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Attitudes of Paternalism Among Social Workers Working with Involuntary Clients who are Adolescents

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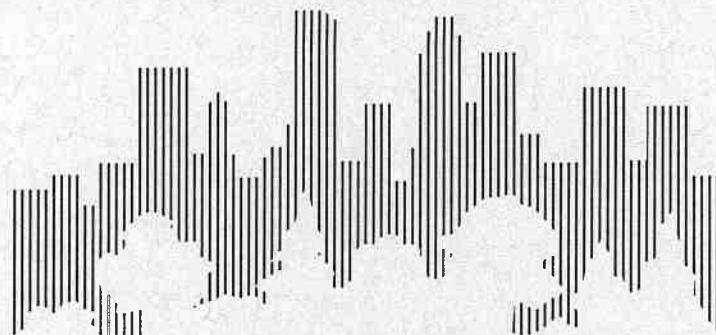
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MASTERS IN SOCIAL WORK THESIS

Karol J. Jensen-Schneider

**MSW
Thesis**

**Attitudes of Paternalism Among Social Workers
Working with Involuntary Clients who are Adolescents**

Thesis
Jensen

1998

Attitudes of paternalism among social workers working with involuntary clients who are
adolescents

Karol J. Jensen-Schneider

Submitted in partial fulfillment of
The requirement for the degree of

Master of Social Work
AUGSBURG COLLEGE
MINNEAPOLIS, MINNESOTA

1998

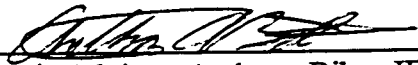
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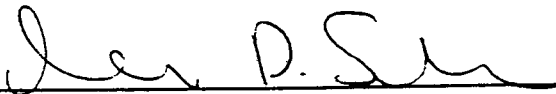
CERTIFICATE OF APPROVAL

This is to certify that the Master's Thesis of: Karol J. Jensen-Schneider has been approved by the Examining Committee for the thesis requirement for the Master of Social Work Degree.

Date of Oral Presentation: April 28, 1998

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ABSTRACT

Attitudes of paternalism among social workers working with involuntary clients who are adolescents

Karol J. Jensen-Schneider

1998

This study identified how social workers in one metropolitan county view the use of paternalism when working with involuntary adolescents. The social workers interviewed state that paternalism is becoming more and more a part of the role of social workers. The study also discusses what attributes of involuntary adolescents and factors are important to social workers in their decision to allow adolescents to make choices about their case plans. There were nine important attributes and factors identified in the data: they are best interest of the adolescent, offering choices to the adolescent and choices made by the youth, relationships with others, verbal and nonverbal communication, maturity of the adolescent, past history, consequences of choices, adolescent's goals, and court orders and system mandates.

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Chapter I: Introduction

This thesis reports the results of a study of social workers' attitudes about paternalism when working with involuntary adolescents. In this chapter, I will explain the purpose for the research, the problem being studied, its significance, the research questions, and study design.

Purpose of the Research

The purpose of this research study is to determine ways to better serve youth who are mandated to work with a social worker. The attitudes toward paternalism among social workers will be explored. Factors social workers use to determine when a youth is able to make choices about his/her case plan will be identified. How social workers view paternalism and its use with adolescents will be described.

Background of the Problem

Although adolescents are minors, they have fundamental rights of society. Yet, when the adolescents become involved in the county social service system, they are frequently denied these rights. Many social workers state that working with adolescents is difficult due to the fact that they are children and are perceived as not having the cognitive, emotional, and behavioral skills needed to make decisions for themselves.

View Point of Child Welfare Caseworker

In an interview with a child protection worker at a metropolitan county social services agency (personal communication, May 14, 1997), the worker explained some of her experiences of working with involuntary adolescents, and her struggle to maintain the adolescents' right to self-determination. The worker stated that working with involuntary

adolescents is difficult because they are children yet, in many cases, they are old enough to make decisions for themselves. The worker states that she allows the adolescents she works with to make choices when developing case plans, if the youth are cooperating with the child in need of protective services (CHIPS) petition process. The worker believes this is one of the best ways to develop a working relationship with the teen, rather than being the “enemy.” Paternalism is not discussed, the worker states, but rather is considered a necessary part of the process. “We (social workers) want clients to have choices, but if they are too young, mentally ill, or not cooperative, we have to make those choices for them.”

Significance of the Study

Research in this area of study could help social workers work with involuntary adolescents. Readers may become more aware of the issues involved in serving involuntary youth. This research will show the different interpretations of involuntary adolescents. Also, it will identify some factors the social workers find to be important in their decision to allow youth to make choices about services. The social worker can increase his/her ability to determine if the youth is capable of deciding what treatment will be beneficial and effective. By identifying the issues involved in using paternalism, social workers will become more aware of the appropriate use of self-determination and paternalism. This research will also help develop a foundation to determine the rights of involuntary adolescents and may encourage social workers to become better advocates for the rights of adolescents.

Previous studies suggest that more research needs to be done in order to learn more about the use of paternalism with teens who are involuntary clients. Rooney (1988),

Abramson (1985), and many others have begun to study ways of working with involuntary clients. They have suggested theories that they have found to be significant in their work namely, reactance and social conflict theories, as I will discuss later. The literature about working with voluntary adolescents is informative in defining theories that may work with involuntary youth. Adolescent cognitive, emotional, and behavioral development have a large impact on the individual's willingness to cooperate with his/her social worker, and the choices he/she makes. This, in turn, impacts the amount of self-determination the adolescent has, as well as the social worker's use of paternalism. Although many social workers that work with children, the elderly, and the mentally ill and disabled, use paternalism, research relating to it has only been done within the last ten years.

Research Questions

This research study explored the attitudes of paternalism among social workers to identify how they determine when to allow involuntary adolescents to make choices about their case plan; and how the social workers' attitude about paternalism affects that decision. This study will address the following questions: (a) How do social workers view the use of paternalism? And (b) What factors does a social worker look for before he/she offers involuntary adolescents the opportunity make choices about their case plans?

Summary of the Study

This study is an exploratory design using qualitative data from individual interviews. Out of the original seventeen county social workers invited to participate in the study, seven volunteered. The social services workers were asked twenty questions. Most of the questions were open ended in order to encourage the participants to share

their personal experiences. The interview questions asked how they make ethical choices about using paternalism when working with involuntary adolescents. The researcher and three independent social workers from the community then analyzed the data. The researcher and judges reviewed the data for themes, categories, and patterns. The researcher then compared these areas, and the findings were identified and described.

Conclusion

This chapter reviewed the statement of the problem, background of the issue, and purpose and significance of the research. The viewpoint of a social worker from one metropolitan county was highlighted and discussed. A summary of the study was also given. The next chapter reviews what has previously been studied about social workers' use of paternalism, and identifies areas that need further study.

Chapter II: Review of the Literature

Information available on the ethical principal of self-determination, working with involuntary clients, how paternalism is used in social work practice, and strategies for working with adolescents are reviewed in this chapter. In addition, research about adolescent development, maturity issues, and working with teens is discussed.

As of 1993, only three articles had been written about how social workers make ethical choices when working with clients, some of which covered conceptual rather than empirical data. In my review of the research, only one document cited how paternalism is being used when working with adolescents. A review of that research is given in this chapter.

Self-Determination

Self-determination is not listed in the United States of America's Bill of Rights. However, the Supreme Court has protected the principle of self-determination as a fundamental right under the Ninth and Fourteenth amendments, through a series of court cases protecting the right to privacy, due-process, and equal protection (Loewenberg & Dolgoff, 1992). Ronald Rooney (1992), one of the scholars in this area, writes "Social workers are guided in their Code of Ethics to pursue client self-determination" (p. 53).

According to Abramson (1985), the moral principle of society is to allow individuals to determine their own destinies, as well as determine the best course of action for themselves. This is the basis for the development of the ethical principle of self-determination. Social workers must be able to decide "what is right or what is good or when there is conflict between opposing moral systems or obligations" (Abramson, p.

387), while at the same time, they must encourage the client to determine what is best for him/herself. Although the principle of client self-determination is one of the most basic components of the Social Work Code of Ethics, it is also one of the most difficult to uphold (Abramson).

In order to understand the principle of self-determination, one must define how the term is being used. The concept of self-determination is defined as the personal choice or developing his/her own set of wishes, goals, and aspirations (Rooney, 1992). Positive self-determination is defined by Rooney as “having the skills, knowledge, and resources necessary” to identify and pursue one’s goals (Rooney, p. 54). Negative self-determination or autonomy is defined as the freedom to make one’s choices without the influence or coercion from another (Rooney, 1992). As cited in Abramson (1985),

Immanuel Kant defines autonomy as

governing oneself and making one’s choices in accordance with moral principles that are one’s own and that can be made universal-principles that can be willed to be universally valid for everyone. To respect autonomy... is to conceive the other person as having unconditional worth, solely because persons are ends in themselves, determining their own destiny, and are not to be treated merely as means. (p. 388)

Use of Paternalism

Involuntary status threatens self-determination and makes paternalistic interventions more likely. Paternalism is a belief that denying one’s ability to choose is in that person’s best interest or in the best interest of society (Rooney, 1992; Abramson, 1985). Hepworth and Larsen (1993) define paternalism as interactions that “rest on the

assumptions that a practitioner has the right to interfere with a client's right to choose because she/he knows better than the client what is for the client's good" (p. 73).

According to Rooney (1992) and Abramson (1985), social workers can justify the use of paternalism in their practice in different instances. However, they all identify these instances differently. Rooney (1992) identifies four reasons that paternalism can be justified: (a) the client lacks the information necessary to make an informed consent, (b) the client is unable to understand the information presented, (c) the client had agreed to what the social worker had said or done in prior instances, and (d) the social worker believes consent will be given by the client at a later time. Abramson (1985) identified the reasons for justification in the following way: paternalism could be justified if the client is a child, is mentally ill, the client's choice is "far reaching and irreversible," or if the interference is only on a temporary basis (p. 390).

Abramson (1985) identifies three types of paternalism: direct, informal, and interpersonal. Direct paternalism is when a "client is prevented from doing something she/he wants to do or is forced to do something she/he does not want to do" (Halley, 1997). Informal paternalism is when a social worker gives a client incorrect or partial information (Abramson, 1985). Interpersonal paternalism is when the social worker uses the relationship he/she has built with the client to persuade the client into accepting the social worker's assessment of what is best for the client (Abramson, 1985). Frederick Reamer (1990) also identifies three forms of paternalism: "interference with an individual's intentions or actions; deliberate withholding of information; and deliberate dissemination of misinformation" (p. 82).

Definition of Involuntary Clients

Rooney (1988) identified involuntary clients as "...clients who do not seek help from a social worker and who receive treatment due to pressure by legal authorities or fear of consequences for failure to participate" (p. 131). He later divides involuntary clients into two subdivisions: non-voluntary and mandated clients (Rooney). Non-voluntary clients are defined as a client who works with a social worker or other professional due to demands made by the clients family, friends, and/or other agencies (Rooney). Mandated clients are people who work with a social worker or other professional due to a court order (Rooney, 1992).

Theories for Working with Involuntary Clients

Little research has been done in the area of working with involuntary clients. Cinglani (1984) and Rooney (1988) have identified and highlighted two strategies for working with this population: social conflict and reactance theories. Cinglani (1984) states that mandated therapeutic relationships are not possible. She believes that social conflict theory is more suitable for working with involuntary clients. Cinglani states that due to the conflict between the client and the broader society, therapy is a political process. She believes that by using the social conflict theory, a worker can develop an equitable working relationship with involuntary clients (Cinglani).

In the social conflict theory, social workers can take on one of four different roles (Cinglani, 1984). The roles are not mutually exclusive, although some of the roles are inconsistent with one another. Cinglani states that the hope of this perspective is that the social worker would move to one of the more therapeutic roles over the course of the working relationship with the client. The four roles as defined by Cinglani are the

“enforcer,” the “negotiator,” the “advocate,” and the “coach” (p. 444-445). The enforcer is the worker who has power over the client and forces the client to comply without regard to the client’s desires. The negotiator’s role is to agree to negotiate with the client. The advocate and the coach have similar roles. The advocate develops a mutually negotiated relationship with the client. He/she then publicly assists the client, or is an advocate for the client without regard to the societal consequences. The coach also works to assist the client, but is less visible in the helping process (Cinglani).

Rooney (1988) identified the strategies of Jack W. Brehm’s reactance theory. Brehm’s theory identified five ways people would respond to the loss of freedom: (a) one would try to restore the freedoms that were lost in spite of the outcomes, (b) become hostile toward the person or agency that relinquished the freedoms, (c) search for a legal technicality to conform to the regulations while violating other societal standards, (d) try to coerce others to violate the same norms, and (e) continue to violate norms (Rooney). Social workers need to work with clients to retain some of those freedoms, while continuing to respect the self-determination of the client. According to Rooney, some of the freedoms and self-determination can be maintained by using “Reactance theory.” He states, “Reactance theory recommendations to emphasize choices, to contract to restore freedom, to maintain some current behaviors, and to focus on specific rather than global changes are consistent with social work’s commitment to respect feasible client self-determination” (p. 132). The social worker needs to be able to maintain three entailments of reactance theory in order for him/her to work successfully with involuntary clients. The worker needs to (a) identify the legal, involuntary requirements of the client; (b) identify the negotiable requirements and options available to the client; and (c) monitor his/her

own feelings and values about the client's alleged violation (Rooney).

In addition to maintaining the three entailments of reactance theory, the worker then needs to work with the client to determine the client's viewpoint about the problem. By exploring the client's point of view, the worker can determine the best strategies to use with each individual client. The worker may decide to use the "agreeable mandated strategy" (Rooney, 1988, p. 137), if the client agrees that there is a concern in a certain area but does not agree with the referring agency. The worker can reframe the issue to include the client's and the legal agency's concerns, which may help the client to participate with the mandated requirements (Rooney).

The second strategy is the "'let's make a deal' or the 'quid pro quo' strategy" (Rooney, 1988, p. 138). It allows workers the added ability to address the client on other issues, while at the same time working on the mandated issues. One negative consequence is that the client does not need to acknowledge the mandated issue as the primary problem (Rooney).

The "get rid of the mandate" strategy (Rooney, 1988, p. 139) is used when a plan cannot be worked out with the client. If the worker identifies that working with him/her, or that the mandate itself is the problem, not the client, the worker can motivate the client to strive toward resolving the issue. The worker may give the client an incentive of less frequent contact, or terminating early if the client complies with the contract (Rooney).

In the final strategy, the worker points out the "self-defeating consequences" of not cooperating with him/her (Rooney, 1988, p. 139). The worker can point out that the client is giving all control and decision making power over to the social. In using this strategy, the worker makes all choices, hoping that the client will ask to have input into

the case plan. The worker can then use a less restrictive strategy, and works with the client to make a semi voluntary contract (Rooney).

Working with Involuntary Clients

Ivanoff, Blythe, and Tripodi (1994) identify the process of working with involuntary clients. Ivanoff et al. list the following steps: engaging, assessment, interventions, developing goals, contracting, intervention implementation, termination, and follow up. Engaging, as the first step in working with involuntary clients, has practitioners discuss (a) why the social worker is involved, (b) how often the client will need to be in contact with the worker, and (c) what tasks need to be accomplished (Ivanoff et al.). Assessment is used to analyze the characteristics and magnitude of the client's issues and problems (Ivanoff et al.). Ivanoff et al. state that interventions are used to resolve financial problems, teach new skills, and help clients expand their social networks. Goal development and contracting help to engage clients in the treatment process and help identify the expectations of the case plan. Clients are experts about their own lives, and can provide insight to what are realistic goals (Ivanoff et al.). In implementing the intervention, social workers need to determine if the clients' goals are being met, and if the interventions are being effective and efficient (Ivanoff et al.). Termination and follow up are important components of the therapeutic process. At termination, the worker needs to identify what the client has accomplished. Positive affirmation helps encourage the client to continue working on issues. It also allows the client the option to contact the worker or agency if he/she needs assistance again in the future. Follow up contact between the worker and client helps identify any issues related to termination that need to be addressed.

Adolescent Development

Adolescence is defined as a change in physical, cognitive, psychological, and social development (Rubenstein, 1991; Safyer, Leahy & Colan, 1995). Adolescent changes can be broken down into three stages of adolescence development. They are early, middle, and late adolescence and may occur at different chronological ages for each individual (Rubenstein). Girls, on average, mature two years earlier than boys (Zigler & Finn Stevenson, 1993). Other factors identified by Rubenstein that affect when these changes will occur are gender, economic conditions, culture, family influence, and family composition.

In early adolescence, the adolescent begins to develop identity issues, wants to be more independent, and becomes less interested in family activities (Rubenstein, 1991; Klaczynski, 1990). Concern about peer group values and behavior, as well as testing of their values and ideas begins to occur (Rubenstein). They become concerned with body image and physical development (Rubenstein). Youth in this stage begin to need more privacy and become sexually curious (Rubenstein). They are cognitively concerned with what is currently happening, and are unlikely to think about the future (Rubenstein). The change from concrete to abstract thinking is just beginning to develop (Rubenstein; Lewis, 1987).

In middle adolescence the youth rejects family values, tests boundaries, and makes independent choices (Rubenstein, 1991; Klaczynski, 1990). Peer groups become very important in determining lifestyles, making decisions, and giving and receiving advice and support. Many youth begin to be concerned with attractiveness to the opposite sex, or same sex if gay or lesbian, and begin to have sexual relationships (Rubenstein). During

this stage, adolescents begin to plan for the future, can see the consequences for their actions, and take responsibility for those behaviors (Rubenstein; Lewis, 1987).

Adolescents are also able to think abstractly (Rubenstein). Lewis states that 15 to 17 year old youth show "...a significant increase in the length of the future into which goals extended, the degree of planning to accomplish goals, and the number of concrete steps already taken towards achieving goals" (p. 86-87).

In late adolescence, the youth listens to family member's advice (Rubenstein, 1991), identifies with family values, and begins to function more independently (Rubenstein; Klaczynski, 1990). Peer influence continues to be important for the youth, but he/she is able to evaluate opinions. The abstract thought process is completely developed and the adolescent is better able to make choices and decisions related to the future (Rubenstein; Klaczynski). Intimate relationships become as important to the adolescent as the relationship with the nuclear family (Rubenstein). Adolescent girls begin to establish their sexual identity as women. This helps them to feel comfortable, and begin new, meaningful relationships with adolescent boys, or girls if they are lesbian (Schneider, 1982).

Maturity Issues

The age of the child when he/she reaches puberty is not medically significant; yet, how it makes the youth feel about himself/herself is important (Zigler et al., 1993). Girls who mature physically earlier or later than their peers tend to have a negative self-concept. The girls who matured early felt embarrassed, isolated, and were teased by the other youth. However, these girls were more popular with other students (Zigler et al.). The girls who matured at a later age tended to be tenser in groups, exhibited attention-

seeking behaviors, and had low self-esteem. However, once the girls began to menstruate, their self-esteem improved and showed no lasting effects (Zigler et al.). On the other hand, early maturing boys tend to have a high self-esteem, while late maturing boys have negative feelings about themselves, which may continue into adulthood (Zigler et al.).

Working with Adolescents

Social workers need to be aware of several key elements when working with adolescents. Those elements are:

1. Be aware of the developmental stages of adolescents and determine the youth's ability to make choices based upon them, rather than according to his/her chronological age (Rubenstein, 1991).
2. Listen to the adolescent's views and concerns.
3. The adolescent needs to feel that his/her concerns are valid, which helps to establish a trusting relationship between that social worker and the youth. Validation may also motivate the youth (Rubenstein, 1991).
4. Explore with the adolescent the choices that are available to him/her. Choices give the adolescent ownership in their treatment plan and may help to facilitate compliance.
5. Use the ability to be able to adapt to new situations, problems, and concerns; be reasonable with the adolescent about requests, requirements, and expectations; be patient with the youth, but set appropriate limits; and be non-judgmental of the choices that the adolescent makes.
6. Promote a safe environment for the youth to develop a sense of self and explore his/her identity (Lucente, 1988).

Rights of Involuntary Adolescents

Currently, there is a lack of research on the rights of involuntary adolescents working with caseworkers on case plans and in making decisions. There also appears to be a lack of information on the use of paternalism and its control of adolescents' rights to self-determination. Although today's society may regard older adolescents as competent in making decisions, and younger children as incompetent, there is still a gray area as to when an adolescent is considered capable of making choices (Loewenberg & Dolgoff, 1992). For example, most states give adolescent girls the right to have an abortion, while others require consent of a parent, guardian, or court official before an abortion can be performed. This use of paternalism forces teen girls to discuss private information with an adult who has the right to deny the adolescent's ability to control what happens to her body and future.

Ethical Decision Making

Social work values and ethics are an intricate component of the social worker curriculum in many social work programs. Competence in applying the ethics and values is a critical factor in social work practice (Joseph & Conrad, 1989). The values of the social worker cannot be separated from the ethical decisions made by the worker (Garrett, 1994). Garrett states, "No two individuals will make decisions in the same way or reach the same conclusions, as each person's value base and range of personal experiences will be different" (p. 97). The code of ethics gives little guidance as to how to prioritize conflicting issues (Garrett). Several studies on the use of the Code of Ethics show that it is used very infrequently. This is due to the ambiguity of how to apply it or because two or more social work values are conflicting (Dolgoff et al., 1996; Joseph et al., 1989;

Proctor, Morrow-Howell, & Lott, 1993).

A study by Joseph and Conrad (1989) compared the social workers' role clarity and role satisfaction with skills in information exchange, collaboration in decision making, and preparation for ethical decision making of social workers. The findings showed a significant influence between the social workers' role clarity and experience with making ethical choices. This role suggests a clear understanding that the probability of influencing ethical decisions made by the social worker will increase. Joseph et al. also found that role satisfaction influenced the ethical choices made by social workers. Workers were found to include patients and their families in the decision making process.

Garrett (1994) did a study on school social workers to look at ethical dilemmas of working with youth. She found that school social workers have a difficult time making ethical choices due to conflicts between students, parents, and the school. This difficulty arises due to several reasons: (a) most students are minors, (b) confidentiality of student information, (c) developmental changes the student is experiencing, and (d) determining at what point the student can self-determine. Since the Code of Ethics does not have concrete answers to many ethical issues, Garrett cites a ranking system developed by Loewenberg and Dolgoff in 1992 to determine which ethical principle to apply to each situation. Garrett states, "they developed a list of seven ethical principles in priority order: (1) protection of life, (2) equality, (3) autonomy and freedom, (4) least harm, (5) quality of life, (6) privacy and confidentiality, and (7) truthfulness and full disclosure" (p. 101). Even with this ranking system, social workers still have a difficult time making choices when the client system is in conflict. For example, a social worker having to recommend placement for a youth in a group home may have to weigh the quality of life for the youth

against the quality of life for the parent(s) (Garrett).

Joseph (1982) developed a five-step model for making ethical choices. First, the social worker needs to identify and define the issue. The issue needs to have two potential choices with positive and negative consequences (Joseph). Second, the worker needs to review all of the facts of the case. This may be done by reviewing the Code of Ethics, ranking the ethical principles, reviewing legal issues, etc. (Joseph). Third, the social worker needs to contemplate his/her practice knowledge, personal and professional values, spiritual beliefs, and previous experiences, and then determine if and how these factors will influence his/her choices about the issue at hand (Joseph). Next, the social worker needs to consider all of the available options, and evaluate them to find one that has the least amount of negative consequences for the client (Joseph). Finally, the social worker needs to decide on a solution to the issue, and present it, as well as the supporting information for choosing that solution. Since the choice is a personal decision, not all parties would have made the same choice as the social worker (Joseph).

In their article, Dolgoff and Skolnik (1996) identify several findings about how social workers make ethical decisions. The study gave social workers a questionnaire that described situations that involved an ethical dilemma. The participants were asked to resolve the issue and list the factors that influenced their decisions. Each situation was followed by an open-ended question in order to gather more data as to how the participant's choice was made. The questionnaire had been pre-tested and revised. The primary finding of Dolgoff and Skolnik's study is practice wisdom is more important in making ethical choices by social workers than work with groups. The Code of Ethics was not cited as having an impact on the social workers' decisions (Dolgoff et al.). Many of

the workers in Dolgoff and Skolnik's study believed that ethical practice would lead to the desired ethical choices. Their study identified practice wisdom as the primary source social workers depend on in order to resolve an issue. Decision-making was influenced by the context and personal values of the social worker (Dolgoff et al.). For example, a social worker may choose to make different choices for two different groups of teenagers, based on age or gender. The issue most referenced in the Code of Ethics was confidentiality (Dolgoff et al.).

In an exploratory study, Halley (1997) surveyed caseworkers working with homeless youth at a youth diversionary program. The participants in the study varied in age, gender, ethnic identity, and education. The study consisted of individual interviews in which the workers were given four case scenarios. The workers were asked how they would respond to the client in each situation, and how goals would be determined. The study demonstrated that although most participants stated clients should determine their own goals, all participants gave at least one paternalistic response to the hypothetical scenarios. The study also found that the more experienced staff seemed to set more limits on the clients than did the less experienced staff members (Halley).

Wendy Kugelman (1992) did a study to look at how social workers make ethical choices. She gave twenty social workers a case scenario. "Although all of the participants perceived a social work role in advocating for Ms. M.'s right of self-determination, fully half of the participants (ten of the twenty), upon further discussion of the case, abandoned this role, not due to an ethical dilemma, but due to other features of the case..." (p. 68). The ten participants who advocated for Ms. M.'s rights cited self-determination, resistance to influence and pressure, prevention of discriminatory practices, and client's

rights as the basis of their decision making (Kugelman). The ten participants who chose not to advocate stated that the dominant reasons were due to power, organizational, and personal issues, such as fear of losing his/her job, or believing the effort would be futile.

From this, Kugelman concluded that social workers

who felt that they could rely on ethical principles to decide their actions were better able to withstand the extra-ethical elements (non-ethical) that opposed their positions, while those participants who were informed by those extra-ethical elements were less likely to maintain an ethically informed position. (p. 74)

Kugelman identified four areas of “extra-ethical” elements: organizational, clinical, personal elements, and power. The organizational elements include the structure and systems of a medical center. The clinical elements are the practice methodology such as assessment tools and intervention techniques. The worker’s values, morals, experiences, and preferences are his/her personal elements. The fourth element, power, is described as one’s ability to sway another person to follow his/her instructions or demands (Kugelman).

In a study done by Holland and Kilpatrick (1991), it was determined that ethical decision making is not usually based on ethical principles, but rather on interpersonal and intrapersonal factors (Kugelman, 1992). Kugelman stated that the implication of Holland et al. and her studies “is that in the absence of ethically informed practice, agency social workers are less able to analyze ethical dilemmas and are more vulnerable to personal preference, organizational rules and power wielded by others” (p. 74).

In her dissertation on ethical and unethical behavior of clinical social workers, Grodney (1990) randomly selected and surveyed 500 clinical social workers that were

current members of the National Association of Social Workers. Of the 500 questionnaires mailed, 411 were returned completed and 3 were returned as undeliverable. The questionnaire listed forty-two behaviors and asked, "Do you think this behavior is ethical?" (p. 61). Grodny found that male social workers were more approving of sex-related behaviors with clients, younger workers were more approving of unethical behaviors, and the number of years in social work practice is unrelated to the attitudes of social workers toward ethical or unethical behavior. She also found that social workers that had attended Master of Social Work programs that discussed ethics were more likely to choose more ethical behaviors (Grodny).

Gaps and Limitations

Research conducted with involuntary clients is relatively new to the social work profession. As cited by Rooney (1992), the first articles on involuntary clients were written in the 1980s. Since that time, Rooney and several others have expanded research on how to better serve involuntary clients. The area of adolescents has been studied in depth for decades. There are volumes of articles on working with adolescents, such as development, suicide, school performance, etc. However, little research has been conducted with involuntary adolescents. As more adolescents enter into court ordered services, either from social services or corrections, research needs to be done to determine ways to best serve this growing population.

Conclusion

To date, research is limited on how social workers make ethical decisions. Recent conceptual studies give detailed explanations of how ethical choices can be made. Empirical data shows that external influences or personal perceptions are deterrents to

social workers in making ethical choices and advocating for their clients. However, the Code of Ethics binds us to uphold this principle. The empirical data indicates that practice wisdom, experience, and social work education focused on ethics improves a social worker's ability to make ethical decisions.

In this section, the key concepts have been defined and discussed. The literature about most of these areas is quite extensive. However, very little information was found on criteria practitioners use to decide when they should override self-determination and invoke paternalism while working with involuntary adolescents. This study will begin to explore ways to fill this gap in the literature.

Chapter III: Methodology

This qualitative study is designed to assess the attitudes social workers from one metropolitan county have toward the use of paternalism when working with court ordered adolescents. The study also helped to identify the factors that influence social workers in allowing involuntary adolescents the opportunity to have input on the development of their case plans.

In the methodology section, I will outline the design of this study, identify the research questions and definitions, and explain the sample design and characteristics. The interview guide will be explained, and a draft of the interview questions is included (Appendix B.). The sampling and application steps are outlined, as well as the analysis procedures. The study strengths and limitations are explained, and the protection of participants has been examined.

Research Questions

This study will identify the criteria social workers use to determine when to allow involuntary adolescents choices about their case plans, and how social workers' attitudes about paternalism affect that decision. The following questions will be explored: a) How do social workers view the use of paternalism? and b) What factors does a social worker look for before he/she offers involuntary adolescents the opportunity to make choices about their case plans?

Definitions

Key terms for this research have been defined in the literature as follows:

Self-determination: A person choosing or developing his/her own set of wishes,

goals, and aspirations (Rooney, 1992). One is autonomous with the ability to make choices without the influence or coercion from another (Rooney).

Involuntary adolescents: Involuntary adolescents are youth who work with a social worker due to demands made by family, friends, and/or other agencies. This definition included mandated youth who are ordered by the court to work with a social worker (Rooney, 1988).

Paternalism: A belief that denying one's ability to choose is in that person's best interest or in the best interest of society (Rooney, 1992; Abramson, 1985). Paternalism is used ethically by social workers when; (a) a client lacks the information needed to make choices, (b) is unable to understand the information, (c) the client has agreed with the social worker before, or (d) the social worker believes the client will give consent at a later time (Rooney, 1992).

Subject Selection

The unit of analysis for this research consists of individual county social workers who are (a) currently working in the Child Protection (intake or ongoing) units, the Children's Mental Health unit, or the Adolescents unit and (b) are working directly with clients.

The data was gathered using a probability sample, which was obtained from a list of county social service staff in a metropolitan county in Minnesota. The staff members were listed in alphabetical order by unit. From the list of staff, all supervisors, support staff, and Developmental Disabilities and Adult social workers were excluded. This was done to include only the social workers who work directly with involuntary adolescents. Then a stratified, systematic sampling was done to establish the study sample. This was

done by selecting every third person on the unit list (N=17).

Characteristics

The social workers in this county's Child Protection, Children's Mental Health, and Adolescents units are composed of 60 staff member who are predominately white, female social workers between the ages of 20 and 60+. There are only six males and five minorities available as part of the population. The diversity of the social workers is in their level of education and years of practice. The education levels vary from Bachelor of Science without social work courses to Master of Social Work. There are no employees in any unit with doctoral level degrees. The number of years in social work practice varies from one year to more than 25 years.

Instrumentation

This is an exploratory study that uses in-person interviews with county social workers to identify attitudes of paternalism working with involuntary adolescents. The interview guide was developed by the researcher and based on the literature review to address the issues of using paternalism when working with involuntary adolescents. The interview questions were pre-tested with three Augsburg Master of Social Work students, none of whom is eligible for this study. This gave the researcher the chance to refine and clarify the interview questions, and enhanced the effectiveness of the instrument.

The questionnaire was organized into three areas addressing identification of involuntary adolescents, use of paternalism, and factors used to determine self-determination. The definitions of involuntary adolescents, self-determination, paternalism, and attitudes were explained at the beginning of each interview. The first question asked participants if they had any questions about the research or of the

researcher. The second set of questions consisted of identifying demographics. Then the questions about identifying involuntary adolescents, self-determination, use of paternalism, and factors used to determine self-determination were asked.

All of the interviews were conducted during a two-week period of time on a date and time that was convenient for the participant. The interviews were one hour apart as to allow for a fifteen-minute break, and structured to ensure the anonymity of the participants.

Measurement error

Systematic Error may occur in the study due to the social desirability and the negative value paternalism has within the social work profession. The researcher hoped to reduce the probability of systematic error by interviewing the participants individually. Participants who wanted to discuss the project were asked to refrain from discussing their interviews with other co-workers until all of the interviews had been completed. This guideline also helped keep the participants anonymous.

Validity

The researcher controlled the validity of the study by having the interview questions and data collection reviewed by other professionals. The questionnaire was pre-tested on three Master of Social Work students to establish that the interview questions had face validity. When the data was collected, three community social workers reviewed it to look for themes in the data. This helped to control researcher bias.

Levels of Measurement

In this study, two types of measurement were used. The demographic data collected about the participants, such as years of social work experience and level of

education, were evaluated on an ordinal level of measurement. The age of the participant is interval and the gender of the person is nominal. The responses to the open ended questions were indexed according to the interview question and then were evaluated for themes, patterns, and categories that emerged from the data.

Procedures

Sample members were sent an invitation to participate, a consent letter, and a copy of the interview questions. The invitation identified the researcher as an Augsburg Master of Social Work student and that the research was a requirement of the program. The invitation asked participants to call the researcher to set up an interview time. One week after the letters were sent, the researcher contacted those members of the sample that had not been in contact by phone to inquire if they were interested in participating in the study. Those willing to participate in the study were given an interview appointment for the following week. Two participants were unable to attend the scheduled interview time and were rescheduled for the following Wednesday. All interviews lasted approximately twenty-five minutes. At the time of the interview, the consent form was signed giving permission to participate in the study and have the interview audio taped. The participant received a copy of the consent form.

The interviews consisted of 20 open-ended and closed-ended questions. The participants took approximately twenty-five minutes to complete the interview at a county government center in one of the social service conference rooms. The county employees were allowed to complete the in-person interviews during regular work hours.

Organizing Information

Once participants gave consent to participate in the study, case numbers were

assigned. Descriptive statistics were used to analyze the demographic data. Content analysis had been conducted on the open-ended questions. The findings were presented in a narrative form and illustrative tables were presented in the following chapter.

To conduct the content analysis, the questions were indexed. The responses under each question were then divided by themes, patterns, and categories identified in the data. The participants could give more than one answer to a question due to the structure of the questionnaire. This information was subdivided and classified individually.

Judges

Three independent judges were chosen for several reasons to assist with the content analysis. None of the judges worked for a county social services agency, but had interacted with county social service workers in their place of employment. The judges had varying level of education and experience, as well as the social workers interviewed. The independent judges looked for themes, categories, and patterns. Each judge was given information from three interviews: all three judges were given information on interview “5” and also two different interviews. The judges were asked to identify all themes, patterns, and categories they found in the data and then list and define each one. The definition allowed the researcher to understand how the judge was using the category. The judge was also asked to identify any text that was significant in defining or highlighting the category. The themes, patterns, and categories listed by the judges were then compared to those identified by the researcher.

Data analysis

The judges and the researcher were each given copies of the interviews, highlighters, post it flags, a letter explaining the evaluation process, copies of the

recording form (Appendix C), and an example of a completed form. On a recording form, the judges were asked to define the theme, assign a highlighter or colored flag, identify the questions and the number of times the theme was noted, and write down specific examples that best described the theme. Once completed, the interviews were returned to the researcher. The researcher then compiled the themes and definitions. All three of the judges reviewed one of the responses to look for inter-rater reliability.

Strengths and limitations

This study uses a convenient sample, but the participants were selected in a stratified, systematic way, which gave all the county social workers in this county an equal probability of being chosen for the sample. All participants were instructed to refrain from discussing the study to diminish the probability of systematic error. The study of social workers' attitudes toward using paternalism was an important issue. Social workers were encouraged to evaluate how they use paternalism in their practice. Another strength of this study was having three independent judges who analyzed the information and helped control for any researcher bias. The interview questions were developed based on information from conceptual and empirical studies.

As in all studies, this study has limitations. One important threat to validity is the homogeneity of the sample, due to the fact that all participants are county social service employees, and most are Caucasian women. Another potential limitation is the narrow time frame in which the study was conducted. With a larger amount of time in which to collect data, a larger number of people could have participated in the study. Since the study is based on what the participants say, rather than what they actually do, validity was diminished. Another limitation would be that the adolescents themselves were not

interviewed about their own experiences in working with social workers. Finally, the accuracy of the responses may be affected by the setting in which the interviews were completed. People may be intimidated by the fact that they were in their place of employment and were not able to give honest answers to the questions asked.

Protection of Subjects

The Institutional Review Board approved the study prior to any research that was conducted. A letter of consent was obtained from the director of the county social services division to conduct this research.

Participants

An invitation introducing the researcher as an Augsburg Master of Social Work student, a consent letter, and a copy of the semi-structured interview questionnaire was sent to all members of the sample frame. The consent form explained the purpose of the research study and the procedures involved in the study process. The consent form included a separate line for additional consent to audiotape the interviews, which allowed for the accurate reporting of the participant's responses. The participant's consent was obtained prior to the interview that occurred. The participants received a copy of the consent form for their files.

Data

All raw data and audiotapes are kept in a locked file in the researchers home when not being reviewed. All of the interviews that were audiotaped will be numbered for anonymity and transcribed by a professional transcriptionist. All of the information and audiotapes will be destroyed upon completion of this research project.

If any participant experienced emotional or psychological discomfort due to the

interview questions, he/she could contact Medica Optimum services. The service is a benefit for county employees, which provides telephone counseling for them, and can refer members to counseling professionals in the area for follow up sessions if needed.

Conclusion

This is a qualitative study that has some face and content validity strengthened by the use of social work professionals as independent judges of the researcher's findings. The common themes, patterns, and categories are identified and reported in Chapter 4. The study is limited due to the exploratory nature of it but has relevance in working with involuntary adolescents, as discussed in the final chapter.

Chapter IV: Findings

Seventeen social workers were invited to participate in the study. Seven social workers responded by agreeing to participate in the study. Three of the subjects chose not to participate in the study due to scheduling conflicts. The other seven social workers did not respond to the invitation to participate. The average interview was twenty-one minutes long. The longest interview was thirty-nine minutes in length. The shortest interview was seventeen minutes.

Demographics

The demographics of the participants will be illustrated in the following sections. All of the subjects who participated in the study were female. Only six males were in the sampling frame and due to the stratified, random sampling, none of the males were selected for the study. The ethnicity of the subjects was not collected.

The subjects ranged in age from twenty-five to more than forty-five. The following table shows that four of the seven subjects were between the ages of twenty-five and thirty-four.

Table 1

Age of Subjects:

Age	Number
25-29	2
30-34	2
35-39	0
40-44	1
45+	2
Total	7

The subjects reported the number of years that they have been working in social services. This experience included work at a county social services department, county corrections, or any other area of social service work. As shown in Table 2, four of the subjects had less than ten years experience working in social services. Two participants reported having fifteen to nineteen years experience.

Table 2

Years of Working in
Social Services:

<u>Years</u>	<u>Number</u>
0-4	2
5-9	2
10-14	1
15-19	2
Total	7

As indicated in Table 3, three of the seven participants in the study held a Master of Social Work degree. One participant held a Bachelor of Social Work degree, and the other three participants held a Master of Science or Arts degree.

Table 3

Educational Background of Participants:

Highest level of education	Number
BSW	1
MSW	3
MA/MS	3
Total	7

Social Worker's Use of Paternalism

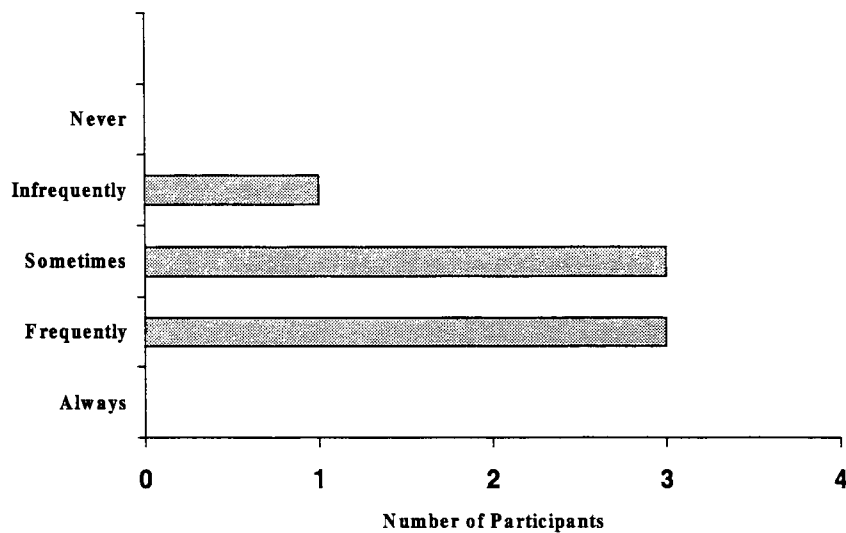
The following section will review the questions related to determining how social workers in this particular county social services department view the use of paternalism when working with involuntary adolescents. The participants first defined self-determination and their views on how often they allow their adolescent clients to make choices. Second, the participants defined paternalism, identified how often they used paternalism in their practice, and what connotation the word paternalism had in their opinion. Finally, I asked the participants how paternalism is used in their practice and also, in their view, how it is used in the metropolitan county.

In order to determine how social workers view paternalism, I first had the participants in the study define, in their own words, self-determination. Six of the seven participants stated that self-determination is allowing the client to make his/her own choices about services, case planning, or goals. In addition, two of the social workers identified that the client and the worker working together to determine what is the best choice for the client, is also important. The participants were then asked to answer the following question on a Likert Scale in which the five possible responses included: Always, Frequently, Sometimes, Infrequently, and Never. The question asked, "How

often do you allow adolescents to self-determine?" Three of the participants stated that they allow self-determination sometimes, another three stated frequently, and one stated infrequently. This participant stated that she felt it was difficult to allow self-determination in her current position as an intake worker.

Table 4

Allowing Self-Determination:



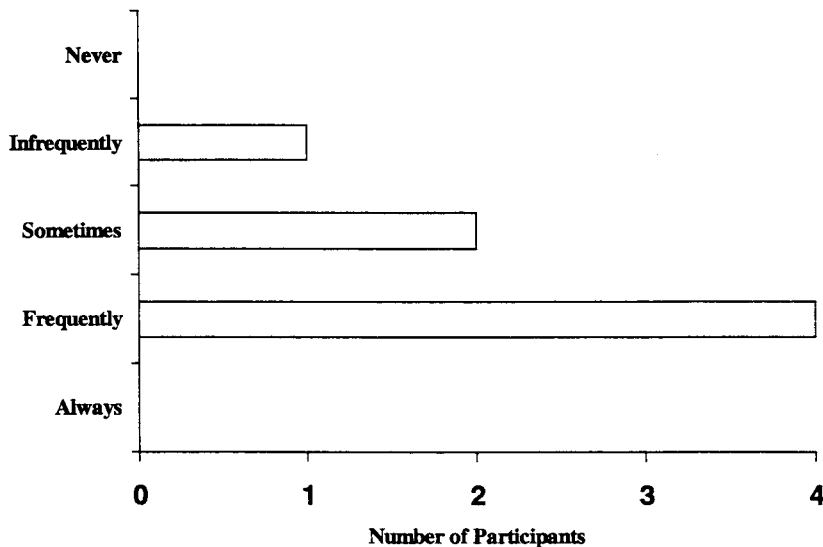
I asked the participants to define paternalism. One participant stated that she did not have a personal or a professional definition of paternalism. Four of the remaining six participants stated that paternalism is the social worker "making choices for clients in the best interest of their needs and society's needs." Some specific examples include "(the) government or big brother watching out for the best interest of other people," the social workers acts "as parents try to figure out what is best for the child," and "when other people control case decisions." The last two subjects stated that paternalism was "not giving (clients) any choices." The two definitions given by the participants are similar to

the definitions given by Rooney (1992) and Hepworth and Larsen (1993).

A second Likert scale asked, “How often do you use paternalism in your practice with involuntary clients?” One participant stated that she used paternalism infrequently in her practice. She attributed that response to her many years of experience working with adolescents. This participant stated “We set goals. I try to empower them.” Two participants stated that they used paternalism sometimes. The other four participants stated that they used paternalism frequently with clients.

Table 5

Use of Paternalism:



The Likert scales asking about the use of paternalism and self-determination are not mutually exclusive. Therefore, there is overlap in the answers the participants gave to the questions. For example, two participants stated that they would allow adolescents to self-determine frequently, but when asked how often they use paternalism with adolescents, the same two participants stated that they use paternalism frequently. The

following table illustrates this conflict.

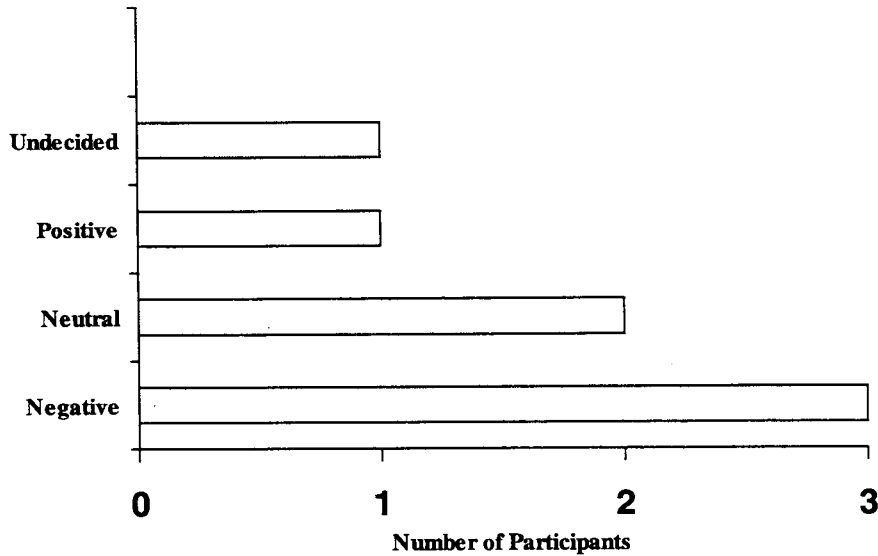
Table 6

Comparison of Allowing Self-Determination and Use of Paternalism:

Participant	Allow Self Determination	Use Paternalism	Connotation of Paternalism
1	Sometimes	Frequently	Neutral
2	Sometimes	Sometimes	Negative
3	Sometimes	Sometimes	Negative
4	Infrequently	Frequently	Negative
5	Frequently	Frequently	Undecided
6	Frequently	Frequently	Positive
7	Frequently	Infrequently	Neutral

A Likert Scale was also used for the question, "In your opinion, does the word paternalism have a positive, negative, or neutral connotation?" One of the participants stated that she felt it has a positive connotation, five participants stated that paternalism has a negative connotation, and the last participant did not have an opinion. However, two of the five participants who stated paternalism had a negative connotation explained that their initial negative reaction changed to a neutral connotation after some thought.

Table 7

Connotation of Paternalism:

When asked how they use paternalism in their practice, the social workers stated that there are several ways paternalism can be used. The areas the participants identified were: keeping the adolescent safe from poor choices or dangerous situations, working with the adolescent to set goals, working with the youth to develop problem solving skills, and identifying what the youth needs to do, such as attend school, therapy, or go into treatment. Abramson (1985) stated that paternalism was justifiable if the client was a child, which would support the participants' choice to use paternalism in the situations listed above. Most of the participants stated that they feel they use paternalism appropriately.

The participants were also asked how paternalism is used in their place of employment. Six of the seven participants stated that paternalism is used appropriately by the staff. Some participants stated that using paternalism is part of their job and/or the

nature of county social services. One subject stated, "...it's becoming an increased role of the social worker to do." Another said, "...I think that kids are getting harder and harder to work with... (they) are going to need someone to make some decisions for them."

However, one participant stated that paternalism is used excessively and feels that "...(it) does a lot of damage."

Themes, Patterns, and Categories

Three independent judges helped to identify factors in the data that influenced the social workers decisions to use paternalism in their practice with adolescents. None of the judges worked for county social services. Each judge was given data from three of the interviews. The judges were asked to identify all factors they found in the data, list, and define each one. The definition helped the researcher to understand the judge's usage of the term. The judge identified text that helped to define or illustrate the category. The categories outlined by the judges were compared to each other and those identified by the researcher.

Eighteen different factors were identified in the data that influence decisions on the use of paternalism with youth. There were no areas identified by all three judges. Two judges and the researcher identified four areas and four areas were identified by one of the judges and the researcher. The four areas identified by two judges and myself were (a) best interest, (b) choices, (c) communication, and (d) relationships. The four areas identified by one judge and myself were (a) maturity, (b) past history, (c) consequences, and (d) goals. There was one area, court order or system mandates, that two judges identified but the researcher did not identify. In addition, there were six areas that were identified by one of the judges that I did not identify and there were three areas that I

identified that were not identified by the independent judges. These areas were placements, case plans, motivation, cooperation/compliance, intervention, power/control, behaviors/attitudes, insight, and intelligence. Table 8 provides a visual breakdown of those areas.

Table 8

Themes, Categories, and Patterns Identified:

	Best Interest	Choices	Communication	Relationships
Judge 1	Yes	Yes		
Judge 2			Yes	Yes
Judge 3	Yes	Yes	Yes	Yes
Researcher	Yes	Yes	Yes	Yes

	Maturity	Past History	Consequences	Goals
Judge 1				
Judge 2	Yes	Yes		
Judge 3			Yes	Yes
Researcher	Yes	Yes	Yes	Yes

	Court Order / System Mandates	Placements	Case Plans
Judge 1	Yes	Yes	Yes
Judge 2	Yes		
Judge 3			
Researcher			

	Motivation	Cooperation/ Compliance	Intervention	Control/ Power
Judge 1				
Judge 2				
Judge 3	Yes	Yes	Yes	Yes
Researcher				

	Behaviors / Attitudes	Insight	Intelligence
Judge 1			
Judge 2			
Judge 3			
Researcher	Yes	Yes	Yes

The most significant factors related to paternalism identified by the social workers in this study were (1) best interest, (2) choices, (3) communication, and (4) relationships. Five other significant factors of the client or their situation identified were (5) maturity, (6) past history, (7) consequences, (8) goals and (9) court order/system mandates. These areas are defined and discussed in this section.

1. Best interest of the client is defined as choices or decisions made to ensure the client's well being. The social worker needs to "make choices for the best interest of (the client's) needs."

2. One judge defined choices as the options that are available to the client. Social workers need to give the adolescent choices that are age appropriate (Rubenstein, 1991). One example identified was "Well, I think it's up to each individual to make up their choices as far as what they're going to do with their life. And they always have choices. You know you have the choice to follow the rules or not follow the rules."

3. Communication is an important component of the social worker/client relationship. The social worker needs to listen to the adolescent's verbal and nonverbal cues and give the adolescent an opportunity to express his/her wants and needs. "Anytime a child feels they have contributed...and are making choices...to have the ability to have a dialogue going on so that they're always going to be heard and recognized and their opinion counted..."

4. If the adolescent has a positive relationship with the social worker or another adult (Rubenstein, 1991), then the youth is going to want to have input in case planning. "I mean if they're cooperative with me and social services, they're going to be allowed to make a lot more of their decisions on their own rather than have me step in and tell them

what they are going to do.”

5. The maturity level of a client is a determining factor in what capacity the client has in making choices in his/her case plans (Zigler et al. 1993). Although the subjects were split on whether developmental or chronological age has greater impact on using paternalism with clients, maturity was identified as a key element in the decision making process.

Some examples were “...some kids are very mature at a younger age just in life experience,” and “He is old beyond his years. ...He’s been given almost free reign on everything...he is so responsible. He does what he needs to do.”

6. Knowing the client’s history can help the worker make better decisions about the case plan, and also determine the amount of choices the client can make. The participants stated that knowing the client for a while allows the worker to look for consistency in the decisions the client makes. The worker observes if the youth is making positive choices, which helps the worker to get to know the youth more. One participant stated, “(you) hope if their decisions in the past were good, then their decisions in the future will be just as good, if not better.”

7. The consequences in the youth’s lives are the result of the choices or decisions that they have made. Several of the participants talked about sitting down with the youth and giving him/her all of the options available, as well as the consequences of choosing an option that is destructive or puts him/her in an unsafe situation. “...With kids that aren’t making wise choices or kids that are putting themselves in dangerous situations then I’m making their choices for them, and I’m very clear about it and very clear with the reasons why I’m needing to do that.”

8. Four social workers talked with the youth on their caseloads about both long term and

short-term goals. Goals were defined as what the client and/or social worker wants to happen. “We talk about both long-term and short-term goals. A lot of times adolescents do need help with long-term goals. They don’t have very realistic expectations about it or they just have no idea of what their long-term goals are. So I try and explore that with them and kind of try talking about their immediate choices and options and how that can impact those goals.”

9. Involuntary clients may be limited in their choices concerning their case plans because of what the system mandates or the availability of services within the system (Cinglani, 1984). Some examples include “I do have legal mandates that I have to go by, such as family reunification,” and “...sometimes it takes an outward force, whether it’s a court order or a decision by someone else...”

The nine areas that were identified by one of the judges or the researcher were placements, case plans, motivation, cooperation/compliance, intervention, power/control, behaviors/attitudes, insight, and intelligence. These factors have been defined and listed below. Those factors were

1. Placing the client outside of the home or into other services such as chemical dependency treatment or counseling. One participant stated, “If you’re an involuntary client and you need drug treatment, you may be placed inpatient...”
2. The case plan is made by the worker and the client based on the court orders, clients needs, and availability of services. One participant stated that she likes to give the adolescent choices within the court order. She stated that, “(I) treat them with respect. Give information (to the client) and tell them what is reported to the court.”
3. Motivation was defined as why a client or social worker makes a certain decision. One

example was, “There are all kinds of things that I could try to help motivate them as far as these are their choices.”

4. The cooperation/compliance of the client was defined as “the client’s willingness to work with the social worker and/or willingness to do what the social worker wants him/her to do.” One judge identified this example, “I mean if they’re cooperative with me and social services they’re going to be allowed to make a lot more of their decisions on their own rather than have me step in and tell them what they’re going to do.” This statement also explained the next factor, intervention.

5. An intervention is the action the social worker or someone else takes to affect the client’s situation.

6. Power/control is the client or social worker’s ability to make something happen. This example shows the social worker’s power over the client. “...Social workers take on the role of the authority figure with clients and have (the clients) do what they think is right...”

7. The behaviors are the reactions of the adolescent to a specific event. The attitude of the adolescent is his/her state of mind at a particular time. The adolescent has “a realistic understanding about how their behavior affects what happens to them in the future.”

8. Insight is the ability of the adolescent to see how his/her behavior, attitude, and choices impact different situations, such as relationships with others, future goals, choices, and freedoms. One participant stated that if the adolescent “is able to explain why he is doing what he’s doing, I may give him a little bit because he seems to be insightful.”

9. Intelligence is the adolescent’s “cognitive abilities, the ability to see cause and effect.”

Inter-rater reliability

In order to control for the reliability of the judges, the judges were each given a copy of interview “5.” The information identified by the judges as important was compared. The judges identified several areas that were the same although they may have been defined differently. For example, all three judges identified these quotes “...they lose more choices as they stop complying. They comply, they get more choices,” and “choices are limited because of court order or what’s in their best interest.” There were several areas that two of the judges highlighted. Judge one and two identified this quote as important: “...make up their choices as far as what they’re going to do with their life. And they always have choices.” Judges two and three highlighted “(I) try to figure out what is best for the child.”

Conclusion

Seven social workers from one metropolitan county social services department participated in the interviews. The findings indicated that social workers allow their clients to make choices and decisions, but paternalism has an important role in county social services. According to the data, paternalism is being used frequently and is perceived as the role of the county worker. The data suggests there are many factors that influence decisions on the use of paternalism with youth and that influence the social worker’s decision to allow adolescents the opportunity make choices about their case plans.

It was also implied that social workers could promote some self-determination with teens even while taking paternalistic action.

Chapter V: Discussion

This chapter will provide an overview of the results, discuss the limitations of the study, and make recommendations for future research. Also, the implications of this study for social work practice and policy will be discussed.

Overview of Study Findings

This research study on attitudes of paternalism among social workers has identified how the social workers in this study decide what choices the youth can make about their case plans, and how the social workers' attitude toward paternalism impacts that decision. This study has addressed the following two questions: a) How do social workers view the use of paternalism? and b) What attributes does a social worker look for before he/she offers involuntary adolescents the opportunity to make choices about their case plans?

The social workers in this study indicated that although self-determination is encouraged, paternalism is an intricate part of county social work practice. The subjects state that paternalism has become part of their jobs, the "role of the social worker," and the "nature of social services." One participant stated that this is due to the fact that "...kids are getting harder and harder to work with...more and more kids are going to need someone to make some decisions for them."

The data revealed nine significant factors that impact the social worker's decisions to allow adolescents to make choices about their case plans. They were a) considering what is in the best interest of the youth, b) giving the youth choices within the system mandates, c) the youth's verbal and nonverbal communication, d) positive relationships

with others, e) the maturity level of the youth, f) consequences of the choices the youth makes, g) knowledge of the youth's history and working with the youth over a period of time impacts the working relationship, h) working to develop client goals, and j) following court order and/or system mandates may limit choices.

Strengths and Limitations of the Study

This research study integrated literature about self-determination, paternalism, working with involuntary clients, and services for adolescents into the methodology and findings. Augsburg Master of Social Work students reviewed the research questions for face validity. Researcher bias was controlled by having three social work professionals review the data. Seven county social workers were given the opportunity to share their views of paternalism and its use in their county's social services department. Several important factors were identified and can be used as the basis for further research. Through this research, social workers will be able to reflect on the use of paternalism in their practice and identify more factors to be considered when working with involuntary adolescents.

The purpose of the research did not include connecting the gender, ethnicity, age, years of experience, or level of education of the social worker to the factors they identified, or their use of paternalism. One threat to external validity was the homogenousness of the sample. All of the participants were social services employees from one metropolitan county and most were Caucasian women. Another potential limitation is the narrow time frame in which the study was conducted. With more time to be able to collect data, a larger number of people could have participated in the study. Finally, the accuracy of the responses may have been affected by the setting in which the

interviews were conducted. People may have been intimidated in their place of employment and unable to give honest responses to the questions.

Recommendations for Further Research

Several areas of investigation can be recommended. A comprehensive study of paternalism could be conducted with county social workers across the state and/or nation to identify differences between workers from rural and urban areas or regions of the country. A study based on case vignettes given to county social workers could show the level of paternalism they use in different situations. A study of adolescents and their parents' perceptions of how paternalism is used by county social workers could increase the knowledge base. This research may assist the accuracy of the social workers' perception concerning their own behavior. Future study on paternalism may result in determining whether using paternalism improves the well being of the youth or increases empowerment. It may also enhance the social worker's knowledge of the potential to overuse paternalism.

Implications of the Study

Practice

The research demonstrated ways that social workers can better serve youth that are court ordered to cooperate with them such as identify all of the choices available to the youth, listen to the adolescent's goals, and foster the development of positive relationships. Social workers recognize the importance of allowing youth to make choices (self-determination), yet more than half of the participants in this study use paternalism in their practice frequently. The research also identified nine important factors social workers in this study use to allow youth to determine their services. Based on the

information presented in this study, social workers can enhance their ability to determine whether the youth is able to decide what treatment will be beneficial and effective. This determination can be achieved by looking at the youth's maturity level, ability to communicate, and understanding of the consequences of his/her actions.

Policy

This study may impact social work policy for working with involuntary adolescents. Social workers need to follow state mandates and court orders. However, policies giving adolescents choices within the confines of the court order need to be revised. Policies can be written to require the social worker to identify all of the choices available to the adolescent and the consequences of not following through. This requirement would need to be done based on the developmental age and previous behavior of the adolescent. Social policies must also support the court orders of child and family services so that there are legitimate choices to fit the youth's needs. Policies should encourage staff training, consultation, supervision, and ethical review of case plans.

Conclusions

Although many social workers believe a client's right to self-determination is an important principle, many social workers from one metropolitan county believe paternalism is becoming a major part of their role. The participants stated that paternalism can be useful sometimes, and in some cases, is necessary when working with involuntary adolescents. More than half of the social workers stated that paternalism had a negative connotation, while the same number use paternalism in their practice "frequently."

The study identified several factors, which influence the social workers that

worked with involuntary adolescents. The factors help social workers determine what choices will be made available to youth on their caseloads. The four most important factors identified were (a) the best interest of the youth; (b) the choices available to and the choices made by the adolescent; (c) verbal and non-verbal communication between the adolescent and other key informants, such as social workers, parents, teachers, and therapists; and (d) relationships the youth has with the social worker that have an impact on the choices provided by the social worker.

The literature revealed the importance of educating social workers about making ethical decisions. This is critical for the clients they serve. Training social workers to work with involuntary clients plays an important role in how well the client is served. The literature identified several key factors. Details of the two studies include

Education about making ethical decisions is demonstrated by the lack of a systematic use of the Social Work Code of Ethics (Kugelman, 1992). "Social work practitioners academically prepared for ethical decision-making take a more active role in ethical matters within their agencies than those unprepared for the task" (Joseph et al., 1989). Kugelman (1992) states that it is the responsibility of agencies and colleges to provide the information and the support to help social workers learn and use the ethical principles.

As discussed earlier, there are theories that have been used to work with involuntary clients. However, little information is available on training social workers to work with involuntary clients. According to Bibus (1992), caseworkers need to be patient, flexible, non-judgmental, responsive, and go out of their way to assist the client. With these attitudes, a caseworker needs to work with the client, from the initial contact, to

identify areas in which the client can make decisions about his/her case plan. The caseworker needs to identify areas that cannot be negotiated, while finding other areas that can. The client needs to trust that his/her identified issues and concerns are important and need to be part of the overall case plan. If the client is presented with a single option, he/she may have a negative reaction to the lack of options (Bibus et al., 1995). If the client is presented with arguments on all sides of an issue, he/she will be able to have some ability to self-determine what option is more applicable to achieving his/her goals (Bibus, 1992), and be more motivated to achieve those goals.

Closing Reflections

During this process, I have learned that although monumental in inception, the thesis process is a collection of tasks. Once outlined and identified, the tasks become part of an achievable goal. The Ethical Principle of Competence is enhanced by the research done by those in the social work profession. I once thought research is something that other social workers do, but I now realize that research is an exciting challenge and learning experience that I hope to again experience. The NASW Code of Ethics (1996) states, "Social workers continually strive to increase their professional knowledge and skills and to apply them in practice. Social workers should aspire to contribute to the knowledge base of the profession" (p. 6).

References

- Abramson, M. (1985). The autonomy-paternalism dilemma in social work practice. Social Casework: The Journal of Contemporary Social Work, 66, 387-393.
- Bibus III, A. A. (1992). The influences of supervision on social workers' practice with involuntary clients: An exploratory study of a child welfare training project. Unpublished dissertation, University of Minnesota.
- Bibus III, A. A., & Rooney, R. H. (1995). Training child welfare practitioners in work with involuntary clients. Journal of Continuing Social Work Education, 6, 13-22.
- Cinglani, J. (1984). Social conflict perspective on work with involuntary clients. Social Work, 29, 442-446.
- Cox, A. J. (1980). Social conflict theory and community organization practice. Journal of Humanics, 8, 26-40.
- Davis, M. (1992). Code of ethics, professions, and conflict of interest: A case study of an emerging profession, clinical engineering. Professional Ethics, 1, 179-195.
- Dolgoff, R., & Skolnik, L. (1996). Ethical decision making in social work groups: An empirical study. Social Work with Groups, 17, 49-65.
- Garrett, K. J. (1994). Caught in a bind: Ethical decision making in schools. Social Work in Education, 16, 97-105.
- Grodney, D. (1990). Ethical and unethical practices in clinical social work: A survey of practitioners' attitudes. Ann Arbor, MI: U. M. I. Dissertation Services.
- Halley, M. F. (1997). Self-determination at a homeless youth servicing agency. Unpublished manuscript, Augsburg College, MN.
- Ivanoff, A., Blythe, B. J., & Tripodi, T. (1994). Involuntary clients in social work

practice: A research-based approach. Hawthorne: NY: Aldine De Gruyter.

Holland, T. & Kilpatrick, A. (1991). Ethical issues in social work: Towards a grounded theory of professional ethics. Social Work, 36, 138-144.

Joseph, M. V., & Conrad, A. P. (1989). Social work influence on interdisciplinary ethical decision making in health care settings. Health and Social Work, 14, 22-30.

Kassel, S. D., & Kane, R. A. (1980). Self-determination dissected. Clinical Social Work Journal, 8, 161-178.

Klaczynski, P. A. (1990). Cultural-developmental tasks and adolescent development: Theoretical to methodological considerations. Adolescence, 25, 811-823.

Kugelman, W. (1992). Social work ethics in the practice area: A qualitative study. Social Work in Health Care, 17, 59-80.

Lewis, C. (1987). Minor's competence to consent to abortion. American Psychologist, 42, 84-88.

Loewenberg, F. M., & Dolgoff, R. (1992). Ethical decisions for social work practice (4 ed., Rev.). Itasca, IL: F. E. Peacock Publishers, Inc.

Lucente, R. L. (1988). Adolescent dual unity: Identification and differentiation in development and in treatment. Child & Adolescent Social Work Journal, 5, 158-170.

Manning, S. S. (1997). The social worker as moral citizen: Ethics in action. Social Work, 42, 223-230.

National Association of Social Workers. (1996). National Association of Social Workers Code of Ethics. Washington, DC.

Proctor E. K., Morrow-Howell, N., & Lott, C. L. (1993). Classification and correlates of ethical dilemmas in hospital social work. Social Work, 38, 166-177.

Reamer, F. G. (1990). Ethical dilemmas in social service (2 ed., Rev.). New York, NY: Columbia University Press.

Rooney, R. H. (1988). Socialization strategies for involuntary clients. Social Casework: The Journal of Contemporary Social Work, 69, 131-140.

Rooney, R. H. (1992). Strategies for working with involuntary clients. New York, NY: Columbia University Press.

Rubenstein, E. (1991). An overview of adolescent development, behavior, and clinical intervention. Families in Society: The Journal of Contemporary Human Services, 72, 220-225.

Safyer, A. W., Leahy, B. H., & Colan, N. B. (1995). The impact of work on adolescent development. Families in Society: The Journal of Contemporary Human Services, 76, 38-45.

Saltzman Chafetz, J. (1981). Family conflict: The application of selected theories of social conflict to an understanding of conflict within families. Youth & Society, 13, 157-173.

Schneider, S. (1982). Helping adolescents deal with pregnancy: A psychiatric approach. Adolescence, 17, 285-291.

Zigler, E. F. & Finn Stevenson, M. (1993). Children in a changing world: Development and social issues (2nd ed.). Pacific Grove, CA: Brooks/Cole Publishing Co.

APPENDIX A

Definitions

Definitions

Social workers/Case workers: Any individual who is currently employed by a county social service department and works in the child protection or adolescent units and provides direct case management services to adolescents. Social workers are defined by years of experience, level of education, and age.

Attitudes: Individual, personal, and professional perceptions and beliefs surrounding the services that he/she performs at his/her position in relation to working with involuntary adolescents. These beliefs and perceptions are both emotional and cognitive in nature (Rooney, 1992). Attitudes can be operationalized into positive, negative, or neutral perceptions or beliefs.

Adolescent: Individual who is between the ages of 10 and 21, and is developing cognitively, behaviorally, emotionally, and physically in one of three stages: early, middle, or late adolescence (Rubenstein, 1991).

APPENDIX B

**Invitation
Consent Form
Interview Questions**

Working with Involuntary Adolescents

You are cordially invited to participate in a Graduate Research study being conducted by myself through Augsburg College in Minneapolis. I am currently working towards my Master in Social Work.

The purpose for this research study is to identify how paternalism is used by social workers and in agencies when working with involuntary adolescents. You have been chosen due to your current employment with a metropolitan county social service agency in a child protection, children's mental health or adolescent units.

Enclosed are a consent form and a sample of the interview questions I will be asking you in a face to face interview that will take approximately 45 minutes.

Your participation in this study is completely voluntary and will not affect your relationship with Augsburg College. If you are willing to participate, please call me at work at 323-6143 or at home 421-3314 to set up an interview time. If I do not hear from you within one week of the date on this invitation, I will make a follow up call to inquire if you wish to participate.

Thank you for your time, and I will be talking to you soon.

Sincerely,

Karol J. Jensen-Schneider

CONSENT FORM

Attitudes of social workers towards paternalism when working with involuntary adolescents

You are invited to be in a research study of social workers working with involuntary adolescents. You were selected as a possible participant because you are currently work for a metropolitan county social service agency and have the potential for working with adolescents. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

Karol Jensen-Schneider is conducting this study as part of my master's thesis at Augsburg College.

Background Information:

The purpose of this study is to determine attitude of social workers towards paternalism and how that effects their practice when working with involuntary adolescents. There will not be any direct benefit to the participant. The indirect benefit will be that social workers will learn from your experience working with involuntary adolescents.

Procedures:

If you agree to be in this study, we would ask you to do the following things. Participate in one 30-45 minute interview answering 20 questions about working with involuntary adolescents, paternalism, self-determination, and demographics of participant. The interview will be audiotaped with participant's consent. The interview will be audiotaped to ensure accuracy of the recording of the participant's response to the questions.

Risks and Benefits of Being in the Study:

The risk of this study may occur in the discussion of personal stories related to your practice. However, participants are entitled to stop the interview and/or audiotaping at any time and continue with other questions. The researcher is aware that personal stories may be spoken of during the interview and will respect all aspects of individual privacy. Participants may request a copy of the final written document.

There are no direct benefits to participation.

Indirect benefits to participation are contribution to the knowledge base of the social work profession.

In the event that this research activity results in an injury, treatment will be available, including counseling and follow-up care as needed. However, payment for any such treatment must be provided by you or your third party payer, if any, (such as health insurance, Medicare, etc.).

Confidentiality:

The records as well as the audiotapes from the interview process will be kept private. In any sort of report that may be publish, no information that will make it possible to identify individual participants. Research records will be kept in a locked file at the home of the researcher. Only the researchers will have access to the records. An agreement will be signed prior to the interview for consent to the interviews and the audiotaping of the interview. The audiotapes and any notes form the interview will be destroyed in July 1998. The audiotapes will be transcribed anonymously by a professional transcriptionist outside of the metropolitan county social service agency. The audiotapes will be assigned a number prior to the transcription to maintain individual participant's anonymity.

Voluntary Nature of the Study:

Your decision whether or not to participate will not affect your current or future relations with Augsburg College or with your employer. If you decide to participate, you are free to withdraw at any time without affecting those relationships. In addition, you may refuse to answer questions that are uncomfortable and still continue to participate in the remainder of the interview.

Contacts and Questions:

The researcher conducting this study is Karol Jensen-Schneider. You may ask any questions you have now. If you have questions later, you may contact my advisor, Anthony A. Bibus III, Ph.D. at 330- or me at (612) 323-6143.

You will be given a copy of the form to keep for your records.

Statement of Consent:

I have read the above information. I have asked questions and have received answers. I consent to participate in the interviews.

Signature _____
Date _____

Signature of investigator _____
Date _____

I consent to be audiotaped:

Signature _____ Date _____

Interview Structure and Questions

This study is exploratory research to see how different social workers in a county agency work with involuntary adolescents, how they define and use paternalism, and how the use of paternalism is determined. Only I will know the social workers' responses and identifying data. The information will be kept in a locked box and only I will have access to it. Three independent judges, who are social workers outside of the metropolitan county social service agency, will review the information to identify themes, categories, and patterns. Participation in the study is voluntary and not required as part of your work requirement. Audiotape is to insure that I record the responses accurately.

Operational Definitions

Key terms for this research have been defined in the literature as follows:

Self-determination: A person choosing or developing his/her own set of wishes, goals, and aspirations (Rooney, 1992). One is autonomous with the ability to make choices without the influence or coercion from another (Rooney, 1992). Allowing self-determination is operationalized into five categories: always, frequently, sometimes, infrequently, and never.

Involuntary adolescents: A nonvoluntary or mandated youth; nonvoluntary adolescents are youth who work with a social worker due to demands made by family, friends, and/or other agencies; mandated adolescents are youth who are ordered by the court to work with a social worker (Rooney, 1988). The adolescents are in one of two categories, involuntary or voluntary.

Paternalism: A belief that denying one's ability to choose is in that person's best interest or in the best interest of society (Rooney, 1992; Abramson, 1985). Paternalism is

used by social workers when a client lacks the information needed to make choices or is unable understand the information, the client has agreed with the social worker before or the social worker believes the client will give consent at a later time (Rooney, 1992). The use of paternalism is operationalized into five categories: always, frequently, sometimes, infrequently, and never, while the view of paternalism is broken down into positive, negative, and neutral.

Social workers/Case workers: Any individual who is currently employed by a metropolitan county social services who works in the child protection or adolescent units and provides direct case management services to adolescents. The social workers are being defined by years of experience, by level of education, and by age.

Attitudes: Individual metropolitan county social workers' personal and professional perceptions and beliefs surrounding the services that he/she performs at his/her position in relation to working with involuntary adolescents. These beliefs and perceptions are both emotional and cognitive in nature (Rooney, 1992). Attitudes can be operationalized into positive, negative, or neutral perceptions or beliefs.

Adolescent: Individual who is between the ages of 10 and 21 and is developing cognitively, behaviorally, emotionally, and physically in one of three stages: early, middle, or late adolescence (Rubenstein, 1991).

Questions:

What questions do you have about the study or of the researcher?

1. What is your highest level of education?

BSW BA BS MSW MA MS Other_____

2. How many years have you practiced social work?

00-04 05-09 10-14 15-19 20-25 30+.

3. Which of the following age ranges do you fall into?

20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60+.

4. How do you define an “involuntary adolescent”?

5. How do you define “self-determination” in regard to involuntary clients?

6. How often do you allow adolescents to self-determine?

Always Frequently Sometimes Infrequently Never.

7. How do you encourage involuntary adolescents to make decisions about their case plans?

8. In regard to services, how do you encourage involuntary adolescents to make choices?

9. How does the chronological age or developmental age of the involuntary adolescent influence your decision to allow self-determination? Which has a greater impact and why?

10. What are the specific attributes that you look for when determining how much influence the involuntary adolescent will have on the case plan?

11. Of the attributes you have listed, what are the positive attributes? Why are they important?

12. Of the attributes you have listed, what are the negative attributes? Why do they dissuade you from allowing self-determination?
13. How does the amount of influence the adolescent has depend on the type of relationship he/she has with you? With his/her parents, teachers, therapists?
14. How does the length of time you have worked with the adolescent influence your decision to allow the adolescent the opportunity to self-determine part of his/her case plan? How does it influence you?
15. What does the word "paternalism" mean to you? In your opinion, does the word paternalism have a positive, negative, or neutral connotation?
16. In your opinion, how is paternalism used here at in your county social services department?
17. How does it impact services to involuntary adolescents?
18. As you have defined paternalism, how is it used in your practice?
19. How often do you use paternalism in your practice with involuntary adolescents?
Always Frequently Sometimes Infrequently Never
20. How does the use of paternalism in your practice with involuntary adolescents impact compliance with the case plan?

What questions or comments do you have in regard to this interview?

Thank you for your time in this study. I greatly appreciate your assistance.

APPENDIX C

Letter to Judges
Themes Evaluation Form
Themes Evaluation Form Example

February 2, 1998

Dear

I want to first thank you for helping me with my thesis. If you have any questions about this form or the process, please feel free to call me (W) 323-6143 or (H) 421-3314. I would like to get this back from you by Monday February 16, 1998. If you cannot complete it by then just call me and let me know when to expect it back.

The attached sheet is a work sheet to help you with this process. If the directions are not clear, please let me know. You have 3 interviews to look at. They may not be in order. (I did this to try to make the number of pages even for each person.) You also have colored highlighters.

You are to read through the interviews to identify themes (also any patterns or categories). You can do this any way that works for you. What I have found to work well is:

- 1) read through one of the interviews once looking for themes and writing down a key word for each theme,
- 2) assign a highlighter to each theme,
- 3) define what the theme means (for your own clarification and mine),
- 4) look at question # 1 in each interview and look for one of your identified themes,
- 5) count the number of times it appears in each question on the work sheet, and
- 6) write down any quotes that illustrate the identified theme (include interview number and question number.

Then, I started over with "4" and repeated it until I completed the process for that theme. Next, I looked at the second identified theme and repeated steps 2-6. As you are working you may encounter additional themes you did not identify initially, please write them down and complete the above process. The more information we find the more impact this thesis will have social work practice.

I have included a sample.

Again, I want to thank you for your help with this process. I will take you to lunch at a restaurant of your choice; we just need to set up a time to go!

Sincerely,

Themes of the Interviews

Theme: *Respect* _____

(Name of theme)

Blue _____

(Color of theme)

1. Explain your interpretation of what the theme means: *The worker has respect for the client and the client has respect for the worker.*
2. Number of time you see this them and the questions they relate to: #7 = 2, #9 = 3, #12=2, #15=2, #17=3, #19=3
3. Examples of the theme (quotes):
"If the client shows respect for me or the system, then I am more likely to allow him to make choices."
(*Interview #3, question 8*)
"If I have respect for the client, then I will let him choose the type of CD treatment he receives." (**Interview #5, question 17**)

Themes of the Interviews

Theme: _____

(Name of theme)

(Color of theme)

- 1) Explain your interpretation of what the theme means:

- 2) Number of time you see this them and the questions they relate to:

- 3) Examples of the theme (quotes):

