Introductions

- Facilitators

- Audience
Reference Book

Ethical Decision Making in School Mental Health

by James C. Raines and Nic T. Dibble
School Mental Health in America

Recent Developments

- School Shootings
- Weapons found in schools
- Kidnapping in AL
- Threats of violence on school campuses
- Closure of mental health facilities
- Prevalence of chronic mental health issues experienced by our students.
- Heightened awareness of mental illness
- Impact on Mental Health Professionals
- Inadequate preparation
State of Our Schools

- Schools have become primary mental health provider by default.
- Estimated 20% of school-aged children need mental health services between ages of 5-18.
- 70% of these children never receive services.
- Those who receive mental health services do so at the school.

(Roberts, Attkinson, & Rosenblatt, 1998; Rones & Hoagwood, 2000)
School Social Workers Improving Student Success Act (H.R. 1138)

Current Legislation Being Proposed

Formerly H.R. 1138 – It grants funds that may be used by local school districts:

- Amends Elementary and Secondary Education Act ESEA to fund the hiring of additional school social workers and under certain circumstances fund the retention of existing school social workers
- Targets services to students with highest need
- Ensures that federal funds are used to help school social workers survive budget cuts and helps students/teachers navigate difficult situations inside and outside school walls.
School Social Workers Improving Student Success Act (H.R. 1138) (continued)

• Helps to address the chronic school social worker workforce shortage.
• Recommended ratio is 1:250
• Endorsed by School Social Work Association of America (2012)
With which other school-based professionals do social workers routinely work?

- School Counselors
- School Psychologists
- School Nurse
- Educators
- Administrators
- Others
Pupil Services Providers

1. School Social Workers
   National Association of Social Workers (NASW)

2. School Counselors
   American School Counselors Association (ASCA)

3. School Psychologists
   National Association of School Psychologists (NASP)

4. School Nurse
   National Association of School Nurses (NASN)

5. Educators
   American Association of Educators

6. School Administrators
   American Association of School Administrators

All have their professional code of ethics to which they must adhere.
Comparison between 4 Codes of Ethics Relating to Confidentiality (page 46)

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<thead>
<tr>
<th>ANA</th>
<th>NASP</th>
<th>ASCA</th>
<th>NASW</th>
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<tbody>
<tr>
<td>School Nurses</td>
<td>School Psychologists</td>
<td>School Counselors</td>
<td>School Social Workers</td>
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<tr>
<td>Not absolute and may be modified to protect the patient, other innocent parties, and in circumstances of mandatory disclosure for public health reasons.</td>
<td>Maintain confidentiality; Informed consent is required to release information, except when failure to release of information would result in clear danger to the child or others.</td>
<td>Confidentiality required unless disclosure is needed to prevent clear and imminent danger to the student or others or when legal requirements demand information be revealed.</td>
<td>Maintain confidentiality unless disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client or other identifiable person.</td>
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School Social Work
National Practice Model

Includes recommendations for ethical guidelines and educational policy which means school social workers are bound by:

- NASW Code of Ethics
- School Social Work Association of America’s ethical guidelines

Additionally suggests consultation/knowledge of other school-based professional codes:

- Ethical Standards for School Counselors (ASCA, 2010)
- National Association of School Psychologists’ Principles for Professional Ethics (NASP, 2010)
- Federal Laws such as: No Child Left Behind (ESEA), Individuals with Disabilities Education Act, IDEA, the Rehabilitation Act of 1973, the Americans with Disabilities Act Amendments of 2008, and the Family Educational Rights and Privacy Act (FERPA).
- Referenced Supreme Court cases: Jaffee v. Redmond and Tarasoff v. Board of Regents.
Decision-Makers in Schools

- Multiple disciplines (Social Workers, School Psychologists, School Counselors, School Nurses, Educators, etc.)
- Not all disciplines share the same values
- Decisions are best made in collaboration
- Involvement of student, parents, multiple school professionals is vital
How many of you received school social work certification in Graduate school?

How many of you have worked in a mental health facility?

Do you feel prepared to make ethical decisions relating to mental health care for your students?
How do we as school social workers prepare ourselves to make ethical decisions regarding mental health in schools?
Objectives

- Overview of NASW Code of Ethics
- Overview of various laws, regulations, bulletins, and institutional policies that may potentially conflict
- Overview of an ethical decision-making model
- Identification of personal values and the impact these values may have upon professional behavior and ethical decision-making in the school setting
- Overview of clinical, ethical, and legal consultation guidelines
- Practical application of decision-making model using case studies
Possible Ethical Conflicts

- NASW Code of Ethics
- Organizational Policies
- State Bulletins (1508, 1706)
- Federal Laws (IDEA, 504)
- RTi Guidelines
- Moral Principles
- Legal System
- Religious Principles
- Other
- School Social Worker Ethical Principles & Personal Values
Ever attended a meeting with more than 10 participants?
Decision-Making Process

- Cultural Consideration of student
- Consideration of all known variables
- Personal and Professional Values of all disciplines

Decision or Recommendation
Ethical Guidelines

• 1. Understand your primary goal in each situation.
• 2. Avoid polarized thinking.
• 3. Take time to consider how to reduce tension between ethical values and competing responsibility.
• 4. Project the outcomes (positive and negative) to each possible course of action.
• 5. Evaluate possible outcomes and consequence to all stakeholders.
• 6. Embrace ethical predicament as opportunity for student to learn valuable life skills.
How do we leverage input?

- Know our own SW ethics, values and principles.

- Awareness of the ethics, values and principles of other disciplines represented.
Leverage Input from Team Members
NASW Code of Ethics
Core Principles

Social Workers aspire to the following principles:

1. Social workers’ primary goal is to help people in need and to address social problems;
2. Social workers challenge social injustice;
3. Social workers respect the inherent dignity and worth of the person;
4. Social workers recognize the central importance of human relationships;
5. Social workers behave in a trustworthy manner; and
6. Social workers practice within their areas of competence and develop and enhance their professional expertise.
Social Worker Obligations

- Client
- Colleagues
- Practice Setting
- Professional
- SW Profession
- Broad Society
Professional Responsibilities 
& Ethical Guidelines

• Be familiar with your profession’s values & principles;
• Be aware of where personal & professional values conflict;
• Know & use your sense of self in relation to each client;
• Be sensitive about the degree of professional influence you employ;
• Know your professional code of ethics thoroughly; and
• Be familiar with the federal & state laws that govern your profession’s pupil services practices.
Ethics of Care

- Primary focus is the need for responsiveness toward those for whom we have responsibility;
- Embraces emotion over neutrality;
- Respects the possibility/probability that others have ethical claims on our choices;
- Rejects divisions between public & private spheres of life; and
- Conceives of persons as relational.
Ethical Decision Making Model

1. Knowing Yourself & Your Professional Responsibilities
2. Analyzing the Predicament
3. Seeking Consultation
4. Identifying Courses of Action
5. Managing the Clinical Concerns
6. Implementing the Decision
7. Reflecting on the Process
Exercise

• Rank Your Ethical Principles (pg5-6) from 1-13. 1=highest value & 13=lowest

Pair & Share:

• 1) What are your top 3 principles in working with children? Why did you pick those?

• 2) Are there any circumstances under which those would change?

• 3) What are your lowest 3 principles in working with children? Why are these less important?
1. Self Knowledge

- Know yourself
- Know your professional responsibilities
  - SW
    - Client
    - Employer
    - Society
- Ethical Orientations & Practices
2. Analyzing Predicament

- Stakeholders-
  - Who is impacted by situation?

- Organizational Power –
  - Who has it? How is it being used?

- Primary Client? –
  - Student as primary with stakeholders as secondary & tertiary clients

- Values in Conflict?
  - Personal vs. Professional
  - Ethics vs. Law
Analyzing the Predicament (continued)

• Identify the stakeholders
  • *Who needs to be considered in making the decision?*
  • *What consideration is owed to whom & why?*

• Identify participants involved in each course of action

• Gather information from those involved
  • Parents, guardians, & families
  • School Administration
  • Teachers & other Educators
  • Other Pupil Services Professionals
  • Professionals from Community Based System
Analyzing the Predicament (continued)

- Organizational Power
  - Legitimate — position within organization
  - Reward-ability to reward valued resources
  - Coercive-ability to punish by removing valued resources
  - Expert — specialized knowledge, skill, experience
  - Referent — charisma, personality characteristics or interpersonal skills
  - Information-having access to information that is not public
  - Affiliation—comes from associations
  - Group Power—assembling people of like minded interests

- Identifying the Primary Client
  - Supplicants, Targets, Beneficiaries,
  - Exceptions: Parent Guidance, Teacher consultations
3. Seeking Consultation

- Ethical
- Legal
- Clinical
- Laws vs. Ethics
- Civil Disobedience - ethically
3. Seeking Consultation
(continued)

• Did you seek out consultation?
• From whom?
• Was it just colleagues from your profession?
• Did you seek out anyone else who may have more clinical or legal expertise in this situation?
• What feedback and advice did you get from these individuals?
4. Identifying the different courses of action

- What different courses of action did you identify?
- Did you take care to avoid the trap of either-or thinking?
- Who did you work with to generate different courses of action? The student? Stakeholders?
- How did you assess these different courses of action?
- Did you consider the likely outcomes of each course of action & how they will impact the student, the stakeholders & you?
4. Identifying courses of action
(continued)

- Avoid either/or approach: identify all reasonable courses of action. *Dilemma* comes from the Greek meaning “two assumptions.”
- Use a moral development approach
- Engage in collaborative decision making
Manage vs. Resolve

Self-determination and Self-development Opportunity

Engage student in decision-making process;
Relationship with student becomes therapeutic and educational; &
Opportunity for increased autonomy.

Student is actively engage in process and has opportunity to grow through the crisis.
5. Managing Clinical Concerns

- Threat assessment – Determine if the student is dangerous to self or others?
  - Assess risk for suicide (page 132 – Crisis Team recommended to conduct suicide assessment)
  - Assess risk for violence (ACTION): Pg. 138
    - Attitudes that justify violence
    - Capacity to carry out violence
    - Thresholds or rules broken to further the plan
    - Intent or commitment to the plan
    - Others’ reactions or responses to the plan
    - Noncompliance with risk reduction interventions

- Developmental decision making: Determine whether student is ready to participate in the process? Youths predisposed to make risky decisions. (8 factors pg. 143 – elaborate?) Working in the zone of proximal development (pg144)

- Cultural concerns (pg145-153)
5. Managing Clinical Concerns (continued)

- Personality characteristics play a role (emotional intensity - esp. anger)
- Substance abuse serves as dis-inhabitant to normal caution
- Some disabilities increase risk of choosing risky behaviors (FAS)
- Males are consistently more prone to risk than females
- Youth who have never had a serious or life threatening illness are at greater risk than survivors of severe or chronic disease
- Lack of social skills (esp. negotiation & peer refusal skills)
- Youth with mental health disorders, esp. thought disorders make riskier decisions
5. Managing Clinical Concerns (continued)

Be sensitive to cultural concerns (pg145-153). Common differences from Western culture:

- Family/community is often more important than the individual.
- Emotional self control is more important than affective catharsis.
- The idea of reciprocity for services rendered without a fee create dilemma when therapists usually decline proffered gifts.
- Professional boundaries & clinical distance may seem odd to families who have accepted the therapist as a member of the family.
- The family may expect a certain amount of reciprocity in terms of self disclosure.
- Certain ethnic child-rearing practices may engender clinical concerns about possible child abuse.
6. Implementing Decision

- Double Checks:
  - Be prepared to justify the decision (5 tests pp. 161-163) (Golden Rule, Fiduciary, Justice/Generalizability, Publicity, & Universality)
  - Envision the outcome selected –
  - Managing criticism – focus on
    - Protection- of student & others from harm
    - Present-managing predicament in the present takes precedence over past or future considerations
    - Positive aspects
  - Document the process of making the decision
5 Tests of Decision-Making

• **Golden Rule** (If you were the student, would you want someone to handle this situation as you did?)

• **Fiduciary** (Integrity of professional vs. student - two people with unequal power)

• **Justice/Generalizability** (would other students with same situation be treated in same manner?)

• **Publicity** (Are you comfortable with others knowing your decision?)

• **Universality** (would you recommend this action to another student services professional?)
7. Reflecting on the process

- Monitoring implementation
- Evaluating outcomes
- Re-engaging in the process
- Improving on the process for the future
Ethical Framework

- Deontological Ethics
- Consequentialist Ethics
- Virtue Ethics
- Ethics of Care
Deontological vs. Consequential Ethics

Moral Absolutes          Ends justify the means

Deontological            Consequential
Deontological Ethics

There is a moral code that defines the prescriptions (oughts) & proscriptions (naughts) of people living together (ethnic group) or working together (a profession).
Consequential Ethics

- An action is right if it produces the best result
  - *Best result* = *most good for the most people*

- Clinical foresight-
  - *Balancing client rights vs. their best interests*

- Conflicts between ‘most good’ & ‘most people’
  - *Most people = average or additive?*
Virtue Ethics

- Disposition to do the right thing for the right reasons
- Virtue is learned
- Role Models
- Reflection on ethical decisions are integrated
Use of Self

- Self-awareness in ethical decision making includes issues
- Countertransference based distortions in professional perspective
- Concordant identification (w/client)
- Complementary identifications (w/significant others in client’s life)
- Blurred, dual or conflictual relationships with clients or their significant others one of the most troubling ethical issues
Typology of Practitioner Responses

- Positively under involved
- Positively overinvolved
- Negatively under involved
- Negatively overinvolved

Under involvement  Positive attitude  Over involvement

Negative attitude
Negative Under involvement

- Trait cynicism tendency toward disillusionment & distrust of other people
- Chance locus of control- luck is in control or fate is randomly determined
- **Self Questions:**
  - *Do I believe I can’t make sense of the chaos?*
  - *Do I change the topic when the student brings this up?*
  - *Would I rather let someone else handle this?*
  - *Do I lack interest in this student’s ethical issue?*
  - *Do I feel hopeless about the outcome?*
Positive Under involvement

- Practitioner over confident in a client’s ability to resolve an ethical quandary

- **Self Questions:**
  - Am I asking questions student feels incapable of answering?
  - Am I overestimating student’s ability to handle this on his/her own?
  - Does his/her physical maturity mislead me about moral, emotional or cognitive ability? Does his/her physical age mislead me about the developmental stage?
  - Am I giving advice student feels incapable of following?
Positive Over involvement

- Susceptible to boundary violations: getting too involved because of caring &/or similarities of situation with student

- Self Questions:
  - Am I working harder on this student’s problems than he/she is?
  - Do I feel too much ownership of this problem b/c I care about this student?
  - Do I over identify with this student b/c of our similarities?
  - Am I taking shortcuts in resolving this problems without fully exploring the options?
  - Do I think about seeing this student outside of school hours to help even more?
  - Am I pressuring student to do things my way?
    - Persuasion: Logic or emotion to influence
    - Interpersonal leverage: Use of self (body language, words) approval/disapproval
    - Inducements: if you do x, I’ll do y
Negative Over involvement

- Practitioner has negative attitude toward student – actions could become personal & punitive rather than appropriate
  - Threats - coercive taking something away from student
  - Compulsions - completely remove student choice
- Self Questions:
  - Do I think student doesn’t care enough about this issue?
  - Am I arguing or competitive with this student?
  - Am I bothered by student b/c of our differences? “Those people”
  - Do I think about involving other people (parents, police, parole officer)? Why?
  - Am I considering some type of coercion to make student to the right thing?
Hierarchy of Professional Influence

- COMPULSIONS
- THREATS
- INDUCEMENTS
- LEVERAGE
- PERSUASION

Most

Least
Identifying Basis of the Conflict

- Identifying the values in the conflict
  - Common competing Ethical Values
  - Other Important Responsibilities
  - Identify the Relevant Values in Tension

- Are the interests of the parties conflicted?
  - How might each party’s interest be affected by my action?
  - What is my responsibility to each party?

- Are there competing ethical standards?
- Are the ethical standards unclear in this case?
Ethical Orientation to Treatment

- Informed Consent
- Capacity
  - understand information
  - appreciate consequences of decision
- Information
  - Adequacy of knowledge
- Voluntariness
  - Freedom from coercion, constraint, compulsion
Reasons for Ethical Consultation?

- Stimulate thinking
- Feedback about thinking
- Consultant generates new options
- Identification of personal factors and conflicts
- Reveal whether clinician is going extra mile on client’s behalf
- Increase clinician’s confidence in the outcome
- Consultation may reduce clinician’s legal liability
- Consultation helps prevent ethical problems
- Determine how to mitigate unintended consequences
- Meta-learning effect: increase in competence after working through dilemma with experienced consultant
Clinical Consultation (pg. 73)

When is clinical consultation recommended?

- Engage in regular consultation as many districts do not offer
- Consult with those having special expertise
- Interventions have been ineffective
- Emotional toll of ethical predicaments
- Effective management of ethical dilemmas
Legal Consultation (pg. 74)

When is legal consultation recommended?

- When there is possible disclosure of information against client’s wishes;
- Comply with subpoena that requests privileged information;
- Terminate services when client has threatened a lawsuit;
- Rely on deceased client’s relative for informed consent purposes about former client.
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Ethical Decision Making in School Mental Health

Reminders:

- Adhere to your ethical standards
- Maintain empathic attitude & positive regard towards the student throughout the process;
- Recognize that decision-making is a process and use the framework;
- Anticipate possible criticism from stakeholders;
- Determine what is in the best interest of the student; Focus on Managing vs. Solving the dilemma;
- Screen the selected course using 5 tests.
Resources and Links

NASW Code of Ethics
http://www.naswdc.org/pubs/code/code.asp

NASW School Social Work Standards

NASW Standards for School Social Work Services

School Social Work National Practice Model

Professional and Occupational Standards Part XXV. Credentialed Social Workers

Bulletin 1508 – Pupil Appraisal Handbook
http://www.lspaonline.org/bulletin%2015080809.pdf

Bulletin 1706 – Regulations for Implementation of the Children with Exceptionalities Act
Resources and Links (continued)

School Psychologists Professional Conduct Standards
http://www.nasponline.org/standards/ProfessionalCond.pdf

NASP Professional Standards

American School Counselors Association

School Counselors Code of Ethics

Code of Ethics for Educators

American Nurses Association
http://www.ehow.com/about_6310512_american-nursing-code-ethics.html

American Association of School Administrators
http://www.aasa.org/content.aspx?id=1390

Social Work in Schools: Principles and Practice by Linda Openshaw

The Domains and Demands of School Social Work Practice: A Guide to Working Effectively with Students, Families, and Schools by Michael S. Kelly
Resources and Links (continued)

Individuals with Disabilities Education Act 2011 (IDEA) – Part B (Children 3-22)
http://nichcy.org/schoolage

IDEA (Actual Law)

Individuals with Disabilities Education Act 2011 – Part C (Infants & Toddlers)
http://nichcy.org/babies

Charter School Laws in Louisiana

Charter School Bulletin in Louisiana