METHODOLOGIES FOR ETHICAL DECISION MAKING IN SOCIAL WORK[5]

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ABSTRACT

Social workers face many ethical dilemmas on a daily basis, but do not always have the tools to resolve them. We analyze some of the main ethical decision-making methodologies used in social work. They are divided into two groups: those that propose a hierarchy between ethical principles, and those do not propose any specific hierarchy between them. We conclude with a succinct assessment of these methodologies and highlights some of their main features, with the aim of providing social workers with a set of tools for ethical decision making.

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INTRODUCTION

According to the latest definition by the International Federation of Social Workers, social work »*promotes social change and development, social cohesion, and the empowerment and liberation of people*« (IFSW, 2014). To that end, social workers have to face a wide range of problematic situations relating to exclusion, disability, immigration and inequality, among others. On a daily basis, they are having to deal with serious situations that people such as the elderly, immigrants, minors and those at risk of social exclusion find themselves in. This makes social work a profession that provides a service which, though it may not always enjoy the recognition it deserves, is of huge importance in terms of how society develops.

However, as well as it being such a fundamental profession, the particular features of social work mean it is an eminently ethical profession, in which ethics are at the root of all professional endeavours undertaken (Idareta, 2013; Idareta and Ballestero, 2013a). This idea is easily understood when considering what the IFSW states that social work is based on: »*principles of social justice, human rights, collective responsibility and respect for diversities are central to social work*« (IFSW, 2014). A profession that works to bring about development in people's capacities and autonomy, foster their wellbeing and respect their diversities has to be a profession in which ethics form its very cornerstone.

Yet the particular nature of social work and the serious situations it has to deal with mean that, very frequently, a number of ethical dilemmas arise in social interventions (Úriz, Ballestero and Urien, 2007; Ballestero, Úriz and Viscarret, 2012; Úriz, 2013), in conflicts between respect for autonomy and the welfare of clients (Idareta, 2014; Idareta and Ballestero, 2013b), questions about whether or not to monitor certain standards of institutions, conflicts over whether professional actions are really aimed at bringing about greater social justice, etc. These and many other ethical dilemmas require an appropriate response from social intervention professionals. However, this demand is in turn met with a huge vacuum that professionals themselves recognise: the lack of appropriate tools for ethical decision making and, therefore, for resolving ethical dilemmas (Ballestero, Viscarret and Úriz, 2011).

Ethical decision making has been subject to review and discussion in many other disciplines: business (Robertson and Crittenden, 2003; Craft, 2013), medicine (Bernard Lo, 2013; Ruiz-Cano et al., 2015) and psychology (Cottone and Claus, 2000), among others. In the case of social work, it is an issue that is gaining in importance, as given the aforementioned peculiarities of the profession, having models and methods to help with ethical decision making has become a pressing need that professionals are increasingly calling for (Úriz, 2004; Buck, Fletcher and Bradley, 2015).

This article, therefore, addresses these issues, and explains some of the main models and methods for ethical decision making that may be useful to social workers. It should be clarified that the terms »models« and »methods« are not considered identical. The term »model« is usually a broader term than »method«, as ethical decision making models tend to have one (or several) ethical theories that form the basis of the methodology itself (Cohen, 2004; Pasini, 2015). The purpose of this article, therefore, is to open up the range of useful tools for ethical decision making in social work, and will therefore refer to specific models and methods alike. To that end, the term »methodologies« is used to encompass both models and methods.

To begin, the following briefly explains the fundamental elements of various methodologies, dividing them into two groups: those proposing a hierarchy between ethical principles and those that do not propose any specific hierarchy between them. There then follows a discussion around the models and methods dealt with, focusing on some elements which, in the authors' understanding, should form the fundamental basis of ethical decision making in social work.

METHODOLOGIES THAT PROPOSE A HIERARCHY BETWEEN ETHICAL PRINCIPLES

As indicated, the grouping criterion used for methodologies is whether or not they propose a hierarchy between ethical principles. This, it should be made clear, is just one of the ways that ethical decision-making methodologies can be classified (García et al., 2003; Cottone and Claus, 2000; Minor and Petocz, 2003).

We decided to use this criterion because we felt that ethical principles are so important that, in one way or another, they are always present in decision-making processes. Furthermore, if a hierarchy is proposed between them, the processes of ethical deliberation are made easier. However, as is made clear in the final discussion, we also feel that it would be hugely complicated to make a universal hierarchical proposal.

That said, the starting point is to explain two methodologies that do establish a hierarchy between ethical principles and which are highly useful in social work interventions. The first is the deliberative model of Diego Gracia (2007a; 2007b) followed by the aggregate model of Frank M. Loewenberg and Ralph Dolgoff (1996).

Deliberative model of bioethics of Diego Gracia

Diego Gracia is a retired professor of the »Complutense University of Madrid«, and has made great contributions to the field of bioethics, particularly for social

workers, among whom the deliberative or bioethical model has acquired significant relevance. Following the line taken by Beauchamp and Childress (1999), and taking into account theories such as the deontologist and consequentialist approaches, Diego Gracia (2007a, b) proposes an ethical decision-making methodology in four steps or levels of moral reasoning: analysis of the moral reference system (ontological dimension), study of the moral norms and principles, which Gracia calls moral outlining (deontological dimension), analysis of positive and negative consequences, which Gracia refers to as moral experience (teleological dimension) and, finally, the specific ethical decision making, also called moral verification (justification).

The reference system is the framework prior to moral reasoning and is based on two premises: one ontological, which states that one is a person in terms of one having value and not a price, and the other ethical, which considers all people to be equal and therefore deserving of equal consideration and respect. This reference system, therefore, is the condition of the possibility of a moral reasoning, which thus acquires value, meaning and significance, yet can still be contrasted (Gracia, 2007a).

This ethical methodology establishes the following as conditions for the possibility of moral reasoning: moral law as proposed by Immanuel Kant (1983, 1984), the Universal Declaration of Human Rights (United Nations, 1948), and the golden rule (which has its origins in Judaism and Christianity, in Tobias 4.15 and Leviticus 19.18, respectively). Kantian moral law proposes working in such a way that the maximum that you wish for yourself can become law for everyone, and working in such a way that you treat people as ends rather than as means. Article 1 of said Declaration postulates that all human beings are born free and equal in dignity and in rights, and that they must treat fellow human beings with equal consideration and respect. Finally, the golden rule requires acting with others as you wish them to act with you.

The second step is the outlining of moral possibilities. On this point, Gracia criticises the approach of Beauchamp and Childress (1999), who »insist on considering the four principles of identical rank« (Gracia, 2007b: 126). He argues the need to establish a hierarchy of ethical principles by establishing two different levels: the first level is that of general and universal principles (principle of non-maleficence and principle of justice), and the second level that of particular and specific principles (principle of autonomy and principle of wellbeing).

According to Gracia (2007b), the principle of non-maleficence forms the basis of the duty of doing the most absolute good, in the duty of not physically harming people, and treating all people with total and equal consideration and respect, whereas the principle of justice consists of not discriminating against people, ca-

ring for people in situations of maximum vulnerability, and the impartial and equal distribution of existing material resources.

Given all that, the principle underlying all of them, and which derives from the system of moral reference, is that of equality: we are all human beings, and as people we are basically equal. In other words, from the premise that all human beings should be treated with equal respect and consideration comes the requirements of not being physically harmed or socially discriminated against. Indeed, we are under the obligation to comply with the principles of non-maleficence and of justice, including against our will, whereby civil law and criminal law are the instances safeguarding said observance of the obligation.

In the same way, Gracia (2007b) considers autonomy to be inseparable from wellbeing: it is essential for people to be autonomous in order for them to equip themselves with the wellbeing that they freely aspire to. The principle of autonomy therefore consists of protecting the subject's autonomous decision, of safeguarding their capacity to voluntarily self-regulate the norms they give themselves through reason, and of preserving their ability to freely decide without being coerced, whereas the principle of wellbeing consists of the right of everyone to live according to their own project of a happy life and their understanding of human dignity, of imparting the most good to others, always taking their personal opinion into account.

Based on the link between these ethical principles, Gracia (2007b) sets out a hierarchy: at an initial level he places the principles of non-maleficence and of justice, with the principles of autonomy and wellbeing on a second level. Both levels must always be considered. Establishing this hierarchy Gracia seeks to propose which of these ethical principles has priority, but without excluding any from the other level.

The arguments put forward in favour of such a hierarchy have to do with the fact that the level 1 ethical principles are universal, general, objective, legally categorised, they establish what is correct and incorrect, they identify, guarantee and protect the common good and, above all, they oblige everyone, even against our will. In turn, the ethical principles of level 2 are particular, specific, subjective in nature, they establish good and bad, they depend on the values system itself and do not oblige against one's will, but rather are demands that each subject gives to themselves in their conscience. That is why the first level is identified by Gracia with an ethic of duty or of minimums, and the second level with an ethic of happiness or of maximums.

For this perspective, the ethic of minimums would have priority over the ethic of maximums. In other words, the proposals for the basic protection of human dignity (against poverty, hunger, discrimination in all its guises, etc.) prevail over

proposals for a happy life. Whereas the first identifies and denounces the threshold under which how human beings are treated becomes undignified (physically, psychologically, socially and morally), the second proposes different projects for a happy life, with both being essential for the proper development and materialisation of moral reasoning, and promoting true moral pluralism. As stated by Cortina (2010:31), »the magic formula of 'moral pluralism' consists, therefore, in sharing certain, progressively extendable, minimums of justice, and in actively respecting the maximums of happiness and sense of life that are not shared, but are valid«.

Gracia calls the third step moral experience, and it relates to the teleological moment of moral reasoning. This is when the moral outlines based on our personal experience are contrasted and put to the test. Put another way, this is when our moral hypotheses are refuted through confrontation with our experience. As Gracia states (2007a: 500), »moral outlines were possibilities, and moral experience consists of their appropriation or expropriation«. The third step of the deliberative methodology consists of responding based on moral outlines. In other words, we appropriate these if they effectively make it possible for us to adapt to reality. If not, others will have to be considered. Moral reasoning becomes a response when it is useful to the subject to adapt on the situation.

Thus, at this teleological level of moral reasoning, Gracia considers the objective and subjective consequences. The first are those that derive from level 1 ethical principles (non-maleficence and justice), whereas the second are from the level 2 principles (autonomy and wellbeing). It is in this step where the subject will experience the anticipation of both the objective and the subjective consequences of the supposed response given.

Finally, Gracia considers the last step of his deliberative methodology: moral verification. This is when each case is contrasted with the ethical principles referred to in the second step, checking whether it is possible to consider any exception to such ethical principles in the third step, the decision made is contrasted with the reference system adopted in the first step, and the final decision is then taken. This final decision is the starting point for establishing individual or collective criteria and norms (protocols, etc.).

In summary, the different steps of the ethical methodology proposed by Gracia would be as follows: it is based on the system of moral reference, which can result from a combination of Kantian moral law, human rights and the so-called golden rule; the subjective and objective correction of ethical principles are assessed, and whether they are in conflict with one another; the moral consequences of applying such ethical principles are analysed, and whether conflict exists between them; and finally, the decision is made based on analysis of the conflict of consequences, on analysis of the consequences of the principles, and on contrasting the results with the moral reference system (Gracia, 2007a, 2007b).

The Frank M. Loewenberg and Ralph Dolgoff aggregate model

Frank M. Loewenberg, the emeritus professor of the »School of Social Work at Bar-Ilan University« (Israel), and Ralph Dolgoff, professor at the »University of Maryland School of Social Work« (Baltimore, USA), propose the aggregate model (1996: 57, 61-63), with the aim of avoiding improvisation and of rationalising the process of ethical decision making in the professional exercise of social work. The applicability of this model is not limited strictly to ethical questions, and therefore, as can be deduced from the formulation of the 11 initial steps, it could be said to be a general decision-making model. This model is based on theories from different authors and is characterised by the fact that decision making occurs progressively: initially, 11 generic steps are proposed as an approach to the specific casuistry; two different instruments are then used that guide social intervention professionals in the ethical resolution of the case: firstly, the »Ethical Rules Screen« (ERS) is used, followed by the »Ethical Principles Screen« (EPS).

The 11 steps initially proposed are as follows: 1) identify the problem and the factors that help to maintain it; 2) identify the people and institutions related to said problem (clients, other professionals, etc.); 3) identify the values relevant to the problem held by the various participants identified in step 2, as well as the social, professional and personal values of client and worker; 4) identify targets and goals, attainment of which can resolve or reduce the problem; 5) identify alternative strategies; 6) ensure the effectiveness and efficacy of each alternative in terms of the goals identified; 7) determine who should be involved in the decision making; 8) choose the most appropriate strategy; 9) implement the chosen strategy; 10) monitor the implementation, paying particular attention to unexpected consequences; and 11) assess the results and identify additional problems.

Once this first approach has concluded, the progressive process of ethical decision making continues with the ERS, comprising the following three ethical norms, which encourages professionals to use their deontological code of reference: 1) examine if any of the code rules are applicable. These rules take precedence over any personal value system; 2) if one or more Code rules apply, follow these; 3) if there are no applicable rules or if several code rules provide conflicting guidance, use the EPS.

What the ERS does is refer to the next instrument, the EPS, when the deontological code of reference is very vague or unspecific, and when it does not propose any specific ethical guideline. In other words, if the ethical guidelines that make up the ERS do not allow for problems or ethical dilemmas to be referred, Loewe-

nberg and Dolgoff (1996) propose using the ethical principles of the EPS. These ethical principles are ordered in a hierarchy, and are as follows: 1) protection of human life (life in the broadest sense, that is, both the wellbeing of the client and of others); 2) equality and inequality: in principle, all persons have the right to be treated equally, but may be treated differently if the inequality is relevant to the issue in question (e.g. in cases of child abuse); 3) autonomy and freedom: the social worker should respect the client's autonomy and freedom, provided this does not involve serious harm for himself or herself or anyone else (in the latter case, the first principle would be the priority). One must also weigh up the risks and benefits of each action; 4) principle of least harm (choose the option that causes the least possible harm); 5) principle of quality of life (for individuals and for the community); 6) principle of privacy and confidentiality; and 7) principle of truthfulness.

In short, Loewenberg and Dolgoff propose a decision-making resolution model that combines a series of general steps and certain ethical rules, with the hierarchy of seven basic ethical principles: at first a generic approach is taken with the ethical circumstances of each case, to then call on the ethical rules of the deontological code of reference, and if they are not useful, to the basic hierarchical ethical principles.

Lines of action by Frederic Reamer

Frederic Reamer is a professor at the »School of Social Work«, Rhode Island College. His approach (Reamer, 1999:70-71) draws on the arguments of moral philosophy of Gewirth (1978), who stresses the fundamental right of all human beings to freedom and wellbeing. Working on that basis, Gewirth identifies three types of goods: »basic« (those essential to achieve wellbeing, e.g. life, health, food, mental equilibrium, protection); »non-subtractive« (those without which our possibilities of achieving our goals are reduced, and which if taken from us would make our life conditions poorer); and »additive« goods (those that enhance people's ability to pursue their goals, e.g. self-esteem, knowledge, material wealth, education).

In hierarchical order, basic goods would be the most important, followed by non-subtractive goods, and finally additive goods. Based on this hierarchy of goods, a hierarchy of duties would result depending on the goods involved.

Based on this classification, Gewirth (1978:342-345) proposed several principles to help resolve situations where there are conflicts of duties. These principles are as follows:

1. It is justifiable to intervene to prevent the violation by someone of other people's rights to freedom and wellbeing. For example, it would be justified to dis-

close confidential information given by a client if by doing so we prevent harm (an attack, for example) to the client's partner.

2. Everyone has the duty to respect the right of others to goods such as freedom and wellbeing. One duty has priority over another when it is more necessary for the human action. For example, in the above case, the duty to protect the other person from serious harm is more necessary than the duty to respect the client's privacy or confidentiality.

3. The rules regulating interactions between people can, in some cases, cancel out the duty of not restricting other people. Put another way, in some cases (e.g. to prevent very serious harm), it is justified to interfere in other people's freedom. In contrast, in other situations that are not so serious, any other kinds of coercions of freedom have to be agreed socially and democratically.

Reamer (1999:72) took the moral philosophy of Gewirth as a basis to be applied to social work. As he himself states, one of the motives for doing so is that he sees a clear parallel between the »basic« goods that Gewirth refers to and social work as a profession in defence of more vulnerable people. Reamer (1999:72-75) specified six lines of action to help social workers make a decision when presented with duties in conflict. The lines of action are as follows:

1. Rules against basic harm to an individual's survival take precedence over rules against harms such as lying or revealing confidential information or threats to »additive« goods; such as education, wealth, etc.

In other words, social workers can break these last rules if by doing so they are defending some basic good of a person. Put another way and by way of example, social workers can disclose certain information if by doing so they succeed in protecting a person from being violently attacked.

2. An individual's right to basic wellbeing takes precedence over another individual's right to self-determination.

This means that, although a person's right to self-determination is highly important, this freedom is limited by the right of other persons to their basic wellbeing. For example, the social worker may interfere in the freedom and decisions of parents in the event that those decisions are harming the wellbeing of their children.

3. An individual's right to self-determination takes precedence over his or her right to basic wellbeing.

In our opinion, of Reamer's six rules, this is a fervent defence of individual freedom, as, for example, if a person had a self-destructive behaviour, the social worker would allow it, because that person has freely and consciously decided on it (provided, of course, that this self-destructive behaviour was not harming the wellbeing

of other persons). It would, therefore, allow for that person to harm themselves (provided it did not harm others).

4. The obligation to obey laws, rules and regulations to which one has voluntarily and freely consented ordinarily overrides one's right to engage voluntarily and freely in a manner that conflicts with these laws and rules.

This means that, for example, a social worker who voluntarily commits to obeying the regulations of an institution should not deliberately infringe those regulations.

5. Individuals' rights to well-being may override laws, rules and regulations in cases of conflict.

Unlike the previous course of action, here Reamer postulates that the obligation of obeying laws, rules and regulations is not absolute, but rather has limitations, which means that in some circumstances it can be justified to break those rules. For example, if the director of an institution ordered to the social worker to do something against a client to harm him.

6. The obligation to prevent basic harms and to promote public goods such as housing, education and public assistance overrides the right to complete control over one's property.

This is probably the rule that most directly affects the concern for all persons (particularly those most disadvantaged) to have those basic needs of housing, education and public assistance covered. The right to cover those needs would be above the right to individual property and would justify the existence of certain rates or taxes.

Reamer himself recognises that with these six lines of action not all possible ethical dilemmas will be resolved, but at least they are tools that are useful in ethical decision making in social work. In these processes, Reamer (1999: 76-77) recommended taking the following steps:

I. Identify the ethical issues, including the social work values and duties that conflict.

II. Identify the individuals, groups and organisations that are likely to be affected by the ethical decision.

III. Tentatively identify all possible courses of action and the participants involved in each, along with possible benefits and risks for each.

IV. Examine the reasons in favour of and against each course of action, considering the relevance of: a) ethical theories, principles and lines of action; b) codes of ethics and legal principles; c) theory and principles of social work; d) personal values (including religious, cultural, ethnic and political ideology values), particularly those in conflict with one's own values.

V. Consult with other colleagues and experts (supervisors, lawyers, specialists in ethics, etc.).

VI. Make the decision and document the process that led us to take it.

VII. Monitor, asses and document the decision.

Despite setting out these specific steps for ethical decision making in social work, Reamer warns of the complexity of this task, by which we do not have to wait for the decision making to be completely clear and unequivocal. Furthermore, every social worker will have their own ethical perspective that they identify with more, their own experience influencing them, etc. For that reason, in short, what matters most is one's own decision making.

The methodology proposed by Reamer was felt to be appropriate for inclusion in this section because, although he does not postulate a specific hierarchy between ethical principles, he does suggest six lines of action through which various priorities are established: achieving basic goods, the priority of these basic goods over respect for confidentiality, the priority of self-determination over the right to wellbeing of the actual subject, etc.

With Reamer´s proposal we finish this brief exposition of the methodologies that propose some types of hierarchies or priorities between ethical principles. The next section describes other methodologies of ethical decision making that do not establish specific hierarchies.

METHODOLOGIES THAT DO NOT PROPOSE A HIERARCHY BETWEEN ETHICAL PRINCIPLES

This second group focuses specifically on the ETHIC model (2000), the Levy paradigm (1973; 1976), Kenyon's model (1998), the integrative transcultural model by García et al. (2003), and the inclusive model by Chenoweth and McAuliffe (2005).

The ETHIC model by Elaine Congress

The method proposed by Elaine P. Congress, a member of the »International Ethics Committee of the International Federation of Social Workers« (IFSW) and professor at the »Fordham University School of Social Work« (New York, USA), uses as a basis the values inherent to social work, its code of ethics, and the specific context in which each case originates. His approach is based on the two philosophical traditions most widely regarded by social work: the deontological (Kantian) tradition and the teleological (utilitarian) tradition. For the first, client confidentiality and self-determination are particularly relevant, whereas for the second, the consequ-

ences of their actions have greater relevance. Thus, the ETHIC model is designed to be a useful tool by which ethical decisions can be made quickly and effectively.

This model takes its name (ETHIC) from the initials of the steps that Congress (2000: 10) proposed should be followed in ethical decision making: »The first step (E) consists of examining possible conflicts between relevant personal, societal, agency, client and professional values; the second (T) involves applying the ethical standards of the »National Association of Social Workers« (NASW) to the specific situation, along with the relevant laws and regulations related to it; the third step (H) consists of hypothesising about the possible consequences of different decisions based on analysis of the advantages and drawbacks of each course of action to be taken; the fourth (I) involves identifying who will benefit and who will be harmed in view of social work's commitment to the most vulnerable, although in most cases the choice is between the less unfavourable of the two faced with the lack of good, fully valid options, assuming the consequences for having taken said course of action; and the fifth and last (C) consists of consulting with supervisor, and failing that with other colleagues, about the most ethical choice deemed appropriate, with the opinion of colleagues who sit on ethical committees being of particular relevance.«.

Charles S. Levy's paradigm

Charles S. Levy was an emeritus professor of »Wurzweiler School of Social Work at Yeshiva University« (New York, USA) who formed part of the »National Association of Social Workers« (NASW) and led the working group that drew up the 1979 version of its code of ethics. He was a pioneer in the field of values and ethics in social work.

Even though in his work (Levy, 1973, 1976; Levy and Slavin, 1993) recognises the inherent limits of the code of ethics, as it does not always provide solutions to the specific problems arising in each case, he considers that the ethical criterion is fundamental in the practice of social work.

Thus, in ethical decision making, as well as considering factors such as professional functions and goals, observing and interpreting the information gathered, and so on, Levy grants particular relevance and credibility to the ethical criterion to evaluate social workers' actions and decisions, the ethical principles that social work deals with, the analyse of the facts before intervening, the ability to anticipate possible consequences in each case, and the ethical codes of reference. Despite everything, he recognises that any such codes of ethics are highly imprecise, which is one of the reasons for proposing a paradigm consisting of six different steps to guide social workers in their ethical decision making.

The purpose of the following six steps is to analyse past, present and future ethical questions and their consequences on people and institutions alike: the first step consists of determining which ethical principles are applicable to the circumstance and the specific person or persons; the second involves justifying the order of priorities among the ethical principles, and to which people they apply; the third consists of anticipating risks and possible consequences when making ethical judgements; in fourth place, it proposes exploring other considerations or evaluations (if there are any) that may be sufficiently convincing to be chosen instead of the ethical principles; in fifth place, the paradigm proposes projecting the needs and precautions to be taken with regard to the consequences of any ethical actions; and finally, the sixth step involves evaluating the ethical actions and decisions in the context of ethical and professional responsibility.

Patricia Kenyon's model

In her book, »What would you do? An ethical case workbook for Human Service Professionals«, Patricia Kenyon (1998) presented an interesting guide to ethical decision making based on the Code of Ethics of the »National Organization for Human Service Education« (NOHSE). This is a book with several practical cases aimed at students and professionals who work to improve the quality of life of people and communities in areas such as mental health, disability, family violence, the elderly, etc.

Kenyon's model is created by taking into account the perspectives of several social intervention professionals (Bond, 1993; Corey, Corey and Callanan, 1998; Kentsmith, Salladay and Miya, 1986; Levy, 1993, etc.) and proposes ten steps with a series of indications and questions (Kenyon, 1996:17):

1. Describe the issue or ethical dilemma:
   - Who is involved? What is their involvement?
   - Whose dilemma is it?
   - What implications are there? What risks are there?
   - What are the relevant situational features?
   - What type of issue is it?
2. Consider ethical and legal aspects:
   - Consider all available ethical guidelines and legal standards.
   - Identify your own personal values relevant to the issue.
   - Identify societal or community values relevant to the issue.
   - Identify relevant professional standards.
   - Identify relevant laws and regulations.
   - Apply these guidelines.

3. Examine any conflicts:
   - Describe the conflicts you are experiencing internally.
   - Describe the conflicts you are experiencing that are external (involving us, clients, supervisor, professional, etc.).
   - Decide which of these conflicts are less important (whether the external takes precedence over the internal, whether you can minimise any of them…).
4. Resolve the conflicts, seeking assistance with your decision if needed:
   - Consult with other colleagues, experts or supervisors.
   - Review relevant professional literature.
   - Seek guidance from professional organisations or ethics committees.
5. Generate action alternatives.
6. Examine and evaluate the action alternatives (trying to prioritise between alternatives):
   - Consider the client's and all other participants' preferences based on a full understanding of their values and ethical beliefs (e.g. client autonomy).
   - Eliminate alternatives that are inconsistent with the client's significant others' values and beliefs (don't try to impose your own values).
   - Eliminate alternatives that are inconsistent with other relevant guidelines.
   - Eliminate alternatives for which there are no resources or support (be realistic).
   - Eliminate action alternatives that don't pass tests based on the ethical principles of universality, publicity and justice.
   - With the aim of assisting in this step, P. Kenyon includes the following questions on universality: Is the action applicable to everyone in similar situations (including yourself)? Would you recommend other professionals act this way? Would you approve if a colleague did so?
   - With regard to publicity, she provides the following: Is the action based on ethical standards that are recognised by everyone involved? Could you explain that action to your colleagues or in public? Would they accept that explanation?
   - And with regard to justice: Does the action treat people fairly? Would you do the same with other clients in a similar situation? Would you do the same if the client were well known or influential?
   - Anticipate any possible consequences of the remaining acceptable alternatives (in the long and short term, definite, probable, improbable, etc.).

- Prioritise the acceptable remaining alternatives.
- To assist in this step, Kenyon (1999: 19) includes the questions proposed by Loewenberg & Dolgoff (1996: 61): Which of the alternative ethical actions will protect to the greatest extent possible your client's rights and welfare as well as the rights and welfare of others? Which alternative action will protect to the greatest extent possible society's rights and interests? What can you do to minimise any conflicts among protecting the rights and welfare of clients, society, others, etc.? Which alternative action will result in your doing the "least harm" possible?

7. Select and evaluate the preferred action (best course of action):
   - Especially if we have not chosen the action that was in first place, we have to evaluate our decision, asking ourselves if we are being influenced by some factor that we would not have recognised, or if there is something we should reconsider.
8. Plan the action: Develop and implement a plan of action.
9. Assess the result of the action you have taken:
   - Were the results as expected? Do you still think that was the best decision?
10. Examine the consequences / implications:
    - What have you learned from the process and its results? What implications does it have for future ethical decision-making processes?

We agree with Kenyon on the importance of acquiring a certain degree of practice in ethical decision making, beginning with simpler situations, and then increasing their complexity. It is with such an aim this proposal makes decision making a step-by-step process. It is not a case of learning the steps by memory, but rather of interiorising them and acquiring a certain skill in being able to apply them to increasingly complex situations. It is about providing resources for professionals, giving them tools so they can resolve the conflicts that they have to deal with more easily.

Transcultural integrative model by García et al.

In the field of psychological assessment, there are several interesting studies on decision-making processes, as well as certain ethical questions involved in these processes. Among these proposals is the integrative model by Tarvydas (1998), so called because it analyses ethical principles, but it combines them with clients' beliefs and experiences, thus adopting a model based on the importance of the

virtues of the evaluators. Among these virtues, Tarvydas emphasises reflection, attention to the context, weighing up and collaboration (Bowles et al., 2006).

García et al. (2003) took up the proposal by Tarvydas and other authors (Cottone, 2001; Davis, 1997) and add respect for cultural diversity as another fundamental element in ethical decision making, thus proposing an integrative transcultural model. Bowles et al. (2006) summarise the four steps of this model as follows: 1) firstly, interpret the situation, being particularly sensitive to all cultural identities involved; 2) formulate an ethical decision, but reviewing; faced with all the cultural perspectives of the people involved in that situation; 3) reflect on the specific contextual, cultural, organisational aspects, among others, and discard any other aspects that may be influencing the social worker's decision making; and 4) plan and implement the action, anticipating any possible barriers that might be an obstacle.

In short, this model takes into account the different ethical perspectives of the people involved, looks for dialogue and collaboration between parties, and stresses the importance of professional virtues. However, it also places cultural diversity as a fundamental pillar in ethical decision-making processes. As we know, respect for cultural diversity is a fundamental element of social work; therefore, although this is rather general model that has been applied to psychological evaluation, we feel it will be useful and applicable to social work.

The inclusive model by Lesley Chenoweth and Donna McAuliffe

Lesley Chenoweth and Donna McAuliffe are professors of social work at the »School of Human Services and Social Work«, Griffith University, Australia. Both have more than 20 years of professional experience, Chenoweth in academia and McAuliffe as a social worker, although the current focus of their research is on professional ethics.

These authors propose an ethical decision-making model that they call the inclusive model. Graphically, Chenoweth and McAuliffe draw a circle, and in the middle place four fundamental aspects for ethical practice: responsibility, cultural sensitivity, consultation and critical reflection. These aspects are surrounded by various steps forming the circle: define the ethical dilemma, look for information, think of alternatives in conflict, carry out critical analysis, etc. These steps are not presented in linear form, but rather as interrelated. This means that it is not about a sequence, going from step to step, but rather can be mechanisms to go to and return from, where the problem being considered needs to be redefined, for example.

Just as the proposal by Tarvydas was a linear proposal that indicated several successive steps to follow, the inclusive model is circular rather than linear. This is a

model in which the different aspects of ethical reflection are interrelated. This peculiarity breaks with the large majority of ethical decision-making models, which traditional propose several steps or stages to follow in a linear fashion. This model also emphasises the importance of professional responsibility in decision making.

DISCUSSION

This article presents two groups of methodologies for resolving ethical dilemmas, which are a reflection of two traditionally opposed perspectives from the origins of philosophical thought: the universalist (what some call »objectivist«) approach, and what others call the »relativist« approach. However, in our opinion, this division between »objectivism« and »subjectivism« is not so easy to define, as the classification tends to be made depending on whether or not a series of ethical principles are being postulated that seek to be applied universally in the resolution of ethical dilemmas.

From the models presented in this Article, we believe that some of them have a wider scope in the Social Work domain. More specifically, among the models that we have placed in a hierarchy, we would highlight the deliberative procedure and the aggregate model. Among the models that have not been placed in a hierarchy, we would consider Patricia Kenyon's model to be of the most use.

The proposals for establishing ethical hierarchies would facilitate decision making as, based on concrete principles, we can gain a more concrete perspective from which to approach ethical dilemmas. Then, having identified said principles, it simply remains to apply the proposed hierarchy among them.

However, in our opinion, the models placed in a hierarchy also have their limitations. On the one hand, we limit ourselves when we take some ethical principles (and not others) when analysing ethical conflicts. And on the other hand, implementing a hierarchy tends not to be so automatic.

Consequently, in the specific case of the deliberative model, it is incredibly complicated to analyse the vast diversity of ethical conflicts that we come across in social work interventions under the same prism of just four ethical principles (do no harm, justice, autonomy and wellbeing). On the other hand, the distinction between level 1 and level 2 helps us to make one decision or another in relation to a conflict of principles of different levels, but the decision itself is much more complicated in those cases where the conflict is between principles of the same level (for example, between autonomy and wellbeing).

In the case of the hierarchy proposed by Loewenberg and Dolgoff, it is »simply« (the quote marks are added because clearly this is not an easy process) a case of

choosing from the list of ethical principles those involved in the specific dilemma, so as then see which has priority over the others. The hierarchy proposed is useful in some cases, but we would probably find other cases or situations where a literal application of this hierarchy would not be so satisfactory in terms of ethics.

In regards to the proposal put forward by Reamer it must be stated that although it doesn't establish a concrete hierarchy between ethical principles, it does prioritise between property and rights which are intimately linked to ethical principles such as that of self-determination or wellbeing. We could share some of the lines of action but it is undoubtedly a useful proposal that is specifically thought out for the purposes of Social Work.

In any case, we have to recognise the immense difficulty in defining a hierarchy between ethical principles that are universally applicable to any kind of ethical dilemma. Accordingly, we share the opinion of D. Harrington and R. Dolgoff, who, years after the publication of the hierarchical proposal among ethical principles by Loewenberg and Dolgoff, state: »we are not suggesting that there is a correct hierarchy of ethical principles or even that there should be an agreement on such a hierarchy, but rather, that it would be useful to consider the implications of different priorities« (Harrington & Dolgoff, 2008:193). We do not wish in any way to take away from the importance of ethical principles, as we recognise that they are a fundamental aspect of ethical decision making. We would merely like to add that ethical principles are necessary but not enough in these kinds of decision making processes.

The difficulty that we recognise when finding a universal hierarchy of ethical principles does not mean that we are fully inclined towards the completely relativist posture, but rather that we simply also wish to point out that in ethical decision making, as well as ethical principles, other factors also need to be taken into account, such as values, professional skills and virtues, responsibility and cultural diversity, among others. In short, the specific circumstances of the case have to be analysed. It would even be better to think about a decision-making process that were not merely linear, but which (as proposed with the inclusive model, for example) is rather circular, with the possibility of redefining the problem again.

CONCLUSION

With regard to their specific usefulness for professional social work interventions, in our opinion some of the models presented here (specifically the ETHIC, Levy's paradigm, the integrative transcultural and the inclusive models) are proposals that are perhaps too general for ethical decision making. In contrast, the aggregate model proposed by P. Kenyon is a lot more useful. It is a reflexive model

that, through the many questions it forces us to answer, allows us to step back from each ethical dilemma and to analyse them more profoundly.

It is also important to highlight the proposal by Reamer, as although it does not establish a specific hierarchy among ethical principles, it does propose priorities between goods and rights, which, in essence, are closely linked to ethical principles such as self-determination or wellbeing. Some of them may or may not share their lines of action, but it is undoubtedly a useful proposal, which is also designed specifically for social work.

In short, whichever methodology is chosen for ethical decision making, what is important is for it to be followed by a process of profound ethical reflection, a deliberative, reasoned, justified and well-argued process. It needs to be a process that takes deontological codes and ethical principles into account, as well as professional duties, and one that analyses the advantages and drawbacks of each course of action. However, it should also be a process in which professional virtues and skills are applied, such as prudence, »good judgement«, »practical wisdom« and even what some authors call »moral courage« (Bowles et al., 2006: 210). These all form part of what could be called the »moral character« of a good professional, and which also play an important role in ethical decision making.

In conclusion, the best tool with which to improve ethical decision-making processes is to develop ethical reflection, but also to cultivate moral character. In this way, although we may never be sure to have chosen the »right« response to an ethical dilemma, we will at least feel more secure when dealing with them and able to make better ethical decisions.

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METODOLOGIJE ZA ETIČKO ODLUČIVANJE U SOCIJALNOM RADU[6]

SAŽETAK

Socijalni se radnici svakodnevno susreću s mnogim etičkim dilemama, ali nemaju uvijek alate kojima bi ih riješili. Naveli smo neke od glavnih metodologija etičkog odlučivanja koje se primjenjuju u socijalnom radu. Podijeljene su u dvije skupine: one koje uspostavljaju hijerarhiju etičkih načela i one koje među načelima ne uspostavljaju posebnu hijerarhiju. Rad smo zaključili jezgrovitom ocjenom tih metodologija i nekim njihovim ključnim značajkama, s ciljem da socijalnim radnicima pružimo set alata za donošenje etičkih odluka.

Ključne riječi: etičko odlučivanje, hijerarhija etičkih načela, etička refleksija, alati za etičko odlučivanje u socijalnom radu.

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