. **Reason work** – making and justifying moral judgements and decisions; deliberation with others on ethical evaluations and tactics; working out strategies for ethical action.
6. **Relationship work** – engaging in dialogue with others; working on relationships through emotion, identity and reason work (dialogue work)
7. **Performance work** – making visible aspects of this work to others; demonstrating oneself at work (accountability work).

I will now expand on each of these features of 'ethics work', illustrating with reference to two written case examples that draw on written accounts given by social workers that focus on the ethical dimensions of their work. The cases were collected for two books on ethics in response to requests for accounts describing important features of real situations. The first case was published in Banks and Nøhr (2012, pp 161-4) and a shortened version of the second in Banks (2012, p. 25). These are obviously retrospective and selective accounts, in which the writer

performs for the reader. The data the reader is presented with are very different from those that would be captured by observation or video recording of actual face-to-face interactions in social work practice, or indeed by interviews. The 'cases' are essentially narratives, written from a particular perspective (the narrator) and for a particular purpose (ethics cases for a book). Nevertheless, giving an account of a situation of ethical significance is an important element of ethics work itself. It is how work on reframing and processes of justification take place. The full cases are in the Appendix. In order to introduce the reader to the cases I offer brief summaries here.

***Case 1 – Deciding on the right to health care insurance: a case from Peru***

A female social worker worked in a government health insurance office in Peru. The office dealt with standards and difficult cases regarding health insurance claims. Only those in poverty and not covered by any other health care insurance were eligible for assistance. The social worker was faced with a claim from a woman whose sick child needed non-urgent medical care. However, her estranged husband had health care insurance, so the child had already been refused treatment at the Child Health Institute as staff judged he was ineligible. The social worker gives an account of her reasoning, decision and actions as she made a case to her boss for this woman to be given assistance for her child's health care. The worker presents herself as working to improve and change policies and practices that affect many families adversely and as acting in accordance with social work values and principles (particularly a child's right to health).

This case is presented as a 'dilemma', where a decision had to be made. In that sense it is a classic ethics case, with emphasis on reasoning rather than emotion or relationship-building. But the way it is told is very contextualised: the role, character and professional identity of the social worker are important and relevant.

***Case 2 – 'Giving the impression of being a family friend': working with an asylum-seeking family in the UK***

A female student social worker was undertaking her fieldwork practice in a voluntary sector agency (non-governmental organisation) working with families with pre-school children. An asylum seeking woman (A) and her young daughter and son were referred to the agency as they had recently re-located to the area and were isolated. The student visited fortnightly over three months. Initially A and her seven-year old daughter seemed very depressed and the daughter was unhappy at school. The student supported the family through several incidents that required police intervention. Over time the situation improved and the family seemed happier. But the student was aware that A viewed her as a friend, and A became upset when the student told her that the placement would be ending soon. A asked the student to come back for her son's birthday party in four months' time. The student reflects that she did not handle this situation well, and that she blurred professional boundaries as she did not want to tell A that she was a 'service user' rather than a friend.

This case is presented as an account of an ethically problematic situation, where the student feels she should have acted differently. It is much shorter than the first case, with less contextual detail, but emotions are highlighted.

**1. Framing work**

I am using the concept of 'framing' to refer to the ways in which people make sense of events and experiences. In his classic text Goffman (1974, p. 8) sees the work of frame analysis as attending to the question: 'What is it that's going on here?' The concept of the 'frame' has been developed and used in a variety of different and related ways. Schön and Rein (1994, p. 23) consider frames in relation to policy positions as 'underlying structures of belief, perception, and appreciation'. They are usually tacit and hence exempt from conscious attention and reasoning; they determine what counts as a fact and what arguments are regarded as relevant. In the work of Schön and Rein on frame reflection, their aim is to encourage conscious reflection on the frames being used in order to help people resolve what appear to be intractable policy controversies by reframing them. In the field of social movements the concept of frames and framing processes has also been applied to studying the way meanings are constructed collectively and function, for example, to diagnose issues (identifying victims of an injustice) and mobilise people into action (by constructing vocabularies of motive) (Benford and Snow, 2000).

In moral psychology and experimental philosophy, the idea of a 'framing effect' has been applied to explain the results of experiments showing that different ways of presenting a problematic situation about which a decision has to be made result in people giving different answers about what they would do or what is right in the situation (Kahneman and Tversky, 1981; Haidt, 2001; Hauser, 2006; Appiah, 2008; Kahneman, 2011). One well-rehearsed set of experiments focuses on the presentation of variants of the 'trolley problem' to participants. This involves a situation where a runaway train (trolley) is heading towards five people on a railway track who are unable to get out of the way. Participants are given various options, all of which involve a choice about whether to take an action that would result in the five people being saved, while another person would die. Different responses emerge according to how the problem is framed – for example, whether participants would pull a lever to divert the runaway train onto a side-track, which leads to the death of one person, or whether they would push a 'fat man' off a bridge in front of the train (fewer people say they would do this) (Edmonds, 2014).

The term 'frame' brings to mind a picture frame enclosing the work of an artist or photographer. Certain features of the landscape and figures are foregrounded, others are in the background, while others are not in the picture at all. The work of 'ethical framing' (framing work in the sphere of ethics) involves us making sense of what is going on specifically in relation to matters of harm, benefit, rights and responsibilities. This entails seeing situations in particular ways - being alert to what may be important but is not in the picture we first see or are given by others<sup>1</sup>, and being aware of the background contexts that give the picture its shape and meaning. This involves 'moral perception' (Blum, 1994; Vetlesen, 1994; Audi, 2013), that is, identifying and attending to ethically salient features of situations - for example, seeing a particular incident as a case of racism. It also entails critical reflexivity (Taylor, 2006), for example seeing the bigger picture of social inequality of which a

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<sup>1</sup> Kahneman comments that he and Tversky used the term 'framing' both to refer to the formulation to which decision-makers are exposed and the interpretation they construct for themselves (Kahneman and Tversky, 1981, p. xiv). So the term 'frame' blurs the distinction between the activities of editing and mental accounting and susceptibility to framing effects. However, I do not see this as a problem: we are given frames and we contribute to frames.

particular incident is part and recognising one's own role both in framing the picture and featuring in it. Being conscious of one's own framing work and aware of that of others also entails a willingness and ability to re-frame – to see a situation in a different light, to see new features as significant.

I will now consider framing in relation to the two case examples summarised earlier (full versions are in the Appendix). Case 1 begins with a brief outline of the organisational and legal context in which the social worker operates in Peru, indicating the criteria for allocation of government funds for health care to people in poverty, with no other health insurance. Brief details of a woman and her three-year old son (who needs medical care) are given, along with their family circumstances (the boy's father is covered by insurance but is estranged). The case is framed as a dilemma, which the social worker then resolved, justifying her actions with reference to the child's rights and the International Convention on the Rights of the Child. Hence the case is given an organisational framing, in terms of laws and policies, with a focus on a dilemmatic choice with reference to universal human rights. In this sense it is a recognisable 'ethics case' of the kind often found in professional ethics textbooks. Another interesting feature of the case is that the social worker focuses on the rights and needs of the child as her primary object of concern. It could be said that she foregrounds the child, and relegates the father to the background, or perhaps even locates him out of the picture (as he is not present nor is he a part of the child's life). She sees the case as one of paternal abandonment. This links to the expected role of social workers in putting the rights and interests of children first. It contrasts, we might surmise, with the frame of reference of the health care administrators, for whom the existence of a father with insurance was central in their decision to refuse treatment. This highlights the way that different framings of a situation can change participants' understandings of what is ethically right or just.

Case 2 is located in the context of UK government policy towards asylum seekers. Little background is given, but enough to paint a picture of a family suffering from isolation and discrimination in an unfamiliar place. The story in the first paragraph is one of 'success' – with the family moving from depression and isolation to a state of appearing happier and having some friends. The implication is that this happened with the student's support (she mentions assisting the family with incidents involving the police). However, a negative twist is recounted in the final paragraph, which focuses on the relationship between the student and the mother. It is here that the ethical issue is highlighted: the woman regarded the student as a friend, and the student did not clearly explain her role as a social worker. So the student has 're-framed' the story from one about a social worker supporting a vulnerable family towards an improved life to one that also includes an ethical transgression relating to 'blurring professional boundaries'. But the woman cannot (or will not) see the professional frame (with herself as service user and the student as professional). The work that is needed at this point is a shared exercise of reframing.

## **2. Role work**

Social workers have available a wide repertoire of professional roles that can legitimately be assumed in particular circumstances – for example, as advocates for the rights of particular service users or carers; impartial assessors of families' needs; critics of unfair policies; campaigners for social justice; informal educators; carers; or

supporters. 'Role work' involves judging what roles to take with particular people in particular circumstances, how and when to shift between roles, when a degree of professional closeness or greater distance is right and negotiating roles with service users and others (see Hall *et al.*, 2006, 71-88). In some situations a social worker must be impartial, not showing favouritism to any particular person. In other situations the proper role of the worker is to take a partial position in defending or upholding one person's or group's rights or interests. All role work has ethical dimensions – as social work roles are taken up, negotiated and lived out in relationships and in connection with responsibilities for other people, and have the potential to cause harm or benefit. Ethical dimensions are highlighted when conscious dilemmas and choices over role positions arise – for example between carer and controller; educator or advisor; 'friend' or professional.

In Case 1, the worker says that this situation 'challenged my actual, effective role as a social worker'. She takes on the role of advocate for a particular woman and her son. But this entails that she makes an argument on the basis of the family's circumstances, which are similar to those of many others. The social worker does not present herself as standing up for a particular person on the basis of a sense of responsibility attached to that relationship. Rather, it is something she and her colleagues have done before for people in similar circumstances, will no doubt have to do again, and for this reason they want to get the policies and practices changed.

In Case 2, we are not given precise details of what the student did with the family, but since it involved fortnightly visits for three months, we assume the student supported the family psychologically and practically. She mentions that she 'assisted' the mother through various incidents. But this regular assistance was mis-recognised by the mother as friendship, which suggests the student developed a close and caring relationship with the family. The student knew she should have done some more work clarifying her role and maintaining boundaries. But it seems she was unsure how to do this boundary work. The student 'did not deal with this effectively'. This implies she needed to do some conscious and careful 'role work'.

### **3. *Emotion work***

'Emotion work' refers to the effort people make both to feel certain emotions (for example, compassion or empathy) and to handle emotions that may develop (sadness, guilt or fear). Hochschild (1983, p. 7) developed the concept of 'emotional labour' to refer to the management of emotions in work contexts, describing this process as 'the induction or suppression of feeling in order to sustain an outward appearance that produces in others a sense of being cared for in a convivial safe place'. Although she uses the term 'emotion work' to refer to the management of emotions in private contexts (Hochschild, 2003), I am using it more broadly as a generic term covering emotional labour in professional life (see, for example, Leeson, 2010; Smith, 2012). In one sense, all emotion work has ethical significance, as emotions are about relationships with others or ourselves and our characters. But 'ethical emotion work' in a professional context would focus particularly on emotions linked to respecting, not harming, caring for and about others and being ethically good people - for example, the emotions of compassion, guilt or shame. It is useful to make a distinction between emotions and feelings. According to Vetlesen (1994, p. 78) emotions (such as empathy or shame) combine affectivity and cognition,



involving a stepping back and an element of reflection (see also Goldie, 2000; Nussbaum, 2001). Feelings (such as pain or affection) are 'rawer' and can involve the person who is experiencing the feeling being almost engrossed in it.

Emotion is often not foregrounded in written accounts given as ethics cases, even if invited when cases are requested. Emotion work goes on all the time in social work, and may not be noticed and/or not regarded as relevant in the construction of an ethics case. It is also more exposing if a worker dwells on, for example, her fight to suppress her anger or his work on compassion towards a disrespectful service user behaving disrespectfully. For the dominant discourse in social work encourages practitioners to keep emotions out of the equation.

In Case 1, emotion does not feature greatly. The mother is described as 'angry' but the social worker does not describe any of her own emotions either in relation to the mother and child or the efforts she had to make to argue their case. She is clearly committed to her job and no doubt must have believed the woman's account and may even have been moved by it. But she does not speak of this. Any 'emotion work' is not made visible. When speaking of her professional identity, she does however refer to the 'heart' of her professional identity – which indicates its embodiment and hints at emotion.

In Case 2, emotion features more. The life situation for the family is presented as emotionally fraught. The woman cried at the first meeting. She and her daughter were both initially 'depressed' and the daughter was 'unhappy' at school. Later they became 'happier'. The woman found the incidents involving the police 'upsetting', reminding her of previous police 'brutality'. The woman was also 'upset' at the thought of the student finishing her placement. The student, however, does not recount her own emotions until the very end. And this is just in relation to the issue of her being regarded as a family friend. She says she felt 'guilty' for giving the impression of being a family friend, but nevertheless she felt it would be 'extremely harsh' to tell the women that she was not a friend. In trying to be kind (one type of emotion work) the student engendered in herself feelings of guilt, which she had to manage (another type of emotion work).

#### **4. *Identity work***

'Identity work' is the work people do through talk, interaction and demeanour to construct and negotiate who they are – their personal and social identities. According to Sveningsson and Alvesson (2003, p. 1165), identity work is a conceptualisation of the ways people engage in 'forming, repairing, maintaining, strengthening or revising the constructions that are productive of a sense of coherence and distinctiveness'. In the context of professional work, this is mainly focused on social and professional identities, such as 'social worker' or 'competent professional' (see Taylor and White, 2000, pp. 100-106). These identities are partly constructed through available social and employer discourses, while particular identities offered by dominant discourses (for example, entrepreneur or technocrat) may be resisted (Halford and Leonard, 1999; Watson, 2007). 'Ethical identity work' (identity work in the ethical sphere) involves practitioners working specifically on their ethical selves – for example, as morally good social workers, caring professionals, committed practitioners or fair-

minded people (see, for example, the account given in Weinberg, 2014). It can be understood in Foucauldian terms as 'care of the self' (Foucault, 2000a) and is clearly related to constructions of moral character, and how people develop and present themselves in terms of 'virtues and vices' (Banks and Gallagher, 2009).

In many ethics cases the accounts as a whole tell stories of 'good social workers'. In Case 1 this is linked to fighting for someone's rights and working for policy change. The Peruvian social worker says that the case 'struck at the heart of my professional identity as a social worker'. It is clear that she thinks she has a duty as a social worker to act in accordance with 'the most important principles' (including the child's right to health) and not to 'betray our principles and values as caring professionals'. Here she is highlighting the importance of professional integrity – acting in accordance with the values of the profession. The case presents her as knowing what kind of person a social worker should be and living up to this in practice.

Case 2 is written by a student, who does not present herself as a 'good social worker'. She acknowledges that she did not deal effectively with a core social work issue – professional boundaries. However, she gives an account that fits with what we might expect from a certain type of 'good student'. She notices and reflects on her mistakes. She is honest and is able to learn from her experiences. In giving the account she is doing some work on her professional identity as a social worker, and highlighting the need for further work in order to handle such situations more effectively in the future.

## 5. *Reason work*

The work of making ethical judgements, deciding the right course of action when faced with an ethical dilemma and justifying judgements and actions through use of reasoned argument are all part of traditional conceptions of ethics as about rational deduction from ethical principles. Although I argue there is more to the work of ethics than this, nevertheless reasoning is a very important element, especially for professionals. Professionals deal with many different people with a range of demands and needs, and it is important that they can justify their decisions regarding to whom to give time and resources – for example, why a particular child should be removed or a punishment recommended for a young offender. But the work of 'ethical reasoning' as conceived of here is less about abstract rational processes following principles of logic, and more about practical reasoning based on particular situations and cases and dialogue with others - what Toulmin (2001) calls 'reasonableness' as opposed to rationality. This might involve giving a coherent explanation and justification that fits with someone's character or desires, rather than one based on what any generalised person should do. Aristotle's (350 BCE/1954) concept of 'practical reason' is relevant, although as presented in Aristotle's work and developed in relation to professional life (as 'professional wisdom') it is a broad holistic concept that encompasses aspects of the other elements of 'ethics work' identified here (Banks and Gallagher, 2009, pp. 72-95; Bondi *et al.*, 2011). 'Moral case deliberation' and ethical reflection are examples of specific exercises or processes that are used to engage professionals in analytical exploration of particular situations that raise ethical challenges or dilemmas (Molewijk *et al.*, 2008; Weidema *et al.*, 2012).

The social worker in Case 1 first presents the situation as a conflict for her (upholding institutional standards versus taking account of the real situation of the child who could not enjoy his right to health care); she then restates it as a dilemma (if she decided to offer support it would go against the rules; if she did not it would go against the most important principle of the child's right to health). She then tells us how she resolved the dilemma by critiquing the eligibility rules (which do not take into account cases of parental abandonment) and stating that many other families were similarly affected. Finally she gives an account of how she presented the case to her boss, adding a further line of argument based on lack of compliance of national legislation with international legislation and the danger of legal action by families. She invokes principles based on rights as well as utilitarian arguments based on consequences and shows herself going through a process of careful, logical reasoning.

Arguing a case on behalf of service users does not feature in Case 2. However, reasoning is present in the final part of the case. Here the student makes a judgment about her own handling of the mother's expectation of friendship. She says she thinks she did not deal with this effectively. She justifies this negative judgment about her own practice by saying she used an excuse (living in another city) for not maintaining contact. She also explains why she did not clearly tell the woman that she was not a friend: because this would be extremely harsh. This account from the student is very helpful in that it highlights the importance of reason work, and the need for critical ethical reflection in and on action, which may be aided by a supervisor, colleague or fellow student.

## **6. Relationship work**

I am using the term 'relationship work' to cover the work of engaging with others, building relationships of trust, getting to know people and caring for and about them over time. The relationships may be with service users, colleagues, officials or members of the public. Clearly, all the other elements of ethics work are accomplished in relationship with others. Even the work of reasoning by oneself only makes sense in a context of public accountability. So in one sense, relationship work is an over-arching concept, and overlaps with role work and identity work. In my earlier accounts of ethics work, I did not separate this out. However, including relationship work helps to distinguish ethics work in professional life from the narrower concept of ethical work on the self (Foucault, 2000a). Relationship work is a key feature of the ethics of care, which highlights the importance of attentiveness (noticing the need for care), responsibility (taking care of others) and responsiveness (of others to the care given) (Tronto, 1993; Held, 2006).

In Case 1 little is written about the nature of the relationship between the social worker and the woman and child. As mentioned earlier, the situation is presented as an example of a type of issue that the social worker and her colleagues have to deal with from time to time. No particular features of this woman or child are given and the responsibility enacted by the social worker is not towards this woman with whom she has a relationship of trust, care or empathy. Rather it is a general responsibility to challenge all injustices. So in that sense the case is framed in terms of the 'ethics of justice' (Gilligan, 1982) – drawing on universal principles (human rights) and rational argument.

The moral message in Case 2, on the other hand, is all about relationship. Although the student does not give us a story of how she developed trust, how she cared for and about the family or how they cared for her, the fact that the woman regarded and wanted her as a 'friend' tells us something of the degree of closeness, familiarity and trust that must have developed over the three months. The fact that the understandings of the student and the woman about the nature of the relationship were different indicates some difficulties in communication and the challenges of relationship work in a professional context.

## **7. Performance work**

This last component of ethics work is implicit in all the others and, rather like relationship work, perhaps hardly needs a separate heading. For the term 'work' implies the performance of some kind of activity. Yet it may be helpful to discuss the ways in which ethics work is about performance. Whilst doing role work or identity work usually involves interaction with others and a presentation of oneself in a certain way, doing emotion work or framing work may not always be visible to others. Sometimes it is not intended to be. Indeed, if emotion work involves cultivating an empathy that is scarcely felt, the performance may not be about making the work itself visible, but about impression management (Goffman, 1969). However, regardless of whether the empathy is 'forced' or 'natural', it is important that the professional can 'bring off' an empathic performance. Similarly, being trustworthy entails not only acting reliably and ensuring one does not let people down, but also giving plausible performances as a trustworthy person (Banks and Gallagher, 2009, p. 146).

In all ethics cases the authors are performing ethics work in constructing their accounts. The Peruvian worker makes visible to readers the efforts she had to make (and has to make all the time) to ensure fair treatment and the work she does to change unfair policies and practices. In giving the account she performs as an ethical social worker. Similarly, in Case 2, the student social worker reflects at the end on her shortcomings and in so-doing is performing as an ethically-aware and reflective student.

## **Concluding comments**

The illustrations of 'ethics work' are drawn from written accounts of their practice given by social workers in response to requests for ethics cases. The giving of an account is in itself a form of 'ethics work' – a presentation in writing of oneself as 'doing ethics'. Illustrations based on recorded interviews, group discussions and observations of actual practice (particularly video recordings) would make visible other aspects of ethics work *in situ*. The *embodied* nature of the work would be more visible (ranging from tones of voice to gestures and movements) as well as *relational* performances based on communicative interaction between participants. In particular, ethnographic studies, including recordings of team meetings, case reviews or other encounters between social workers and service users, would provide different data for analysis and interpretation on the work of framing, role, emotion, identity, reason, relationship and performance undertaken by a range of participants-in-interaction. We would see the identity work of the service user as well

as the social worker, for example. It would be possible to look at the use of *power* in the interactions and relationships, as service users, families and other professionals and stakeholders would all be actors in real-time scenes (as opposed to characters depicted by the narrator of a story). Additional analytic categories might be required – particularly to take account of power relationships.

How much of this work would be visible would depend on the situation. For example, reasoning work on the part of a social worker might be more overt in a case review meeting than an encounter between a social worker and service user at home. These would be other avenues for exploring and testing the value and relevance of the concept of ethics work and its dimensions. In written cases, interviews or focus group discussions that have a specific focus on ethics, it is easier to construct significant aspects of what is going on as ethics work, since the researcher/facilitator has already framed the focus as relating to 'the ethical'. In observing everyday professional life as it unfolds, the researcher has a bigger challenge. In one sense the whole of everyday life is about ethics (ethics is everywhere), in another sense none of it is (ethics is nowhere in particular).

The significance of the concept of 'ethics work' for practice is that it highlights the work practitioners do to see the wider political (macro) context of their practice and take responsibility for being ethical and acting ethically. It encourages greater reflexivity and a move beyond simple models of ethics as individual decision-making or external regulation. This is especially important in the context of the continuing prevalence of managerialist approaches to professional work and austerity measures that entail the growth of technical, outcome-focussed, targeted practice (Banks, 2011, 2014). Such approaches entail a framing that highlights features that 'fit' the assessment forms and protocols, reduce space for the moral agency of social workers and diminish the role of personal and emotional engagement. 'Ethics work' re-asserts the role of professional social workers as active moral agents in a political context of challengeable framings, norms, rules and policies about social justice, social responsibility and societal compassion.

## **Appendix: The cases**

### **Case 1 - Deciding on the right to health care insurance: a case from Peru**

(from Banks and Nøhr, 2012, pp. 161-4, with abridged introductory section)

*This case is narrated by a Peruvian postgraduate student social worker, with eight years post-qualifying experience. She worked in the administrative offices of the SIS (Seguro Integral de Salud, or integrated health insurance), a decentralised public body responsible for administering government health care funds for people who are extremely poor with no other health insurance. Social workers are employed in the operations management section of the SIS, in the 'affiliations area' (area de afiliaciones), which is responsible for formulating and implementing standards in relation to the identification and affiliation of SIS users. Among its tasks, this area coordinates staff of national health establishments to ensure standards allowing access to health insurance are fulfilled, as well as resolving as a last resort those cases that are not clearly defined by the legislation due to their specific characteristics.*

I was working in the affiliations area of the management of operations section of the SIS in a town in Peru. Three social workers work in this area. One of them is in charge of coordination, with administrative support staff. Being a technical area, according to the institutional internal regulation, the staff should not engage with the public directly. However, since this area of work was created and due to the demand from members of the public to solve their problems, the affiliations area has

developed an internal policy of dealing directly with individuals and undertaking problem solving, which is now part of its function.

One day, a woman came to the operations management of the SIS with her three year-old son. The child was not in an emergency situation, but needed specialized outpatient care. The woman was really angry because she had taken her son to the Child Health Institute and the staff had refused to take care of him. The reason given was that the admissions staff of that Institute had found that the boy's father was covered by social security insurance. The mother told the admissions officer that the father had never recognized his children and that she had not had any contact with him for several years. She had not initiated a process in order to claim for maintenance of their children, nor for social security insurance, if he had a permanent job.

It should be noted at this point that the insurance provided by the SIS is intended for people who are in poverty and do not have any other health insurance, private or public. These requirements are included in a Supreme Decree as well as in several Ministry Resolutions. The Law on Social Security also states that all fathers or mothers entitled to this insurance may also include their children under 18 years old in the coverage. This is the reason why admissions staff in health centres, before agreeing to take care of a child in the framework of the SIS, check whether either of the parents holds another kind of health insurance. As in many countries, abandonment by fathers is quite frequent, mainly in the poorest social layers; in those cases, the mothers take all responsibility for their children. As a result, children have to cope with their fathers' lack of responsibility.

In this case, a conflict arose for me: I had to decide whether the three year-old child was entitled to the SIS. On the one hand, there were institutional standards and regulations establishing the requirements needed to access to this system, which indicated that this child was not eligible. On the other hand, I was faced with the real situation of this child: his father had not recognized him, so, even though he might be entitled to the coverage provided by his father's social security, he could not enjoy this right because of this lack of recognition.

This dilemma particularly challenged my actual, effective role as a social worker, my ethical performance, as well as my assessment of the case. It struck at the heart of my professional identity as a social worker, and raised issues about the relationship between professional and public responsibilities. If I decided that the child was entitled to the SIS, this would be against the institutional rules and against the establishment. If I decided otherwise, I would go against the most important principles according to my analysis as a social worker, including the child's right to health.

However, if we examine the institutional rule for eligibility for SIS, it does not actually take into account a number of social situations, such as parental abandonment, as was the case with this family. This is detrimental not only to this child, but to many others as well, according to the statistics about cases similar to this that I and other colleagues have been collecting.

So, faced with this dilemma, my decision, and that of my colleagues, was to give priority to the child's right to health, and also the 'best interests of the child' as defined in the International Convention for the Rights of the Child, which Peru has signed and ratified. The country's Code for Children and Teenagers also includes this protection measure. Taking these factors into account, we felt we had to take the decision of granting the SIS to this child.

The SIS is a public entity with different hierarchy levels. Therefore, although we had decision-making power in some social cases, we also had to ask for and obtain the manager's consent. There is a high turnover rate in this position, so every time we found ourselves facing a similar case, we had to explain the problem again to a new person. In this case, we had to explain to the manager the link between national and international legislation and the potential legal action that these families could file with the Ministry of Health due to the lack of care for their children. Finally, the manager supported our decision and we got his permission.

But we also wanted to grant the SIS to all other children with a similar problem. Social workers in the affiliations area had to coordinate the affiliations policy with all the staff in the health centres from the Ministry of Health. Thus we had to coordinate with other social workers who did not belong to the SIS staff, but who work in other health-related institutions, so they could advise the mothers to start legal

proceedings in order to achieve recognition and maintenance, since this was also their children's right.

My final comments on this case are as follows. While working with and for people as social workers, especially in such a vital field as health, the practical lesson is that we will have to confront many dilemmas. However, the richest aspect is to know how to confront them, including the fact that we can use many tools without breaking the professional code of ethics. Above all, a fundamental principle is that of human solidarity, which is an important reference for me and has helped me a lot in my job: 'treat the others as you would like them to treat you'.

Taking decisions is not an easy task, and this is even more true in the field of social work, where day after day we (the professionals) have to identify human and social problems of great complexity. So I consider it is important to have a series of theoretical and practical tools such as the ones we have learned throughout our ethics in social work course, that help us to improve our interventions and, above all, to act without betraying our principles and values as caring professionals.

## **Case 2 – 'Giving the impression of being a family friend': working with an asylum-seeking family in the UK**

(a longer version of a case in Banks, 2012, p. 25)

*This case comes from the UK and is narrated by a student social worker. She was undertaking her second period of fieldwork practice in a voluntary sector agency working with families with pre-school children in a large city. The case is about her work with a particular asylum-seeking family. At the time, several areas of the city were 'dispersal areas' for asylum seekers, who would be moved there from other parts of the country to live in low quality accommodation in poor neighbourhoods. Government policy in the UK entails that asylum seekers have minimal welfare benefits and no right to work. In dispersal areas they are often isolated and experience racism and poor living conditions.*

This case is about an asylum-seeking woman, A, and her two children - a seven-year old daughter, B, and a two-month old son, C. My initial contact was just before Christmas. The family had been referred to my agency as they had recently been relocated to the area and were extremely isolated. The referrer felt that A was very depressed and required support. During my initial visit all three family members were present. A cried for most of the visit and B also appeared very depressed. A reported that B was unhappy in her school and that she had become very withdrawn since moving into the area. I spoke with B and she said she didn't have any friends in the area and she missed their previous home, where they had been living for three years.

Over the next three months I visited the family at least once a fortnight and also assisted A through a couple of incidents which had required police intervention and which A had found to be extremely upsetting due to her past experiences of police brutality in her home country. The situation improved significantly, with A and B both appearing much happier and making friends in the local area.

However I was aware that A viewed me as a friend, and although she was aware that I was a worker, when I told her that I would be finishing the placement soon she became upset. A made a number of comments on numerous occasions asking me to visit her whenever I was in the area and invited me to C's birthday party in four months' time. I felt that I did not deal with this effectively, as I tended to use the fact that I did not live in the same city as an excuse for not being able to maintain contact, and I felt that this blurred the professional boundaries. I found it extremely difficult to maintain these boundaries and although I felt guilty for giving the impression of being a family friend, I also felt that it would be extremely harsh to tell A that she was a 'service user' rather than a friend.

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