

Social Work: An Authority-Based Profession

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Although social work is flourishing by many outward signs, such as the increased number of schools of social work, it is argued that this growth has not honored obligations in our code of ethics, for example to inform clients, to empower them, and to offer competent services. A great disconnect continues between what we say we do and value and what we actually do. Change in this pattern will be encouraged by increased client access to information over the Internet and the evidence-based practice movement, which encourages transparency of what is done and to what effect, and involvement of clients as informed participants in decisions that affect their lives.

Social work claims to be a profession providing special expertise to address certain kinds of problems. By many outward signs, the profession is flourishing. Social workers are the main providers of mental health services in the United States. Schools of social work have increased in number. Research centers have been established. I have no doubt that social workers provide emotional solace and material help to millions of clients. The problem is that social work claims to be a profession providing special expertise to those trained. The professional accoutrements of licenses and credentials are based on the alleged possession of unique skills and knowledge. Yet today, as during the birth of the profession, there is no evidence that social workers (or other professionals such as psychologists) possess unique knowledge and skills that produce better results compared to nonprofessionals (e.g., see Christiansen & Jacobson, 1994; Dawes, 1994).

What to do? One course of action that has been pursued is to appeal to faith and trust, to present good intentions as evidence of good outcomes. A second is to pretend to be scientific while being pseudoscientific (to include the trappings of science without the substance [Bunge, 1984]). The "trust me" group with its appeal to faith views critical testing of claims as unnecessary since

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“we know best.” The pseudoscience set says, “We have done or are doing it, and we find that social work is effective, and so we need more social workers.” Arrogance (unwarranted pride and self-assurance) seems to be a fellow traveler of appeals to trust and pseudoscience. Both approaches rely on authoritarian (e.g., consensus, status) rather than evidentiary criteria, revealing social work to be an authority-based profession. This, together with the justification approach to knowledge undergirding it (in which we seek to confirm our views rather than to falsify them via rigorous tests as in critical rationalism, Popper, 1963/1972) explains social work literature that is rife with claims unaccompanied by evidence and the ignoring or misrepresentation of competing views. My argument also applies to other helping professions. For example, evidence-based medicine developed as an alternative to authority-based practice. Hallmarks of evidence-based practice include (a) converting information needs into answerable questions (often a difficult step), (b) tracking down with maximum efficiency the best evidence with which to answer these questions, (c) critically appraising that evidence for its validity and usefulness, (d) deciding whether research findings (if any) apply to a particular client, (e) involving clients as informed participants and considering their values and expectations, (f) taking action based on the best evidence, and (g) evaluating the outcome (Gray, 1997; Sackett, Richardson, Rosenberg, & Haynes, 1997). Evidence-based practice requires an atmosphere in which critical appraisal of claims flourishes and in which clients are involved as informed participants. It differs from empirical social work practice in a number of ways, including the rigor of critical appraisal used to review practice-related research, the exhaustiveness and clarity of description of search methods used to locate relevant literature, and the measured (in contrast to inflated) conclusions of reviews (e.g., see Oxman & Guyatt, 1993).

Maintaining the illusion that social work is based on specialized knowledge of unique value in achieving certain outcomes, when it actually rests on authority, requires a variety of stratagems, both omissions and commissions (Gambrill, 1999b). Omissions are reflected in ignoring (censoring) information and views that threaten social work's claim to special expertise, such as data describing the lack of association between training, licensing, experience, and outcome (e.g., see Dawes, 1994) and research documenting harm in the name of helping (e.g., see Blenkner, Bloom, & Nielsen, 1971). Other omissions include avoiding critical appraisal (e.g., choosing research methods that cannot critically test questions posed) resulting in large unexplored gaps between what is claimed and what is demonstrated (e.g., what percentage of clients are informed) and hiding coercion in the name of helping (e.g., see Gomory, 1999). Negative reactions to criticism such as hostility also reflect an authoritarian base. Criticism is out of place when faith is the basis

of a profession. Penetrating critiques of accepted views (e.g., of mental illness [Boyle, 1990; Szasz, 1987, 1994]) are ignored or dismissed rather than carefully read, accurately presented, and carefully critiqued. I do not mean that there is a conspiracy; influences on our behavior are much more pervasive and subtle, as Ellul (1965) suggests in his discussion of sociological propaganda. Its function is to encourage "action, adherence, and participation—with as little thought as possible" (p. 180). Nor does hiding knowledge have to occur from a conscious decision; it may occur through ignorance.

Propaganda methods such as glittering generalizations are used to persuade people that social workers possess special skills, values, and knowledge of unique value in achieving certain outcomes. Consider the prevalence in social work, psychology, and psychiatry of pseudoscience, pseudocriticism (look-alikes for critical appraisal such as *ad hominem* attacks on purveyors of disliked views) and pseudo inquiry (e.g., conducting research that cannot critically test questions posed). Forwarding false knowledge (beliefs that are not true and that are not questioned) is yet another indicator of the authoritarian base of social work, as is selecting practice methods based on grounds such as consensus and what "the experts" say. Munz (1985) argues that false knowledge serves the function of preserving social bonds. However, because criticism is prohibited in groups characterized by false knowledge, knowledge cannot grow because criticism is essential for its growth (Popper, 1963/1972).

There is an increasing reliance on ceremonies and rituals; this is probably a natural development in authority-based professions (e.g., giving a client a label in lieu of conducting an assessment or evaluating students by use of codes that refer to vague descriptions of competencies). Secondhand, authority-based goods are imported. We have allowed in the Trojan horse of psychiatric ideology, which encourages a fragmented and thus unempathic approach to clients in its relentless medicalization of problems-in-living as mental illness and which ignores penetrating critiques and counterevidence (e.g., see Boyle, 1990; Kirk & Kutchins, 1992; Kutchins & Kirk, 1997; Szasz, 1987). At the same time, we often refuse entry to knowledge regarding the role of environmental contingencies related to attaining valued outcomes and that would help us to make evidence-based decisions about the distribution of scarce resources (e.g., literature on applied behavior analysis). Ehrenreich (1985) highlights the importance of focusing "social worker's practical activities in ways that would be nonthreatening to" its patrons, such as state legislatures, foundations, philanthropists, and other sources of prestige, funds, and institutional powers (p. 60). He suggests that the psychiatric approach is ideally suited to moving away from a radical sociological critique of the causes of social problems toward the more limited environments of

personal interiors (e.g., client's thoughts) and the influence of the nuclear family. And, this could be done in the name of science, lending an aura of credibility.

Language is used to obscure rather than to enlighten, as when competencies based on consensus (asking people for their opinions) are described as empirical. The embrace of relativism by many social work academics (in their work, not in their personal lives) results in a reliance on authority. (Our data show that social workers want their physicians to rely on scientific criteria when making decisions about potentially serious medical problems, but rely on authority-based criteria such as tradition when making decisions about clients [Gambrill & Gibbs, 1999]). If there are no means by which to tell what is accurate and what is not, if all methods are equally effective, the vacuum is filled by an elite who are powerful enough to say what is and what is not (Gellner, 1992). The "many ways of knowing" rhetoric prevents the critical appraisal of practice-related claims and protects social work from making its work and its consequences transparent.

Negative consequences of reliance on authority include misinformed and uninformed students and clients in direct violation of our own code of ethics. Misleading clients harms by not involving them as informed decision makers, by misleading them about the causes of their concerns and options to remove them, and by wasting money on harmful and ineffective services when we could be critically appraising the effectiveness of services and funding those found to be effective. Pursuit of vague aims distracts social work from tackling avoidable miseries that confront clients and seeing if they can be minimized. Agencies are underresourced or overresourced because decisions about program funding are not evidence-tested.

I see a profession that has not handled honestly the conflicting hopes pinned on it. No doubt this is a Herculean task, but we could do a better job. None of these points are new, which renders the failure to address them more damaging. Too much time is spent trying to create an illusion that social work is doing the work it says it does rather than clearly describing what is done to what effect, and closing gaps between what is claimed and what is achieved. I see a field that daily forgoes opportunities to make transparent (clearly describe) what social workers do and what outcomes they attain and instead engages in wishful thinking that saying so makes it so. I see a field that grasps at short-term incentives (e.g., funds for research projects that cannot critically test questions posed) forgoing opportunities to critically test questions that affect the lives of clients. We ignore knowledge that could help us to help our clients and promote untested beliefs that may diminish clients' opportunities to deal with the uncertainties in their lives. Those who were wary of the push to professionalize social work were right to worry. The main goal of

professional organizations is to grow (e.g., see Friedson, 1986). Austin (1996) suggests that “the professional association is essentially a trade association driven by the practical self-interests of those social workers who are prepared to pay the costs of having effective representation in the public arena” (p. 23). He notes that “the actual resources of the association have been heavily invested in carving out, protecting, and expanding the domain of private practice in social work” (p. 23). Political, social, and economic interests successfully compete with moves to fully inform clients and to draw on practice-related research findings in everyday work with clients. There is a lack of willingness to say no to professional growth, even when this may be at the expense of clients (e.g., resist diffusion of untested methods that may do more harm than good). There has been an unwillingness to decrease the gap between rhetoric about empowering clients and doing so by drawing on research findings that contribute to attaining valued outcomes and involving clients as informed participants. In so doing, we also lose opportunities to empower professionals as informed helpers.

Professions such as psychiatry, psychology, and social work have been successful in bamboozling the public and those who fund service programs into believing that professionals offer unique services that require specialized training and experience. The armentarium of propaganda stratagems developed to maintain this view is fascinating in its variety and impressive in its success. It is its own little orchestra, with the violins saying “trust us,” the brass saying “we rigorously appraise claims and teach critical thinking,” the drums and oboes saying “be careful what you will lose if you limit us,” and the conductor, sociological propaganda and its reflection in professional organizations and academic social work, influencing all. The recipe for bamboozlement includes (a) a fine sounding (but unimplemented) code of ethics, (b) lots of discussion of ethical issues but little investigation of related behaviors (e.g., percentage of instances in which clients are fully informed), (c) reliance on methods of investigation that obscure rather than reveal what is happening (e.g., what social workers do and to what effect), (d) advocacy of a relativistic view that all ways of knowing are equal, (e) reliance on the authority of an elite in the vacuum created by (c) and (d) (Gellner, 1992), (f) propagandistic strategies designed to maintain the status quo (e.g., distortion of disliked views, censorship of counterevidence to preferred views), and (g) hyperbole (e.g., inflated claims) in place of an honest description of services and their outcomes.

This bamboozlement serves important functions for the profession (e.g., maintaining and expanding turf), for professionals (e.g., freedom to do whatever they want without regard for evidentiary criteria), and for clients (e.g., removing responsibility for personal conduct, muting the uncertainties of life

[see Marris, 1996], helping significant others to rid themselves of troubling behavior by institutionalizing or drugging the troubled or troubling). Professional organizations and academic social workers have manned the front lines in carrying off this hoax via a variety of propaganda stratagems including inflated claims of effectiveness. Many match society-wide propaganda, which maintains and extends our therapeutic culture in which moral judgments and paternalism are masked in pseudoscientific jargon about what is healthy or unhealthy (e.g., see McCormick, 1996). Those who raise questions such as What is a mental disorder? are drowned out in the constant chatter of psychiatric word magic. Those who ask, Does this service do more good than harm? are often labeled as troublemakers.

The contingencies that influence academic social workers' beliefs and actions provide a formidable obstacle to shifting from an authority-based profession to an evidence-based one characterized by honest brokering of knowledge and ignorance. Although housed in universities that have critical appraisal as a key responsibility, academics often ignore this role (Bartley, 1990; Veblen, 1918/1993). If, as Ellul (1965) suggests, intellectuals are especially vulnerable to sociological propaganda (e.g., because they read reams of secondary sources), this does not bode well for clients, nor does the increasingly business-like culture of universities, with its pressure to bring in funds no matter what the likelihood that the proposed efforts will contribute to knowledge and better services to clients.

STRENGTHS

I suspect that social workers do help lots of people. I have to say *suspect* because social work continues to rely on claims of success unaccompanied by critical appraisal of most services. Another strength is a code of ethics that calls on social workers to inform clients, to draw on practice-related research findings, and to provide competent services to clients. And the profession draws many bright, empathic individuals. The evidence-based practice movement and the increased availability, to both clients and professionals, of practice-related databases on the Internet will encourage a move away from an authority-based profession.

Guidelines for offering social work students an education rather than an indoctrination by including content now omitted (such as different views of knowledge and how it can be gained) and avoiding stratagems that discourage learning and evidence-based practice (e.g., overloading students with fragmented bits and pieces of information, omitting evidence that contradicts favored views, separating research and practice courses) are another strength.

Students would understand different approaches to knowledge development and their implications for clients. They would understand that although a given theory may have survived more rigorous tests than another, it may be totally false. This would discourage misinforming clients about the evidentiary status of claims. We could prepare students who have the skills required to be evidence-based practitioners; they could and would ask answerable questions related to important decisions, identify information needed to answer these questions, track down with maximal efficiency the best evidence with which to answer the questions, critically appraise this evidence for its validity and usefulness (applicability to a particular client), involve clients as informed participants, apply the results of this appraisal, and evaluate the outcome. When they find no evidence, they would honor their professional code of ethics by so informing clients and explaining the theoretical rationale for their recommendations (in language clients can understand), which would be selected based on compatibility with research findings about behavior. They would understand the origins of the helping professions and the selling job this entailed, together with current versions of this (e.g., hucksterism and other forms of professional propaganda). They would have a deep understanding of the role of social deviance in society and the many ways this has been viewed over time and thus understand the consensual nature of current definitions of problems. This would help them to identify pseudoscience in the guise of science (e.g., the *Diagnostic and Statistical Manual's* classification system), and it would discourage a focus on alleged deficiencies of clients rather than on assets, both personal and environmental. A deep knowledge of behavioral principles would encourage students to think contextually about problems and their possibilities. Skills in applying them would provide a promising technology for expanding clients' options.

IN CONCLUSION

I don't see social work following a philosophy of practice geared to clients' or taxpayers' interests (for a philosophy of practice that I think is so oriented, see Gambrell, 1997). Rather, I see a deep thread of insincerity in our profession. Many are insincere in their efforts to help clients, if, by *sincere*, we mean caring enough to draw on practice-related research findings, carefully evaluate the effects of services, and involve clients as informed participants. I see little hope that the profession will change in a timely manner from within. I see more hope that it will be forced to "'fess up" and clean up by increased involvement of clients in advocating for their right to informed consent and effective services. The evidence-based practice movement and

its emphasis on transparency (clearly describing services and outcomes), increasing accessibility of practice-related research findings to both clients and professionals (e.g., Cochrane Collaboration databases), and involvement of clients in decisions, will encourage a move away from an authority-based profession (Gambrill, 1999a). Good intentions and pseudoscience are not ethical grounds on which to rely. They do not protect the rights of clients or concerns of taxpayers; nor do they honor the values of social workers who are sincerely interested in discovering whether they do more good than harm. Because we have relied on these appeals, most of the claims we make have no evidentiary base. Excuses used for not honoring ethical guidelines include constraints by bureaucracies in which social workers are employed: "We must go along with what they want." We cannot claim that we are professionals with special values, knowledge, and skills, who honor a code of ethics, and then jettison these claims when we encounter barriers. Certainly, there are and will be strains. Just as certainly, there are routes and ethical mandates to advocate for policies and practices compatible with our code of ethics. If there is no evidence that services claimed to be helpful are helpful, we should get busy and critically test these claims.

Just as the examined life may be better, so may the examined profession—especially for clients. The views promoted in social work (e.g., that there is such a thing as mental illness, that HIV causes AIDS) are reflected in public discourse. This does not mean these views are accurate (e.g., see Boyle, 1990; Duesberg & Raskin, 1998; *Rethinking AIDS*, Szasz, 1987). If we are subject to society-wide propaganda that perpetuates certain actions and beliefs, we each must make a great effort to pop our way out of the balloon of this influence to see what's out there.

Only a clear focus on clients' interests as reflected in our code of ethics will provide the reason and courage to critically appraise what is done to what effect, involve clients as informed participants, educate rather than indoctrinate students, blow the whistle on bogus claims about what works that may harm rather than help clients, and confront potential negative consequences such as intimidation. We should "fess up" in relation to the basis of our claims to professional status and get busy doing the work that relates to this. This will require a shift from a justification approach to knowledge, in which we seek support for our views, to a falsification approach (critical rationalism), in which we seek to falsify our pet views by critically testing them (Popper, 1963/1972). In that way, we may gradually learn more about how to attain valued outcomes. And we should let the chips fall where they may. We owe this to our clients. "Professionalism must accept the judgment of its own high standards . . . if professionalism does not measure up, or conflicts with

these standards, it should be discarded without regret" (Ehrenreich, 1985, p. 230).

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