Ethical Dilemmas are not Simply Black and White

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This article aims to highlight some of the ethical issues that arise when social work educators plan to involve service users and carers from black and minority ethnic (BME) communities in the teaching of social work students. Between 2005 and 2007, the authors carried out a two-part project that involved working with service users and carers from BME communities in the area around Liverpool in Britain. The article first discusses the background for this two-part project, highlighting two themes relating to the ethical dilemmas we experienced. The first of these themes concerned conducting a project in a political context based on short and intermittent funding and intransigent bureaucracy. Our second theme concerned how to reconcile bringing together a group of people because they were recognized as having a shared experience while at the same time there were a myriad differences within the group. We then discuss these issues in light of the ethical approach we adopted, based on being open and honest, flexible in a respectful and meaningful way, and on anti-oppressive ethics and shared responsibility.

Keywords Black and Minority Ethnic Communities; Involvement of Users; Teaching of Social Work; Anti-oppressive Ethics

Since 2003, each accredited educational institution awarding social work qualifications in England has been allocated a special grant to support the development of service users’ and carers’ involvement in social work education. The General Social Care Council (GSCC) reported that most universities delivering the social work degree programme had strategies to engage and support a diverse range of service users and carers in their social work programmes. However, universities were at different stages in progressing to full participation and participation was taking different forms. The report also highlighted that ‘there is a need for all to move to a more systematic and integrated involvement, with a particular focus on broadening participation of
under-represented groups’ (GSCC 2004, p. 44). Black and minority ethnic (BME) communities were clearly one of these groups.

Considering the long history of BME communities on Merseyside, one might expect that the engagement of these communities could be easily achieved. Begum (2006) found that service user participation in social care has increased markedly during the past twenty years of the service user movement. The participation of service users from BME communities, however, has diminished over the same period of time. Fear and lack of trust are some of the reasons that inhibit their participation. Other research studies have also found that people from BME communities have frequently been consulted in numerous research studies, but they were seldom involved in the shaping of research and development work. Participation rendering little or no influence on service development has discouraged further involvement and led to ‘consultation fatigue’ (Trivedi 2002; Butt & O’Neil 2004).

We became aware early on in the project of the uneasy relationship between social work educators and the BME community as reflected in the perceptions held by research participants. Some had expressed concerns that they saw many new projects bloom but quickly wither away (Yeung & Box 2005). We were very aware from the outset, therefore, that there would be many differing views about our intentions. The perception of some contributors to the first part of the project was that by and large social work educators are white, middle class and out of touch with people from BME communities. This does not reflect the experience of the two researchers, one of whom identifies as belonging to an ethnic minority group. However, the validity of the perception has to be acknowledged in terms of individual experience. We were in effect starting from the position of taking a positive step to address a situation that arose out of this uneasy relationship and the mistrust that developed within BME communities about any engagement with social work.

The key ethical issues that we have had to consider centre on two themes. The first one is the ethical dilemma around conducting a project in a political context that is based on minimal and intermittent funding and intransigent bureaucratic organizations. The nature of the funding situation and the uncertainty leads us to question the ethics of engaging in time-limited projects. The second though by no means lesser issue was that of how to reconcile bringing together a group of people because they are recognized as having a shared experience, while at the same time being aware of the myriad differences that exist within the group. We wanted to ensure that we recognized both the commonality and the different experiences of the members of the group and to use language to help define those differential experiences without resorting to labelling and thus diminishing those experiences. In this article we give an account of how we addressed these issues of difference and diversity by using an approach that aimed to be: open and honest, flexible in a meaningful and respectful way, based on anti-oppressive ethics and based on shared responsibility.
Open and Honest

Informed by our experiences and the outcomes of the 2005 project, an open and honest dialogue was sought by facilitators and participants from the outset. Aware that ‘mutuality, dialogue and collaboration’ are crucial to developing good practice (Waterson & Morris 2005), we shared our concern that we needed to be realistic about funding and organizational constraints and that we had no overall control over the project. We were unable to give any guarantee of sustainability for the outcome. This approach laid down a foundation for a mutual understanding and dialogue to take place.

We made our initial contact by re-visiting two organizations that had previously taken part in a study we undertook in 2005; both authors met service users and carers at a venue of their own choosing where they felt most comfortable (Stevens & Tanner 2006; Bowes & Sim 2006). We shared our beliefs that service user and carer participation in social work education is not an end in itself. More importantly, it is a means to an end. The end should be meaningful to all parties concerned and the experience should be ‘empowering, energising and rewarding’ (Hayward et al. 2005; Levin 2004). When we re-established contact with the participants, some of them voiced their concern about the motivation of the project and insisted that we had to contact them via the organization of which they were a part. We developed an open and honest dialogue between ourselves as project workers and with the service users, which helped to develop a relationship based on trust. As the project progressed, it was agreed that we could make direct contact with them.

In order to ensure all participants were adequately prepared to deliver teaching sessions, they were invited to take part in a series of preparation sessions. Financial constraints would impinge on our desire to make our project as accessible as possible. We had to compromise the number of participants to a maximum of six people and the number of sessions from four to three. The ethical issue here centred on making choices as to whom we should approach as this would inevitably exclude some potential service users and carers. Other studies have raised concern about the representativeness of service user and carer participation and have raised anxiety about tokenism, as well as the over-use of a few people (Duffy 2006). Making choices about which service users and carers to involve means that we are not only dictating what students’ experiences should be, but also denying someone else a voice that should be heard. In our project, we were unable to engage certain groups in BME communities who had difficulty in communicating in English because of the cost of paying interpretation and translation services. Although one of the authors can speak another language, which could have been utilized, time involved for translation during the preparation and teaching sessions prevented us from engaging some communities comprising the most marginalized groups in society. The impact of financial constraints upon us was introduced to the dialogue at the very beginning of the project. It came as no surprise to
participants that funding was restricted, but a transparent approach helped to sustain engagement.

Flexible in a Meaningful and Respectful Way

We agreed that the conceptual framework for service user and carer participation should be respectful and meaningful rather than tokenistic (Levin 2004). We were reminded to take account in the planning of stage two of the project that ‘everyone is an individual’ and agreed to adopt a flexible and creative approach. This approach enabled us to take account of the diversity of all participants not only in terms of ethnicity, but also in terms of other life experiences. We were aware of the possible difficulties we were likely to encounter as flexibility often sits uneasily with formal hierarchies in institutions such as universities (Allam et al. 2004). However, mindful of the many differences the group would encompass, we were prepared to push boundaries as well as to make compromises where necessary.

To ensure participation on a meaningful and respectful basis, considerable time and resources need to be set aside when engaging service users and carers in the development of social work education (Reynolds & Read 1999; Forrest et al. 2000; Molyneux & Irvine 2004; Humphreys 2005; Basset et al. 2006; Stevens & Tanner 2006). We took a lot of time to resolve the issues of payment, acknowledging that participants’ contribution should be recognized in a respectful way. The payment issue can go unrecognized as a serious concern for salaried academic staff. The GSCC report indicated that ‘paying service users continues to challenge most HEI systems. Difficulties continue in trying to ensure prompt payments, providing petty cash payments, limiting bureaucracy and earning rules’ (GSCC 2004, p. 37). Taking a flexible approach, we made every attempt to overcome bureaucratic procedures and made arrangement for prompt payment to take place. In the evaluation of our project, a participant commented: ‘What really helped us and something we really talked about was the good experience of receiving payment promptly and not having to wait for weeks, this made such a difference and alleviated much of the stress that could be avoided in our work with universities.’

Although we sought to engage service users and carers from BME communities, it was important to take account of differences in the wider context when considering participants’ training needs. Service users and carers are considered to be experts by experience but they should not be expected to take part in teaching sessions without proper support and training (Beresford & Croft 1993; Levin 2004; Basset et al. 2006; Stevens & Tanner 2006). Service users and carers are often very willing to share their distressful and painful experiences in the classroom and this is something students most value (Barnes & Carpenter 2006; Simons et al. 2007; Yeung & Box 2007). Basset et al. (2006, p. 399) also expressed concern that some service users/carers ‘may feel under pressure to perform
consistently at the highest level, in order to silence doubts about their involvement’.

Delivering teaching sessions could be a daunting experience and sharing distressful and traumatic experiences may cause undue distress during, or in some instances, after the teaching session. Good practice suggests that ‘flexibility needs to be planned from the start of any project, both in terms of timescales and deadlines, and in terms of resources to allow for people becoming distressed or unwell during the project or needing extra support’ (Faulkner 2004, p. 10). Our approach was to arrange a rest room, which was also the same room we used for all preparation sessions, so that service users and carers could use it if anyone felt the need to leave a teaching session. We have since given further consideration to other arrangements that would have been appropriate to safeguard participants’ welfare such as an individual support plan.

Some service users have complained that protection of their mental health from harm can be experienced as patronizing and inappropriate (Faulkner 2004). Taking a flexible approach demands that we support participants to get involved in whatever way they feel is meaningful and empowering for them; it should be about true partnerships and the sharing of power. It was important to us that service users and carers were given the opportunity to decide if they wanted to continue their involvement and that appropriate guidance and support should be in place should they choose to continue to take part in the project. It was, after all, our strongly felt belief that service users and carers could still find their inner strength to overcome adversity in difficult situations. Participants experienced a number of challenging life events during the course of the project, making attendance at all meetings difficult. A flexible approach to deadlines enabled members to make meaningful contributions in a variety of ways.

We found that debriefing after teaching sessions was very important, enabling participants to receive feedback regarding their teaching. During the first debriefing session, a service user suggested that students should be asked to write down their comments on a piece of paper towards the end of each session so that participants could take some written feedback away with them. We respected their contribution and implemented this suggestion; students supplied many positive and encouraging remarks in the second teaching session.

All participants, including both authors, found that the first time they heard some of the distressful experiences of the group members was during the teaching sessions. In planning the sessions, we had failed to anticipate the enormous impression that service users’ and carers’ stories would have on each other during teaching sessions. We all felt that we had come a long way before starting the teaching and felt that we knew each other far better than when we began. This perhaps compounded the effect of hearing quite intimate stories about people we had come to know to some extent. We had compromised the number of preparation sessions because of various constraints and were concerned about the possible distress this could have caused. The intimacy arising from the teaching sessions made us more vulnerable in front of the students. The preparation sessions however, enabled us to offer each other
useful support. Our ‘open and honest’ approach had in fact brought us closer together, securing a more successful outcome.

**Based on Anti-oppressive Ethics**

The group was made up of individuals from diverse cultural and ethnic backgrounds, evidently holding quite different views from each other on certain issues. Duffy (2006) states that it is ‘okay’ to hold certain views, but service users and carers need to be conscious of the impact of their views on others. Stevens and Tanner (2006) stress the importance of service users and carers agreeing to a shared value base in terms of fundamental anti-discriminatory principles.

We acknowledged that the language we used was by no means straightforward and often brought with it an array of political and social meanings. There were certainly challenges and we were conscious that there was not necessarily a neat resolution to all these issues. The number of teaching sessions participants were involved in was constrained by the timetable of the educational institution and we were limited by this in our ability to explore some of the issues in greater depth. More time would have been helpful to allow us to reflect on the information shared. We were committed, though, to work positively through any barriers that language and different experiences brought forth. We found that ‘mutuality, honesty and dialogue’ enabled us to overcome some of these barriers and helped us to understand each other better.

Another dimension we felt social work educators need to consider was the use of jargon-free language (Duffy 2006; Stevens & Tanner 2006). Being invited to an academic institution to attend meetings and deliver teaching sessions could be a daunting experience for some service users and carers. Use of professional language and jargon could reinforce the experiences of the power imbalance between professionals and service users/carers, which is contradictory to the values we hold such as respect, partnership and equality. It is indeed important to note that there is no clear boundary between professional/academic and service users/carers; individuals could easily fall into both sides of this artificial categorization.

**Shared Responsibility**

Duffy (2006) and Levin (2004) emphasize that everyone involved in social work training should be properly prepared for service user and carer participation. Beresford *et al.* (1994, pp. 5–6) points out that ‘social work educators need training to develop their understanding of the issues involved’. The Dundee system in Scotland encourages communication between social work academics and service user and carer groups in a planned and non-hierarchical way (Anger *et al.* 2005). In the Merseyside and Cheshire area, the Forum of Carers and Users of Services (Focus) works in partnership with academic institutions, which deliver
social work programmes. It provides a forum for academics to meet service users and carers to discuss various issues affecting their participation in social work education. Commitment from educational institutions is, however, essential in order to support social work educators to engage with these activities. In reality, it often demands an individual’s personal commitment and dedication to address the issue.

Students also have a role to play in service user and carer participation in social work education. Debriefing sessions are equally important to students not only to collect feedback for service users and carers, but also to address any similar experiences that as service users and carers they may have had themselves. Suggestions made by students should be valued as they can enhance students’ learning experiences and also promote a positive teaching and learning experience for everyone involved. Some of the students attending the teaching sessions shared some of their experiences of racism in their personal or family life. This was discordant with the perceptions held by some of the participants, and they were pleasantly surprised to witness that efforts have been made to recruit social work students from BME communities.

Conclusion

At the outset of our project we were mindful of the barriers we had to overcome concerning the sense of disillusionment and frustration felt by service users and carers from BME communities about the short-term nature of funding and the lack of sustainability. We were also concerned to gain the trust of potential participants, some of whom had expressed scepticism about the motivation behind similar projects and the ability of social work educators to take their concerns seriously. The outcome of the project had potential to reinforce these barriers and compound the problem itself.

The focus of our project centered on the involvement of service users and carers from BME communities in social work education. Participants were approached to engage with the project because they belonged to BME communities, but there were many other aspects of our lives that united and divided us. Our approach sought to address differences across all axes of oppression by carefully considering the detail of how we delivered the project and by being honest and transparent about its limitations. During the evaluation of the project, service users, carers, facilitators all asserted that the project had provided a valuable experience and had generated very productive working relationships.

While finalizing this paper, discussion with the project participants has continued about how to take the positive outcomes further. Despite enthusiasm from many social work educators, the uncertainty about sustainability and commitment from educational institutions remains and we all feel that there is still a long way to go before involvement of service users and carers from BME communities in the education of social workers becomes mainstream.
[If you would like a copy of the report on the research project, please email Echo Yeung at: y.yeung@ljmu.ac.uk]

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