

# ETHICAL STANDARDS IN SOCIAL WORK: AN INTRODUCTION

One hallmark of a profession is its willingness to establish ethical standards to guide practitioners' conduct (D. Callahan & Bok, 1980; Congress, 2013; Greenwood, 1957; Hall, 1968; Lindeman, 1947). Ethical standards are created to help professionals identify ethical issues in practice and provide guidelines to determine what is ethically acceptable or unacceptable behavior.

Professions typically organize their ethical standards in the form of published codes of ethics (Bayles, 1986; Brandl & Maguire, 2002; Congress, 2013; S. J. Freeman et al., 2004; Kultgen, 1982; Montgomery, 2003). According to Jamal and Bowie (1995), codes of ethics are designed to address three major issues. First, codes address “problems of moral hazard,” or instances in which a profession’s self-interest may conflict with the public’s interest. Such conflicts can arise in a variety of ways. Examples include whether accountants should be obligated to disclose confidential information concerning financial fraud that their clients have committed, whether dentists should be permitted to refuse to treat people who have an infectious disease such as HIV/AIDS, whether physicians should be allowed to invest personally in laboratories or rehabilitation facilities to which they refer patients, and whether social workers should be expected to disclose to law enforcement officials confidential information about crimes their clients have admitted committing.

Second, codes address issues of professional courtesy, that is, rules that govern how professionals should behave to enhance and maintain a profession’s integrity. Examples include whether lawyers should be permitted to advertise and solicit clients, whether psychiatrists should accept gifts and favors from pharmaceutical companies, whether psychologists should be prohibited from soliciting colleagues’ clients, and whether social workers should report colleagues who are impaired or who engage in unethical conduct.

Finally, codes address issues that concern professionals’ duty to serve the public interest. For example, to what extent should physicians and nurses be expected to assist people who do not have health insurance or to help in a public emergency? Should dentists donate a portion of their professional time to provide services to low-income people who do not have dental insurance? Should social workers provide services without remuneration to clients whose insurance coverage has been exhausted?

As in other professions—such as medicine, nursing, law, psychology, journalism, and engineering—social work has developed a comprehensive set of ethical standards. These

standards have evolved over time, reflecting important changes in the broader culture and in social work's mission, methods, and priorities. They address a wide range of issues, including, for example, social workers' handling of confidential information, sexual contact between social workers and their clients, conflicts of interest, use of technology, documentation, supervision, education and training, research and evaluation, self-care, and social and political action.

Ethical standards for the social work profession appear in various forms. The NASW *Code of Ethics* (included in this book as Appendix A) is the most visible compilation of the profession's ethical standards. Ethical standards can also be found in codes of ethics developed by other social work organizations (for example, the National Association of Black Social Workers, the Clinical Social Work Association [CSWA], and the Canadian Association of Social Workers), regulations governing state licensing boards, and codes of conduct promulgated by social services agencies. In addition, the social work literature contains many discussions of ethical norms in the profession (Banks, 2020; Barsky, 2019; Congress, 1999, 2013; Dolgoff et al., 2012; Hugman & Carter, 2016; Reamer, 1990, 1995a, 1995b, 2018; Rhodes, 1986).

## The Evolution of Social Work Ethics

The current NASW *Code of Ethics* reflects major changes in social work's approach to ethical issues throughout its history and the profession's increasingly mature grasp of ethical issues. During the earliest years of social work's history, few formal ethical standards existed. The earliest known attempt to formulate a code was an experimental draft published in the 1920s and attributed to social work pioneer Mary Richmond (Pumphrey, 1959). Although several social work organizations formulated draft codes during the profession's early years—including the American Association for Organizing Family Social Work and several chapters of the American Association of Social Workers—not until 1947 did the latter group, the largest organization of social workers of that era, adopt a formal code (A. Johnson, 1955). In 1960, NASW adopted its first code of ethics, five years after the association was formed. Over time, the NASW *Code of Ethics* has come to be recognized in the United States as the most visible and influential code of ethics in social work.

The 1960 NASW *Code of Ethics* consisted of 14 proclamations concerning, for example, every social worker's duty to give precedence to professional responsibility over personal interests; to respect clients' privacy; to give appropriate professional service in public emergencies; and to contribute knowledge, skills, and support to human welfare programs. First-person statements (that is, "I give precedence to my professional responsibility over my personal interests" and "I respect the privacy of the people I serve") were preceded by a preamble that set forth social workers' responsibility to uphold humanitarian ideals, maintain and improve social work service, and develop the philosophy and skills of the profession. In 1967, a 15th proclamation pledging nondiscrimination was added.

Soon after the adoption of the code, however, NASW members began to express concern about its level of abstraction, its scope and usefulness for resolving ethical conflicts, and its provisions for handling ethics complaints about practitioners and agencies. As McCann and Cutler (1979) noted:

The sources of dissatisfaction are widespread and have involved practitioners, clients, chapter committees, and, in particular, those persons directly engaged in the adjudication of

complaints in which unethical behavior is charged. At a time of growing specialization and organizational differentiation, a variety of issues have surfaced centering on the nature of the code itself, its level of abstraction and ambiguity, its scope and usefulness, and its provision for the handling of ethical complaints. (p. 5)

In 1977, NASW established a task force, chaired by Charles Levy, to revise the code and enhance its relevance to practice; the result was a new code adopted by NASW in 1979. This code included six sections of brief, unannotated principles preceded by a preamble setting forth the code's general purpose and stating that its principles provided standards for the enforcement of ethical practices among social workers:

This code is intended to serve as a guide to the everyday conduct of members of the social work profession and as a basis for adjudication of issues in ethics when the conduct of social workers is alleged to deviate from the standards expressed or implied in this code. It represents standards of ethical behavior for social workers in professional relationships with those served, with colleagues, with employers, with other individuals and professions, and with the community and society as a whole. It also embodies standards of ethical behavior governing individual conduct to the extent that such conduct is associated with an individual's status and identity as a social worker. (NASW, 1979, p. v)

The 1979 code set forth principles related to social workers' conduct and comportment as well as their ethical responsibility to clients, colleagues, employers and employing organizations, the social work profession, and society. The code's principles were both prescriptive (for example, "The social worker should make every effort to foster maximum self-determination on the part of clients" [Principle II.G, p. 5] and "The social worker should afford clients reasonable access to any official social work records concerning them" [Principle II.H.3, p. 6]) and proscriptive (for example, "The social worker should not exploit relationships with clients for personal advantage" [Principle II.F.2, p. 4] and "The social worker should not assume professional responsibility for the clients of another agency or a colleague without appropriate communication with that agency or colleague" [Principle III.K.2, p. 7]). Several of the code's principles were concrete and specific (for example, "The social worker should under no circumstances engage in sexual activities with clients" [Principle II.F.5, p. 5] and "The social worker should obtain informed consent of clients before taping, recording, or permitting third-party observation of their activities" [Principle II.H.5, p. 6]), and others were more abstract, asserting ethical ideals (for example, "The social worker should maintain high standards of personal conduct in the capacity or identity as social worker" [Principle I.A, p. 1] and "The social worker should encourage informed participation by the public in shaping social policies and institutions" [Principle VI.P.7, p. 9]). Clearly, some principles—especially those pertaining to social justice and general social welfare—were intended to provide social workers with important aspirations, whereas others set forth specific, enforceable standards of conduct, violations of which provide grounds for filing a formal ethics complaint.

The 1979 code was revised twice, eventually including 82 principles. In 1990, several principles related to solicitation of clients and fee splitting were modified after an inquiry into NASW policies by the U.S. Federal Trade Commission (FTC), begun in 1986, that concerned possible restraint of trade. As a result of the inquiry, principles in the code were revised to remove prohibitions concerning solicitation of clients from colleagues or an agency

and to modify wording that concerned accepting compensation for making a referral. NASW also entered into a consent agreement with the FTC concerning issues raised by the inquiry.

In 1993, a task force chaired by this author recommended to the NASW Delegate Assembly that it further amend the code of ethics to include five new principles—three related to the problem of social worker impairment and two related to the problem of dual or multiple relationships (boundary issues). This recommendation reflected social workers' growing understanding of the need to address impairment among some social workers and the ways in which blurred or confused boundaries between social workers and clients can compromise the quality of services delivered. The first three of these new principles addressed instances in which social workers' own problems and impairment interfere with their professional functioning, and the latter two addressed the need to avoid social, business, and other nonprofessional relationships with clients because of possible conflicts of interest. The 1993 Delegate Assembly voted to incorporate the five new principles and passed a resolution to establish a task force to draft an entirely new code of ethics for submission to the 1996 Delegate Assembly that would be far more comprehensive and relevant to contemporary practice.

An entirely new code was needed because, since the 1979 code had been drafted, a new scholarly field—applied and professional ethics—had emerged. Much of what contemporary professionals in general and social workers in particular have learned about professional ethics occurred after the ratification of the 1979 code. Social workers developed a firmer grasp of the wide range of ethical issues facing practitioners, many of which were not addressed in the 1979 code. The broader field of applied and professional ethics, which had begun in the early 1970s, had matured considerably, resulting in the identification and greater understanding of novel ethical issues not covered by the 1979 code.

The revised code was adopted in August 1996 and serves as the foundation of the current code. The NASW *Code of Ethics* Revision Committee was appointed in 1994 and spent two years drafting a new code. This committee, which was chaired by this author and included a professional ethicist and social workers from a variety of practice and educational settings, carried out its work in three phases (Reamer, 1997b). Each phase was designed to provide the committee with the most comprehensive information available on social work ethics and, more broadly, professional ethics so that the new code would reflect prevailing opinion in the profession.

The committee first reviewed the literature on social work ethics, and applied and professional ethics generally, to identify key concepts and issues that might be addressed in the new code. This was particularly important because so much of the literature on professional and social work ethics had been published after the development of the 1979 code. The committee also reviewed the 1979 code to identify content that should be retained or deleted and to identify areas in which content might be added. The committee then discussed possible ways of organizing the new code to enhance its relevance and use in practice.

During the second phase, and while the first-phase activities were occurring, the committee also issued formal invitations to all NASW members and to members of various social work organizations (such as the National Association of Black Social Workers, Council on Social Work Education [CSWE], National Federation of Societies for Clinical Social Work, and Association of Social Work Boards [ASWB]) to suggest issues to be addressed in the new code. The NASW *Code of Ethics* Revision Committee reviewed its list of relevant content areas drawn from the professional literature and from public comment and developed numerous

drafts, the last of which was shared with ethics experts in social work or another profession for their review and comment.

In the third phase, the committee made several revisions on the basis of the feedback it received from the experts who reviewed the document, published a copy of the draft code in the January 1996 issue of the *NASW News*, and invited all NASW members to send comments for consideration by the committee as it prepared the final draft for submission to the 1996 NASW Delegate Assembly. In addition, during this last phase various committee members met with each of the six NASW Delegate Assembly regional coalitions to discuss the code's development and receive delegates' comments and feedback. The code was then presented to and ratified overwhelmingly by the Delegate Assembly in August 1996 and implemented in January 1997 (NASW, 1996).

In 1999, NASW approved deleting a phrase from one standard (1.07[c]) to clarify the circumstances in which social workers may need to disclose confidential information without a client's consent. The deleted phrase required social workers to disclose confidential information "when laws or regulations require disclosure without a client's consent." After the code was ratified in 1996 with this language, some social workers became concerned that this phrase could be interpreted to mean that social workers would be required to comply with new laws requiring disclosure of the identity of undocumented immigrants who were receiving social services, which would compromise practitioners' integrity and erode clients' willingness to trust social workers. In 2008, the code was revised to incorporate sexual orientation, gender identity, and immigration status into the existing nondiscrimination standards.

August 2017 marked another significant date in social work history. The NASW Delegate Assembly formally approved significant updates to the *Code of Ethics*. The revisions focused explicitly on ethical challenges pertaining to social workers' and clients' increased use of technology. They reflect a broader shift in social work practice related to technology that has led to very recent and noteworthy changes in regulatory (licensing board) standards, practice standards, and ethical standards. It is significant that the updated code retained the content of the 1996 code, a clear acknowledgment of that code's continuing relevance and usefulness; nearly all of the 2017 revisions were technology related.

The process leading to these significant updates began when NASW appointed a task force to determine whether changes to the *Code of Ethics* were needed to address concerns related to social workers' and clients' increased use of technology. Since 1996, when the code was revised significantly, the use of computers, smartphones, tablets, email, texting, online social networking, monitoring devices, video technology, and other electronic technology in various aspects of social work practice has significantly increased. In fact, many of the technologies currently used by social workers and clients did not exist in 1996. The 2017 code included extensive technology-related additions pertaining to informed consent, competent practice, conflicts of interest, privacy and confidentiality, sexual relationships, sexual harassment, interruption of services, unethical conduct of colleagues, supervision and consultation, education and training, client records, and evaluation and research.

The most significant revisions to the code:

- Encourage social workers to discuss with clients policies concerning use of technology in the provision of professional services. Clients should have a clear understanding of the ways in which social workers use technology to deliver services, communicate

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with clients, search for information about clients online, and store sensitive information about clients.

- Encourage social workers who plan to use technology in the provision of services to obtain client consent to the use of technology at the beginning of the professional-client relationship.
- Advise social workers who use technology to communicate with clients to assess each client's capacity to provide informed consent.
- Advise social workers to verify the identity and location of clients they serve remotely (especially in case there is an emergency and also to enable social workers to comply with laws in the client's jurisdiction).
- Alert social workers to the need to assess clients' ability to access and use technology, particularly when social workers are providing online and remote services. It also encourages social workers to help clients identify alternate methods of service delivery if the use of technology to deliver services is not appropriate.
- Advise social workers to respect clients' privacy and obtain client consent before conducting an online search for information about clients (unless there are emergency circumstances).
- Highlight the need for social workers to understand the special communication challenges associated with electronic and remote service delivery and how to address these challenges.
- Advise social workers who use technology to comply with the laws of both the jurisdiction in which the social worker is regulated and located and that in which the client is located (given that social workers and clients might be in different states or countries).
- Advise social workers to be aware of, assess, and respond to cultural, environmental, economic, disability, linguistic, and other social diversity issues that may affect delivery or use of services.
- Discourage social workers from communicating with clients using technology for personal or non-work-related purposes, to maintain appropriate boundaries.
- Advise social workers to take reasonable steps to prevent client access to social workers' personal social networking sites and personal technology, again to avoid boundary confusion and inappropriate dual relationships.
- Suggest that social workers should be aware that posting personal information on professional websites or other media could cause boundary confusion, inappropriate dual relationships, or harm to clients.
- Remind social workers to be aware that clients may discover personal information about them on the basis of their personal affiliations and use of social media.
- Suggest that social workers should avoid accepting requests from or engaging in personal relationships with clients on online social networks or other electronic media.
- Advise social workers to take reasonable steps (such as use of encryption, firewalls, and secure passwords) to protect the confidentiality of electronic communications, including information provided to clients or third parties.
- Advise social workers to develop and disclose policies and procedures for notifying clients of any breach of confidential information in a timely manner.

- Advise social workers to inform clients of unauthorized access to the social worker's electronic communication or storage systems (for example, cloud storage).
- Advise social workers to develop and inform clients about their policies on the use of electronic technology to gather information about clients.
- Advise social workers to avoid posting any identifying or confidential information about clients on professional websites or other forms of social media.
- Advise social workers using technology to facilitate evaluation or research to obtain clients' informed consent for the use of such technology. The code also encourages social workers to assess clients' ability to use technology and, when appropriate, offer reasonable alternatives.

Several additional revisions to code went into effect in 2021: the inclusion of self-care language to the Purpose and Ethical Principles sections and the addition of the term “cultural competence” as it relates to social workers' ethical responsibilities described in standard 1.05 (replacing the term “cultural awareness”). With regard to self-care, the code states:

Professional self-care is paramount for competent and ethical social work practice. Professional demands, challenging workplace climates, and exposure to trauma warrant that social workers maintain personal and professional health, safety, and integrity. Social work organizations, agencies, and educational institutions are encouraged to promote organizational policies, practices, and materials to support social workers' self-care.

The code's most recent standards pertaining to cultural competence highlight the importance of cultural humility (standard 1.05[c]):

Social workers should demonstrate awareness and cultural humility by engaging in critical self-reflection (understanding their own bias and engaging in self-correction); recognizing clients as experts of their own culture; committing to life-long learning; and holding institutions accountable for advancing cultural humility.

For a variety of reasons, especially during the 1980s and early 1990s, scholarly analyses of ethical issues in all professions burgeoned. First, and perhaps most important, was the emergence in the 1970s of complicated ethical issues in health care (for example, public debate about the ethics of allocating scarce organs, genetic engineering, abortion, and euthanasia). These developments led to the establishment of the bioethics field (Beauchamp & Childress, 2019). Without question, debate and scholarship in bioethics paved the way for other professions' exploration of ethical issues. Professionals in all fields began for the first time to appreciate the useful and complex connections between ethical theory and principles and real-life ethical problems faced by practitioners (Reamer, 1985, 1986, 1991a, 1993b, 1997c, 2018).

Second, at about the same time (the late 1960s and early 1970s), many social work and health professionals were embroiled in sustained debate concerning patients' rights, welfare rights, prisoners' rights, and civil rights. Relevant issues included a patient's right to refuse treatment, the role of informed consent in research, the humane treatment of prisoners, and affirmative action and civil rights protections in the workplace. These concepts, which many professionals now take for granted, were new at the time, and discussion of them helped shape the emerging field of applied and professional ethics.

Third, professionals began paying more attention to ethical issues because of increased litigation concerning alleged ethical misconduct involving practitioners in all fields (Reamer, 2001b, 2015, 2023b). Lawsuits alleging, for example, breaches of privacy and confidentiality, sexual misconduct and other boundary violations, defamation of character, fraudulent billing, and inappropriate termination of services alerted many people in the helping professions to possible ethical problems in their ranks. If for no other reason, practitioners needed to learn more about ethics to prevent malpractice claims and avoid lawsuits (Reamer, 2003b, 2015, 2023b).

Fourth, increasingly widespread publicity in all media about professional misconduct did much to convince practitioners that they needed to pay more attention to ethics. For example, there were reports of physicians who committed Medicaid fraud, clergy who were sexually involved with minors, lawyers who raided clients' escrow accounts, police officers who accepted bribes or abused suspects, and psychotherapists who developed sexual relationships with clients. Of course, in the midst of this period (the early 1970s), the nation was wrestling with the ethical implications of the Watergate political scandal, an ethical lapse with far-reaching consequences. Watergate and myriad other national and local political scandals since have done much to inspire interest in ethical issues.

Finally, interest in professional ethics grew because the professions themselves matured. Like people, professions experience stages of development. It took decades for nearly all the professions to pay serious attention to ethical issues, in part because, during the earlier phases of their development, they tended to be preoccupied with cultivating their technical expertise and proficiency. This is understandable, given these professions' need to establish their credibility with the public.

A clear by-product of this general trend is that social workers as a group have begun to pay much more attention to ethical issues in the profession. Many state licensing boards now require ethics education during each licensing cycle. Also, presentations on social work ethics at professional conferences sponsored by NASW, CSWE, CSWA, and other social work organizations have increased substantially. In addition, CSWE has strengthened its requirements concerning instruction in undergraduate and graduate social work education programs on ethical issues and ethical decision making. Moreover, many social services agencies now provide ethics in-service training.

## Current NASW *Code of Ethics*

The current code includes four major sections. The first section, "Preamble," summarizes social work's mission and core values. For the first time in NASW's history, the association has adopted and published a formally sanctioned mission statement and an explicit summary of the profession's core values. The committee members who wrote the 1996 code believed strongly that it was time for the profession to codify a widely endorsed mission statement, particularly as social work approached the 100th anniversary of its formal inauguration. The mission statement sets forth several themes key to social work practice.

### Key Themes

**Commitment to Enhancing Human Well-Being and Helping Meet Basic Human Needs of All People.** Social work historically has paid particular attention to the needs and empowerment



of people who are vulnerable, oppressed, and living in poverty. The concept of this enduring dedication to basic human needs was included to remind social workers of the profession's fundamental preoccupation with people's most essential needs, such as food, clothing, health care, and shelter. (See Towle's [1965] seminal work, *Common Human Needs*, for a discussion of this concept.)

**Client Empowerment.** Especially during the era of charity organization societies in the late 19th and early 20th centuries, many social workers tended to behave paternalistically toward clients. Social workers of that time were inclined to focus on issues of moral rectitude and character in an effort to address people's problems. Over the years, however, as social workers have developed a richer understanding of the ways in which structural problems—such as a weak economy, racial discrimination, poverty, and deindustrialization—can create problems in people's lives, they have promoted client empowerment as a goal (Gutierrez, 1990). *Empowerment* is “the process of helping individuals, families, groups, and communities increase their personal, interpersonal, socioeconomic, and political strength and to develop influence toward improving their circumstances” (Barker, 2003, p. 142). As Black (1994) has suggested:

Social work has found the concept of empowerment useful for deepening the concerns of the generalist by specifying practice objectives that combine personal control, ability to affect the behavior of others, enhancement of personal and community strengths, increased equity in distribution of resources, ecological assessment, and the generation of power through the empowerment process. The helping relationship is based on collaboration and mutual respect and emphasizes building on existing strengths. (p. 397)

**Service to People Who Are Vulnerable and Oppressed.** Historically, social workers have been concerned about the well-being of people living in poverty and who are otherwise oppressed. Throughout the profession's history, however, there has been vigorous debate about the extent to which social work must, by definition, focus on the needs of people who are poor and oppressed. In recent years especially, the profession has seen an increase in the number of people interested in obtaining a social work degree to provide clinical mental health services primarily to those who are affluent or covered by third-party insurers (Gibelman, 2005; Poppo, 1992; Reamer, 1992a; Siporin, 1992; Specht & Courtney, 1994).

The NASW *Code of Ethics* Revision Committee that wrote the 1996 code confronted this issue head on, and the committee's conclusion is reflected in the current code. The mission statement stresses social work's “particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty” (NASW, 1996, p. 1). This does not mean that social workers are concerned exclusively with people who are poor and oppressed. However, it does mean that at social work's core is a fundamental interest in and commitment to such people. The committee recognized that many legitimate and important forms of social work address the needs of middle- and upper-income people and those who are eligible for third-party coverage, including social work services provided in schools, hospitals and other health care facilities, mental health agencies, private practice settings, and work sites and services provided to the military. However, the committee also asserted that a primary commitment to people who are poor and oppressed is an essential ingredient of social work's mission and identity—an ingredient that distinguishes social work from other helping professions.

**Focus on Individual Well-Being in a Social Context.** Another defining feature of social work is the profession's earnest attempt to understand and address individuals' problems in a social context. Consistent with the widely embraced ecological perspective (Hartman, 1994), social workers pride themselves on their determination to examine people's problems in the context of their environments, including their families, communities, social networks, employment settings, ethnic and religious affiliations, and so forth. As Compton and Galaway (1994) asserted in their classic statement, the ecological perspective

offers a conceptual framework that shifts attention from the cause-and-effect relationship between paired variables (does the environment cause the person to behave in a certain way, or does the person affect the environment in a certain way?) to the person and situation as an interrelated whole. The person is observed as a part of his or her total life situation; person and situation are a whole in which each part is related to all other parts in a complex way through a complex process in which each element is both cause and effect. These dynamic interactions, transactions, and organizational patterns, which are critical to the functioning of both the individual and the situation, are observable only when we study the whole system. Thus the whole is always more than the sum of its parts. In attempting to understand a problem in social functioning, you cannot achieve understanding by adding together, as separate entities, the assessment of the individual and the assessment of the environment. Rather you must strive for a full understanding of the complex interactions between client and all levels of social systems as well as the meaning the client assigns to these interactions. (p. 118)

**Promotion of Social Justice and Social Change.** One of social work's hallmarks is its enduring and deep-seated commitment to social justice with and on behalf of clients, "an ideal condition in which all members of a society have the same basic rights, protection, opportunities, obligations, and social benefits" (Barker, 2003, p. 404). Throughout the profession's history, social workers have been actively involved in social efforts to address basic human needs and enhance people's access to important social services. Such social action has taken various forms, such as lobbying public officials, undertaking community organizing, changing organizations to be more responsive, and campaigning for political candidates (Finn, 2021; Gamble & Weil, 2013; Hardina, 2013; Schneider et al., 2013). Although social workers' social change efforts have ebbed and flowed over time (Gil, 1994, 1998) at both the national and the local levels, they have at least in principle understood the importance of social justice and social action. This, too, is one of the features that distinguishes social work from other helping professions.

**Sensitivity to Cultural and Ethnic Diversity.** Unlike the earlier NASW codes of ethics, the current code emphasizes the need for social workers to understand the role of cultural and ethnic diversity in practice and to be culturally competent; it also exhorts social workers to strive to end all forms of discrimination, whether related to race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical ability. Particularly since the 1970s, social workers have enhanced their understanding of the ways in which cultural and ethnic norms and history can affect clients' experiences, perceptions, and life circumstances. In addition, social workers have developed a sound understanding of the ways in which social work interventions and social policies must take into consideration cultural and ethnic diversity (Chau,

1991; Devore & Schlesinger, 1998; Green, 1982; Ho, 1987; Hooyman, 1994; Lister, 1987; Lum, 1992, 2011, 2013; Pinderhughes, 1994; Pitner & Sakamoto, 2016).

The preamble to the current code also sets forth the core values in which social work's mission is rooted.

### Purpose of the Code

The second section of the code, "Purpose of the NASW *Code of Ethics*," provides an overview of its main functions and a brief guide for dealing with ethical issues or dilemmas in social work practice. This section alerts social workers to the code's various purposes.

**The code identifies core values on which social work's mission is based.** The preamble identifies six core values: service, social justice, dignity and worth of the person, the importance of human relationships, integrity, and competence. The NASW *Code of Ethics* Revision Committee settled on these core values after a systematic review of literature on the subject. The committee's final list represented a distillation of the numerous lists of social work values proposed by various authors.

**The code summarizes broad ethical principles that reflect the profession's core values and establishes a set of specific ethical standards that should be used to guide social work practice.** As discussed in more detail later, the code distinguishes between broad ethical principles based on social work's core values and more specific ethical standards designed to guide practice.

**The code is designed to help social workers identify relevant considerations when professional obligations conflict or ethical uncertainties arise.** The *Code of Ethics* is one of many tools social workers can use to address ethical issues that emerge in practice. This section's guide for dealing with ethical issues emphasizes various resources social workers should consider when faced with difficult ethical decisions, such as ethical theory and decision making, social work practice theory and research, laws, regulations, agency policies, social work practice standards, and other relevant codes of ethics. Social workers are encouraged to obtain ethics consultation when appropriate, whether from an agency-based or social work organization ethics committee, regulatory body (for example, a state licensing board), knowledgeable colleagues, supervisors, or legal counsel. Ethical theory and decision making are now widely understood to be critically important components of practice. Some ethical issues faced by social workers are clear and straightforward. It is easy for practitioners to agree, for example, that clinical social workers should not have sexual contact with clients, social work administrators should not embezzle agency funds, and social work researchers should not fabricate program evaluation results.

Other issues, however, are ethically complex. They arise in situations in which social workers face conflicting professional duties, such that fulfilling one violates another (Reamer, 1990, 1998a, 2018, 2022). Examples include social workers who struggle to decide whether to intervene with a client who is engaging in self-destructive behavior; to have online social networking contact with a former client; to use technology to provide remote services to a client; to withhold troubling information contained in a case record from a particularly vulnerable

client; to disclose confidential information against a client's wishes to protect a third party from harm; to report to authorities that a professional colleague is impaired or has engaged in unethical behavior; to exaggerate a clinical diagnosis to help a vulnerable client qualify for service; to participate in a labor strike at a work site, which could have detrimental consequences for clients; or to violate a mandatory reporting law to maintain a therapeutic relationship with a client who has made meaningful progress. In such cases, social workers often struggle to reconcile competing and conflicting professional obligations (Reamer, 2005b, 2018).

Particularly since the early 1970s, when the field of applied and professional ethics emerged, professionals in all fields have developed a better understanding of the role of ethical theory and ethical decision making in circumstances in which practitioners face conflicting ethical duties (Reamer, 1984, 1987c, 1989b, 1997a, 1998a, 2018, 2022). During this period, social workers began to analyze systematically how practitioners make ethical decisions and resolve ethical dilemmas. Although there have been discussions of ethics and values since the profession's formal beginning in the late 19th century, the deliberate, systematic study of ethical dilemmas in the profession is more recent (Joseph, 1989; Keith-Lucas, 1977; Levy, 1972, 1973, 1976; Reamer, 1995a, 1995b, 2018).

Especially since the 1980s, practitioners and scholars in many fields have become interested in examining the ways in which principles of ethics and ethical theory—drawn largely from the discipline of moral philosophy and, at times, theology—can be applied to ethical dilemmas in the professions. Much of the inquiry has focused on two key questions: (1) What ethical duties do professionals have in relation to clients, colleagues, employers, the social work profession, and the broader society and (2) what criteria or guidelines can professionals draw on when their ethical duties and responsibilities conflict (J. Callahan, 1988; Gambrill & Pruger, 1997; Reamer, 1980, 1982, 1983b, 1993a, 2001a, 2018, 2022; Reamer & Abramson, 1982; P. N. Reid & Popple, 1992)?

To approach the analysis of ethical dilemmas deliberately and systematically, social workers and other professionals sometimes draw on theories and principles of ethics. For centuries, moral philosophers—sometimes known as “ethicists”—have been developing a wide range of theories and principles concerning issues of right and wrong, the nature of duty and obligation, and justice. Some of these theories focus on issues of metaethics, or debates about whether moral criteria or guidelines can be derived to determine what is ethically right or wrong, or good or bad. Some ethicists, known as “cognitivists,” believe that objective criteria or guidelines can be formulated to assess whether certain actions are or are not ethical; others—“noncognitivists”—assert that ethical judgments will never amount to anything other than subjective opinion or expressions of moral preference (Beauchamp & Childress, 2013; Frankena, 1973; Gewirth, 1978; Rachels & Rachels, 2015; Reamer, 1989a, 1993a, 2022).

Other theories focus on issues of normative ethics, theories intended to guide real-life decisions in ethically complex situations. Not surprisingly, theories of normative ethics have been of particular interest to professionals who face difficult ethical questions. For example, the deontological view claims that certain actions are inherently right or wrong as a matter of principle. Deontologists might argue, for example, that, as a matter of moral obligation, social workers must always obey mandatory reporting laws related to child abuse, even if doing so would jeopardize a social worker's therapeutic relationship with a client—that is, the law is the law (Rachels & Rachels, 2015; Reamer, 2005b, 2018, 2022). Similarly, deontologists might argue that clients should always be told the truth, even if knowing the truth might be harmful.

In contrast, the so-called consequentialist, utilitarian, or teleological perspective focuses on the outcome of a course of action and promotes actions that produce the greatest good (Frankena, 1973; Gorovitz, 1971; Rachels & Rachels, 2015; Smart & Williams, 1973). That is, actions engaged in by professionals are not inherently right or wrong; rather, whether an action is ethical or not is determined by the goodness of its consequences. A proponent of this point of view might argue that, although mandatory reporting laws should generally be followed because of the good consequences such actions produce, social workers who have evidence to suggest that complying with the law in a particular case would produce harmful consequences (for example, undermining a productive therapeutic relationship) should not comply with the law. The ends can justify the means. Similarly, a proponent of a consequentialist, utilitarian, or teleological perspective might argue that, although clients should usually be told the truth, a social worker who believes that telling a client the truth would cause more harm than good could, on ethical grounds, not tell the client the truth.

Two other ethical perspectives have important implications for social workers, although they tend to be appreciated more for the values they endorse than for their practical relevance when social workers have to make difficult ethical decisions: communitarianism (also known as community-based theory) and the ethics of care. According to communitarianism, ethical decisions should be based primarily on what is best for the community and communal values (the common good, social goals, and cooperative virtues) as opposed to individual self-interest (Beauchamp & Childress, 2019). The ethics of care, in contrast, reflects a collection of moral perspectives more than a single moral principle (Gilligan, 1982). This view emphasizes the importance in ethics and moral decision making of the need to care for, and act on behalf of, persons with whom one has a significant relationship (Beauchamp & Childress, 2019). For social workers, this perspective emphasizes the critical importance of their commitment to their clients.

Ethicists and professionals continue to disagree about the merits and demerits of these points of view. The debate has been healthy in that it has alerted professionals to competing perspectives that need to be considered when they are faced with an ethical dilemma, especially when professional duties conflict and choices must be made. To enhance the quality of their decision making, social workers need to critically examine the strengths and limitations of various schools of thought that can be brought to bear on the diverse challenges that professional practice produces. This is analogous to the need for clinical social workers to understand the strengths and limitations of the diverse conceptual models used to understand individuals' mental health problems and design interventions to assist them.

The code also highlights the role of ethics consultation (Reamer, 2023b). In many cases, practitioners should consult with others when they are faced with challenging ethical dilemmas. Social workers well understand the importance of consultation in other practice domains—for example, when they are unsure where to head clinically in a difficult case, how to handle a complicated administrative matter, or how best to promote a legislative proposal to address a critical issue. Two (or more) heads are often better than one, and this holds for those situations in which ethical dilemmas arise.

Ethics consultation can take various forms. First, social workers should always consider examining the professional literature on ethical issues. Scholarship on social work ethics, and on applied and professional ethics generally, has burgeoned in recent years, and practitioners should do their best to keep up with it. Some of the literature addresses broader, and at

times more abstract, issues related to ethical theory and decision-making strategies. Much of it, however, concentrates more narrowly on specific ethical issues, such as the limits of confidentiality when third parties are at risk, informed consent challenges, professional boundaries, practitioner impairment, and social workers' use of technology to deliver services and communicate with clients.

Second, many agencies have developed their own ethics committees designed to help staff and clients think through the best way to handle an ethical dilemma. The concept of ethics committees (often called "institutional ethics committees" [IECs]) first emerged in 1976, when the New Jersey Supreme Court ruled that Karen Ann Quinlan's family and physicians should consult an ethics committee in deciding whether to remove her from life support systems. (However, many hospitals have had something resembling ethics committees since at least the 1920s.) The New Jersey court based its ruling on an important article by Teel (1975) that appeared in the *Baylor Law Review* in which a pediatrician advocated the use of ethics committees in cases in which health care professionals face difficult ethical choices.

Ethics committees typically include representatives from various disciplines and positions, such as nursing, medicine, social work, the clergy, and agency administration. Ethics committees in large agencies often include a professional ethicist, typically someone with formal education in moral philosophy and professional ethics (Post & Blustein, 2021). This expert may be a trained philosopher or theologian or a member of one of the professions (for example, a nurse, physician, or social worker) who has supplemental education related to ethics. Sometimes ethics committees also include an agency's attorney. This is especially controversial because an attorney's obligation is to offer advice intended to protect their client (in this case, the agency); some critics believe that all members of an ethics committee should be in a position to think freely without constraint. An alternative is to include on the committee an attorney who is not employed by the agency and who, therefore, is free to express more independent opinions based on their legal expertise.

Most ethics committees devote the bulk of their time to case consultation (C. B. Cohen, 1988; Conrad, 1989; Cranford & Doudera, 1984; Kennedy Institute of Ethics, 1993; Post & Blustein, 2021; Reamer, 1987a). The committee is available to agency staff and perhaps to clients to think through how an ethical dilemma might be handled and to offer nonbinding advice. In health care settings, in which ethics committees are particularly prominent, such case consultation might concern a patient's eligibility for organ transplantation, a patient's right to refuse treatment, and end-of-life decisions. In other settings, such as a community mental health center or family services agency, case consultation might focus on questions concerning the disclosure of confidential information against a client's wishes, staffers' use of technology to deliver services, whether certain sensitive information should be shared with a particularly fragile client, management of complex boundary and dual relationship issues, and how to handle the discovery of some fraudulent activity within the agency. Although ethics committees are not always able to provide clear-cut advice about the complicated issues that come to their attention (nor should they be expected to), they can provide a valuable forum for thoughtful and critical exploration of complex ethical issues.

Many ethics committees also serve other functions, including drafting, reviewing, and revising agency policies that pertain to ethical issues, such as confidentiality guidelines or informed consent procedures, and sponsoring staff training on ethics-related matters. Training may include traditional didactic instruction and what has become known in many health care

settings as “ethics grand rounds,” which are educational sessions offered to staff on various ethics-related topics.

Third, on occasion social workers may want to draw on the expertise of individuals who serve as ethics consultants. These formally educated ethicists can provide useful advice on a case-by-case basis as well as serve as advocates or mediators should the need arise. As with ethics committees, ethics consultants are in a position to help practitioners think through difficult ethical choices, acquaint social workers with relevant conceptual tools and practical resources, and offer nonbinding advice (Aulisio, 2001; Aulisio et al., 2003; Fletcher, 1986; Fletcher et al., 1989; La Puma & Schiedermayer, 1991; Reamer, 1995c; Skeel & Self, 1989; Taylor, 2005).

Of course, consultation can also be obtained from knowledgeable and thoughtful colleagues and supervisors who do not have formal ethics education. In some instances, social workers might find it useful to consult with members of their state licensing or regulatory board, members of their NASW chapter’s ethics committee, or the NASW Office of Ethics and Professional Review. Some NASW chapters also provide more formal ethics consultation services, such as an ethics hotline.

Finally, social workers should keep in mind that some ethical issues broach legal questions that should be brought to the attention of an attorney who specializes in litigation and licensing board matters involving social workers. For example, social workers may want to seek legal advice when they need to decide whether to disclose confidential information to a third party against a client’s wishes, comply with a subpoena that requests privileged information, terminate services to a client who has threatened to file a lawsuit against the social worker, hire a former client, or rely on a deceased client’s relative for informed consent purposes in a matter pertaining to the former client.

One key feature of this section of the code is its explicit acknowledgment that circumstances sometimes arise in social work in which the code’s values, principles, and standards conflict. The code does not provide a formula for resolving such conflicts and does not specify which values, principles, and standards are most important and ought to outweigh others when they conflict. The code states that

reasonable differences of opinion can and do exist among social workers with respect to the ways in which values, ethical principles, and ethical standards should be rank ordered when they conflict. Ethical decision making in a given situation must apply the informed judgment of the individual social worker and should also consider how the issues would be judged in a peer review process where the ethical standards of the profession would be applied. . . . Social workers’ decisions and actions should be consistent with the spirit as well as the letter of this Code. (p. 3)

**The code provides ethical standards to which the general public can hold the social work profession accountable.** One defining characteristic of a profession is its members’ willingness to provide a mechanism through which the general public can hold the profession accountable (Flexner, 1915; Greenwood, 1957). The NASW *Code of Ethics* sets forth specific ethical standards with which the public can expect social workers to comply and to which the public can hold social workers accountable. Members of the public, particularly clients, who believe that social workers have not complied with the code’s standards can file an ethics complaint with NASW. The ethics complaint will be reviewed and, if accepted, adjudicated by NASW (in some cases, NASW offers the option of mediation).

The code is particularly relevant in lawsuits and licensing board complaints involving social workers. Parties who file legal complaints against social workers (for example, former clients or family members) sometimes allege that social workers departed from prevailing ethical standards in social work. A plaintiff in a lawsuit, or a complainant in a licensing board case, may claim, for example, that a social worker was negligent in failing to obtain informed consent properly before releasing confidential information to a third party, denied a client reasonable access to a case record, failed to protect a third party from harm caused by a client, was sexually involved with a client, or was involved in a harmful business relationship with a client (a conflict of interest). In these instances, lawyers, judges, and licensing boards often draw on the NASW *Code of Ethics* to establish the standard of care in social work. The *standard of care*—a critically important legal concept in professional malpractice and negligence cases—is defined as how a reasonable and prudent professional with similar training would act under the same or similar circumstances (Austin et al., 1990; R. J. Cohen & Mariano, 1982; Madden, 2003; Meyer et al., 1988; Reamer, 2003b, 2015, 2022, 2023c; Schutz, 1982; Stein, 2004). That is, because of the code’s prominence and influence nationally—because it has been ratified by the nation’s largest social work organization—the code often serves as the measuring rod of what is ethically appropriate and inappropriate in the profession.

There are various ways in which the general public might use the code as a way to hold social workers accountable. In addition to lawyers, courts of law, and professional liability insurance providers, many agency boards of directors, government agencies, and other professional associations adopt the code or portions of it, or they use the code as a frame of reference.

**The code socializes practitioners new to the field to social work’s mission, values, ethical principles, and ethical standards.** The code provides social work educators, including both classroom faculty and field instructors, with an efficient tool that can be used to acquaint students with the profession’s mission, core values, broad ethical principles, and specific ethical standards. It is clearly the most visible and widely recognized statement of social work’s aims, values, and ethical principles and standards.

**The code articulates standards that the social work profession itself can use to assess whether social workers have engaged in unethical conduct.** The code provides NASW with specific standards to determine whether social workers have engaged in unethical conduct. The association is required to use the code as its principal source when complaints are filed against members. As mentioned before, many social work licensing and regulatory boards also use the code or portions of it to adjudicate complaints filed against practitioners who fall under their jurisdiction.

The current code highlights ethical issues that arise related to social workers’ use of technology. The code defines *technology* as any social work services that involve the use of computers, mobile or landline telephones, tablets, video technology, or other electronic or digital technologies; this includes the use of various electronic or digital platforms, such as the Internet, online social media, chat rooms, text messaging, email, and emerging digital applications.

This section of the code concludes with an explicit statement about the importance of self-care in social work practice. The code encourages social work organizations, agencies, and educational institutions to promote organizational policies, practices, and materials to support social workers’ self-care.



## Ethical Principles

The code's third section, "Ethical Principles," presents six broad ethical principles that inform social work practice, one for each of the six core values cited in the preamble. To provide a conceptual base for the profession's ethical standards, the principles are presented at a fairly high level of abstraction. The code also provides brief annotation for each of the principles. It is important to note that the core values on which the ethical principles are based are not listed in rank order: "This constellation of core values reflects what is unique to the social work profession. Core values, and the principles that flow from them, must be balanced within the context and complexity of the human experience" (p. 1).

The first value, service, and the accompanying ethical principle emphasize social workers' commitment to helping people in need. The annotation promotes the concept of altruism, encouraging social workers to "elevate service to others above self-interest" (p. 5). Of special note, social workers are urged but not required to volunteer a portion of their professional skills with no expectation of significant financial return, that is, *pro bono* service (from the Latin, *pro bono publico*, meaning "for the public good or welfare").

The NASW *Code of Ethics* Revision Committee concluded that it would be inappropriate to require social workers to volunteer a portion of their professional skills because there are pressing professional and personal demands on many practitioners and their often modest salaries. However, the committee did believe that it was important to encourage social workers to provide some *pro bono* service.

The second value, social justice, and the accompanying ethical principle reiterate key points made in the code's mission statement. The annotation emphasizes social workers' obligation to pursue social change with, as well as on behalf of, vulnerable and oppressed individuals and groups of people. That is, social workers should not always act for others; when possible, social workers should engage clients and others as partners in efforts to promote social justice and challenge social injustice.

The third value, dignity and worth of the person, and the accompanying ethical principle emphasize the need for social workers to respect people and "treat each person in a caring and respectful fashion, mindful of individual differences and cultural and ethnic diversity" (p. 5). Key elements include promoting clients' "socially responsible self-determination" and enhancing "clients' capacity and opportunity to change and to address their own needs" (pp. 5–6). Thus, although social workers are sensitive to and seek to address structural and environmental determinants of individuals' and social problems, they also understand the important role of individual responsibility. The annotation also acknowledges social workers' dual responsibility to clients and to the broader society and the need for social workers "to resolve conflicts between clients' interests and the broader society's interests in a socially responsible manner" (p. 6).

The fourth value, importance of human relationships, and the accompanying ethical principle stress what social workers have long known, that "relationships between and among people are an important vehicle for change" and that social workers need to "engage people as partners in the helping process" (p. 6). This principle is consistent with and reinforces the discussion of empowerment in the code's mission statement.

The fifth value, integrity, and the accompanying ethical principle emphasize the role of trust in the helping relationship and the need for social workers to "act honestly and responsibly and promote ethical practices on the part of the organizations with which they are affiliated" and to "take measures to care for themselves professionally and personally" (p. 6). That is,

social workers are not only responsible for their own professional ethics and integrity, they must also seek to ensure that the agencies and organizations with which they are affiliated act ethically and responsibly.

The sixth value, competence, and the accompanying ethical principle assert that social workers should achieve reasonable levels of skill before offering their services to others. This principle exhorts social workers to practice only within their areas of expertise and continually seek to enhance their professional knowledge and skills. The principle also encourages social workers to contribute to the profession's knowledge base.

## Ethical Standards

The code's last section, "Ethical Standards," is the most detailed and includes specific ethical standards to guide social workers' conduct and provide a basis for adjudication of ethics complaints filed against NASW members. The standards fall into six categories concerning social workers' ethical responsibilities (1) to clients, (2) to colleagues, (3) in practice settings, (4) as professionals, (5) to the profession, and (6) to the broader society. The introduction to this section of the code states that some of the standards are enforceable guidelines for professional conduct, and some are standards to which social workers should aspire. This is a very important distinction. Moreover, "the extent to which each standard is enforceable is a matter of professional judgment to be exercised by those responsible for reviewing alleged violations of ethical standards" (p. 7).

In general, the code's standards concern three kinds of issues (Reamer, 2003b, 2015, 2018). The first includes what can be described as mistakes social workers might make that have ethical implications. Examples include leaving confidential information displayed on one's desk or computer screen in such a way that it can be read by unauthorized people or forgetting to include important details in a client's informed consent document. The second category covers issues associated with difficult ethical decisions, for example, whether to disclose confidential information to protect a third party, employ a former client, deliver services to clients remotely using technology, communicate with former clients via Facebook, or continue providing services to an indigent client whose insurance coverage has been exhausted. The final category concerns issues pertaining to social worker misconduct, such as exploitation of clients, boundary violations, or fraudulent billing for services rendered.

## Ethical Responsibilities to Clients

The first section of the code's ethical standards is the most detailed. It addresses a wide range of issues involved in the delivery of services to individuals, families, couples, and small groups of clients. In particular, this section concerns social workers' commitment to clients, clients' right to self-determination, informed consent, professional competence, cultural competence and social diversity, conflicts of interest, privacy and confidentiality, client access to records, sexual relationships and physical contact with clients, sexual harassment, the use of derogatory language, payment for services, clients who lack decision-making capacity, interruption of services, referral for services, and termination of services.

Unlike the 1960 and 1979 codes, the current NASW *Code of Ethics* acknowledges that, although social workers' primary responsibility is to clients, circumstances can arise in which

“social workers’ responsibility to the larger society or specific legal obligations may, on limited occasions supersede, the loyalty owed clients” (Standard 1.01, p. 7). For example, this consideration would arise when a social worker is required by law to report that a client has abused a child or has threatened to harm himself or herself or others. Similarly, the code acknowledges that a client’s right to self-determination, which social workers ordinarily respect, may be limited when that client’s actions or potential actions pose a serious, foreseeable, and imminent risk to himself or herself or others.

Standards for informed consent were added to the current code to specify the elements that should be included when social workers obtain consent from clients or potential clients for the delivery of services; the use of electronic media to provide services (such as computers, mobile telephones, tablets, and video technology); third-party observation of clients who are receiving services; and release of information. These standards require the use of clear and understandable language to explain the purpose of services to be provided, risks related to the services, relevant costs, reasonable alternatives, clients’ right to refuse or withdraw consent, and the time frame covered by the consent. Social workers are also instructed to inform clients of any limits to services because of the requirements of a third-party payer, such as an insurance or managed care company. This is a critically important provision in light of the growing influence of third-party payers in recent years.

A section added to the 1996 code pertains to the subject of cultural awareness, competence, and social diversity. Over the years, social workers have enhanced their understanding of the relevance of cultural and social diversity in their work with clients. Cultural and ethnic norms, for example, may shape clients’ understanding of issues in their lives and affect their response to available social services. The code requires social workers to take reasonable steps to understand and be sensitive to clients’ cultures and social diversity with respect to race, ethnicity, national origin, color, gender, sex, sexual orientation, gender identity or expression, age, marital status, political beliefs, religion, immigration status, or mental or physical ability.

The code’s standards concerning conflicts of interest alert social workers to their obligation to avoid circumstances that might interfere with the exercise of professional discretion and impartial judgment. This includes avoiding any dual or multiple relationships with clients or former clients in which there is a risk of exploitation of or other potential harm to the client, including in-person contacts and contact via digital and other technology. Social workers are also urged to take special precautions when they provide services to two or more people who have a relationship with each other. Practitioners who anticipate having to perform in potentially conflicting roles are advised to clarify their obligations with the parties involved and take appropriate action to minimize any conflict of interest (for example, when a social worker is asked to testify in a child custody dispute or divorce proceedings involving clients). The current code includes extensive standards on privacy and confidentiality. Noteworthy details concern social workers’ obligation to disclose confidential information to protect third parties from serious harm; confidentiality guidelines for working with families, couples, or groups; disclosure of confidential information to third-party payers; discussion of confidential information in public and semipublic areas (such as hallways, waiting rooms, elevators, and restaurants); disclosure of confidential information during legal proceedings; protection of client confidentiality when responding to requests from the media; protection of the confidentiality of clients’ written and electronic records, as well as the confidentiality of information transmitted by use of computers, mobile telephones, electronic tablets, and other forms of technology; use of Internet-based

search engines to gather information about clients; posting confidential information about clients on websites or other forms of social media; use of case material in teaching or training; client access to records; and protection of the confidentiality of deceased clients. Social workers are advised to discuss confidentiality policies and guidelines as soon as possible in the social worker–client relationship and then as needed throughout the course of the relationship.

The current code also includes considerable detail on social workers' sexual relationships with clients, including in-person contact and sexual communications using technology. In addition to prohibiting sexual relationships with current clients, which was addressed in the 1979 code, the current code also generally prohibits sexual contact with former clients. This is a particularly important development because there is intense concern among social workers about practitioners' possible exploitation of former clients. The code also prohibits sexual contact with clients' relatives or other individuals with whom clients maintain a close personal relationship when there is a risk of exploitation of or potential harm to the client. Moreover, social workers are advised not to provide clinical services to individuals with whom they have had a prior sexual relationship because of the likelihood that such a relationship would make it difficult for the social worker and client to maintain appropriate professional boundaries.

In addition to its extensive detail on sexual relationships and sexual harassment, the code also comments on other physical contact between social workers and clients. The code acknowledges the possibility of appropriate physical contact (for example, physically comforting a distraught child who has been removed from their home because of parental neglect or holding the hand of a nursing home resident whose spouse has died), but social workers are cautioned not to engage in physical contact with clients, such as cradling or caressing, when there is the possibility that psychological harm to the client could result. Social workers also are admonished not to sexually harass clients.

The code includes a specific provision concerning the use of barter (accepting goods or services from clients as payment for professional service). The code stops short of banning bartering outright, recognizing that in some communities it is a widely accepted form of payment. However, social workers are advised to avoid the use of barter because of the potential for conflict of interest, exploitation, and inappropriate boundaries in their relationships with clients. For example, if a client "pays" a social worker for counseling by performing some service, such as painting the social worker's house or repairing their car, and the service is somehow unsatisfactory, attempts to resolve the problem could interfere with the therapeutic relationship and seriously undermine the social worker's effective delivery of counseling services.

The code advises social workers about proper referral of clients to other providers; practitioners are expected to refer clients to other professionals when colleagues' specialized knowledge or expertise is needed to serve clients fully, or when they believe they are not being effective or making reasonable progress with clients.

In addition to addressing interruption of in-person and technology-based services, the code advises social workers to terminate properly with clients when services are no longer required or no longer meet clients' needs or interests. The code permits social workers in fee-for-service settings to terminate services to clients who have not paid an overdue balance. However, services may be terminated in these circumstances only when the financial arrangements have been made clear to the client, the client does not pose an imminent danger to

self or others, and the clinical and other consequences of the client's nonpayment have been discussed with the client.

The code advises social workers who are leaving an employment setting to inform clients of all available options for the continuation of services and their benefits and risks. This is an important standard because it permits a social worker to discuss the advantages and disadvantages associated with a client's decision to continue receiving services from that practitioner in their new setting, to obtain services from another practitioner in the setting the social worker is leaving, or to seek services from a practitioner at some other agency. In addition, the code prohibits social workers from terminating services to pursue a social, financial, or sexual relationship with a client.

## Ethical Responsibilities to Colleagues

This section of the code addresses issues concerning social workers' relationships with professional colleagues. These issues include respect for colleagues; proper handling of shared confidential information; interdisciplinary collaboration and disputes; consultation; sexual relationships and sexual harassment; and impaired, incompetent, and unethical colleagues.

The code encourages social workers who are members of an interdisciplinary team, such as in a health care or a school setting, to draw explicitly on the perspectives, values, and experiences of the social work profession. If disagreements among team members cannot be resolved, social workers are advised to pursue other ways to address their concerns (for example, approaching agency administrators or the board of directors). Social workers are also advised not to exploit disputes between a colleague and an employer to advance their own interests or to exploit clients in a dispute with a colleague.

The current code added several standards on professional consultation. Social workers are obligated to seek colleagues' advice and counsel whenever such consultation is in the client's best interests, disclosing the least amount of information necessary to achieve the purposes of the consultation. Social workers are also expected to keep informed of colleagues' areas of expertise and competence. This section of the code also addresses dual and multiple relationships, specifically with respect to prohibiting sexual activities or contact between social work supervisors or educators and those whom they supervise, whether supervisees are students, trainees, or other colleagues over whom they exercise professional authority. In addition, the code prohibits sexual harassment of supervisees, students, trainees, or colleagues.

The code includes several ethical standards pertaining to impaired, incompetent, and unethical colleagues. Social workers who have direct knowledge of a colleague's impairment (which may be the result of personal problems, psychosocial distress, substance abuse, or mental health difficulties and interferes with practice effectiveness), incompetence, or unethical conduct are required to consult with that colleague when feasible and assist them in taking remedial action; this includes unprofessional conduct involving social workers' use of technology. If these measures do not address the problem satisfactorily, social workers are required to take action through appropriate channels established by employers, agencies, NASW, licensing and regulatory bodies, and other professional organizations. Practitioners are also expected to defend and assist colleagues who are unjustly charged with unethical conduct.

## Ethical Responsibilities in Practice Settings

This section of the code addresses ethical issues that arise in social services agencies, human services organizations, independent practice, and social work education programs. The standards pertain to social work supervision and consultation, education and training, performance evaluation, client records, billing for services, client transfer, agency administration, continuing education (CE) and staff development, commitments to employers, and labor–management disputes.

One major theme in this section of the code is that social workers who provide supervision, consultation, education, or training should do so only in their areas of knowledge and competence. Also, social workers who provide these services, whether in person or remotely using technology, are to avoid engaging in any dual or multiple relationships in which there is a risk of exploitation or potential harm. Another standard requires social workers who are educators or field instructors to ensure that clients are routinely informed when services are being provided by students.

Several standards pertain to client records. They require that records include sufficient, accurate, and timely documentation to facilitate the delivery of services and ensure continuity of services provided to clients in the future. Documentation in records should protect clients' privacy to the greatest extent possible and appropriate and should include only information that is directly relevant to the delivery of services. In addition, the code requires social workers to store records properly to ensure reasonable future access and notes that records should be maintained for the number of years required by state statutes or relevant contracts.

Social workers who bill for services are obligated to establish and maintain practices that accurately reflect the nature and extent of services provided, and they must not falsify billing records or submit fraudulent invoices.

Social workers are urged to be particularly careful when an individual who is receiving services from another agency or colleague contacts them for services. They should carefully consider the client's needs before agreeing to provide services. To minimize possible confusion and conflict, social workers should discuss with such a potential client the nature of the client's current relationship with other service providers and the implications, including possible benefits or risks, of entering into a relationship with a new provider. If a new client has been served by another agency or colleague, social workers should discuss with the client whether consultation with the previous provider is in the client's best interest.

The code includes several ethical standards pertaining directly to agency administration. The code obligates social work administrators to advocate within and outside their agencies for adequate resources to meet clients' needs and provide appropriate staff supervision; they must also promote resource allocation procedures that are open and fair. In addition, administrators must ensure that the working environment for which they are responsible is consistent with and encourages compliance with the *NASW Code of Ethics*, and they should provide or arrange for CE and staff development for all staff for whom they are responsible.

The code also includes a number of ethical standards for social work employees. Although these employees are generally expected to adhere to commitments made to their employers and employing organizations, they should not allow an employing organization's policies, procedures, regulations, or administrative orders to interfere with their ethical practice of social work. Thus, a social worker is obligated to take reasonable steps to ensure that the practices of their employing organization are consistent with the *NASW Code of Ethics*. Also, social

workers should accept employment or arrange students' field placements only in organizations with fair personnel practices. Practitioners should conserve agency funds when appropriate and must never misappropriate funds or use them for unintended purposes.

A novel feature of the code is its acknowledgment of ethical issues that social workers sometimes face as the result of labor–management disputes. Although the code does not prescribe how social workers should handle such dilemmas, it does permit them to engage in organized action, including the formation of and participation in labor unions to improve services to clients and working conditions. The code states that “reasonable differences of opinion exist among social workers concerning their primary obligation as professionals during an actual or threatened labor strike or job action” (Standard 3.10[b], p. 24).

## Ethical Responsibilities as Professionals

This section of the code focuses on issues related to social workers' professional integrity. The standards pertain to social workers' competence, obligation to avoid any behavior that discriminates against others, private conduct, honesty, personal impairment, and solicitation of clients.

In addition to emphasizing social workers' obligation to be proficient, the code exhorts practitioners to routinely review and critique the professional literature, participate in CE, and base their work on recognized knowledge, including empirical knowledge, relevant to social work practice and ethics.

Several standards address social workers' values and personal behavior. The code states that social workers should not practice, condone, facilitate, or collaborate with any form of discrimination and should not permit their private conduct to interfere with their ability to fulfill their professional responsibilities. Thus, for example, it would be unethical for a social worker with racist views to campaign for political office, publicize their social work credentials, and publicly espouse explicitly racist social policies; this would violate the code's standard on discrimination. In addition, this private conduct would likely interfere with the social worker's ability to fulfill their professional responsibilities, assuming that the racist views become well known among clients and colleagues and reflect on the social worker's professional life.

The code further obligates social workers to make clear distinctions between statements and actions engaged in as a private individual and as a social worker. For example, a social work administrator who volunteers to be a spokesperson for a candidate for political office should make it clear that they are involved in the political activities in their personal, not professional, capacity (unless the social worker's employer or board of directors has authorized them to endorse and support the candidate on the agency's behalf).

A prominent theme in the code concerns social workers' obligation to be honest in their relationships with all parties, including accurately representing their professional qualifications, credentials, education, competence, and affiliations. Social workers should not exaggerate or falsify their qualifications and credentials, and they should claim only those relevant professional credentials that they actually possess (for example, a social worker who has a doctorate in physics should not claim to have or create the impression that they have a doctoral degree relevant to clinical social work by referring to herself as “Dr.” in social work contexts). Also, social workers are obligated to take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed. For example, they should not claim to have had a prominent role in a research project to which they contributed

minimally. In addition, social workers should honestly acknowledge the work of and the contributions made by others. It would be unethical for a social worker to draw on or benefit from a colleague's work without acknowledging them.

The code also requires that social workers not engage in uninvited solicitation of potential clients who, because of their circumstances, are vulnerable to undue influence, manipulation, or coercion. Thus, social workers are not permitted to approach vulnerable people in distress (for example, victims of a natural disaster or serious accident) and actively solicit them to become clients. Moreover, social workers must not solicit testimonial endorsements (that is, for advertising or marketing purposes) from current clients or from other people who, because of their particular circumstances, are vulnerable to undue influence.

One of the most important standards in the code concerns social workers' personal impairment. Like all people, social workers sometimes encounter personal problems—this is a normal part of life. The code mandates, however, that social workers must not allow their personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties to interfere with their professional judgment and performance or jeopardize others to whom they have a professional responsibility. When social workers find that their personal difficulties interfere with their professional judgment and performance, they are obligated to seek professional help, make adjustments in their workload, terminate their practice, or take other steps necessary to protect clients and others.

## Ethical Responsibilities to the Social Work Profession

Social workers' ethical responsibilities are not limited to clients, colleagues, and the public; they also include the social work profession itself. Standards in this section of the code focus on the profession's integrity and social work evaluation and research. The principal theme concerning the profession's integrity pertains to social workers' obligation to maintain and promote high standards of practice by engaging in appropriate study and research, teaching, publication, presentations at professional conferences, consultation, service to the community and professional organizations, and legislative testimony.

In recent years, social workers have strengthened their appreciation of the role of evaluation and research. Relevant activities include needs assessments, program evaluations, clinical research and evaluations, and the use of empirical literature to guide practice. The 1996 code added a substantially new series of standards concerning evaluation and research. These standards emphasize social workers' obligation to monitor and evaluate policies, the implementation of programs, and practice interventions. In addition, the code requires social workers to critically examine and keep current with emerging knowledge relevant to social work and use evaluation and research evidence in their professional practice.

The code also requires social workers involved in evaluation and research to follow widely accepted guidelines concerning the protection of evaluation and research participants. The standards concentrate on the role of informed consent procedures in evaluation and research, the need to ensure that evaluation and research participants have access to appropriate supportive services, the confidentiality and anonymity of information obtained during the course of evaluation and research, the obligation to report results accurately, and the handling of potential or real conflicts of interest and dual relationships involving evaluation and research participants.



## Ethical Responsibilities to the Broader Society

The social work profession has always been committed to social justice. This commitment is clearly reflected in the Preamble to the NASW *Code of Ethics* and in the final section of the code's standards. The standards explicitly emphasize social workers' obligation to engage in activities that promote social justice and the general welfare of society "from local to global levels" (Standard 6.01). These activities may include facilitating public discussion of social policy issues; providing professional services in public emergencies; engaging in social and political action—such as lobbying and legislative activity—to address basic human needs; promoting conditions that encourage respect for the diversity of cultures and social diversity; and acting to prevent and eliminate domination, exploitation, and discrimination against any person, group, or class of people.

## Conclusion

Ethical standards in social work—particularly as reflected in the NASW *Code of Ethics*—have changed dramatically during the profession's history. During the late 19th and early 20th centuries, social work's ethical standards were sparse and generally vague.

Along with all other professions, and largely as a result of the emergence of the applied and professional ethics field that began in the 1970s, social work's ethical standards have matured considerably. The current NASW *Code of Ethics* reflects social workers' increased understanding of ethical issues in the profession and the need for comprehensive ethical standards.

However, ethical standards in social work cannot guarantee ethical behavior. Such standards can guide practitioners who encounter ethical challenges and establish norms by which social workers' actions can be judged. In the final analysis, however, ethical standards in general, and a code of ethics in particular, are only one part of social workers' ethical arsenal. In addition to specific ethical standards, social workers need to draw on ethical theory and decision-making guidelines; social work theory and practice principles; and relevant laws, regulations, and agency policies. Most of all, social workers need to consider ethical standards within the context of their own personal values and ethics. As the NASW *Code of Ethics* states, ethical principles and standards "must be applied by individuals of good character who discern moral questions and, in good faith, seek to make reliable ethical judgments" (p. 4).