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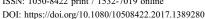
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# The Politics of Ethics in Human Services: Dueling Discourses

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How ethics in human services is a political activity, shaping social relationships, is explored through the examination of two opposing discourses, a principle-based and a situated/relational narrative. Factors such as neo-liberalism, managerialism, and the risk-aversive society give a context for the reasons that the principle-based discourse has been the predominant influence, and what interests are served by this trope taking center stage. A delineation and critique of both perspectives are provided, including an explanation of the epistemological underpinnings of these discourses. The piece ends with what needs to be done to strengthen ethics.

Keywords: politics, ethics, epistemology, discourse, human services

The appraisal of ethical conduct is a key activity in the helping professions. Ethics refers to "the reflective inquiry into the way that people feel, think and behave with a view to formulating norms of conduct and the evaluation of character" (Webb, 2006, pp. 13–14). This is a central function for practitioners who must grapple with what constitutes ethical behavior for those they serve, in their own work and for the norms of society. However, determining how workers will evaluate what is good for clients, ethical practice for practitioners, and the goals for a future society are political endeavors. When using the word *political*, I am denoting strategies that are intended to seek power, to employ power to influence actions in a variety of arenas, and to gain acceptance of certain ways of operating in a society (Payne, 2005).

According to Foucault, one way that power circulates is through discourse. He used the term to refer to structures of knowledge that allow some objects to be known, understood, and talked about, while restricting other ways of constructing that knowledge (Foucault, 1972). Discourses are ways we understand reality through the use of language that then influence our actions (Healy, 2005). Discourses make some ways of understanding the social world seem natural and the "truth." In addition, power involves the attempts to make certain discourses "stick" and become hegemonic, determining the ideologies that will hold sway in a particular culture (Wetherell, 1998). They become mechanisms by which individuals govern themselves and others (Hunt, 2003).

There are multiple approaches to ethics in the helping professions, such as those based on principle, virtue, care, discourse, and rights, as just some of the distinctions (Banks, 2004; Gray & Webb, 2010).

Although they have generally been adapted from the theorizing of moral philosophers, for example, by Kant's deontology or the utilitarianism of Bentham and Mill, Banks (2004) made a case that due to the need to attend to the complexity of real situations, professional ethics should be viewed as somewhat distinct from these moral theories, which may be rather detached from the problems they are meant to address. Yet despite the plethora of diverse ways of defining and organizing what constitutes these approaches, I believe it is possible to group the models in the helping fields into predominantly two primary discourses about ethics. In social work literature, they have been referred to as a principle-based approach and as situated or relationship-based ethics (Banks, 2004). This article outlines the features of these divergent discourses and considers why elements of a principle-based discourse have taken center stage as the leading view of ethics and have been institutionalized in most helping professions in the Global North.

For any given approach to ethics, it is essential that one ask, Whose voices are represented by that theoretical orientation, and what is their stake in that position becoming dominant? Furthermore, how do the discourses of that orientation shape social relations, especially power and authority (Walker, 1998)? This article explores answers to these questions. In addition, my contention is that the subordinated discourse of ethics, in the situated/relational model, must be incorporated and enhanced in the helping professions' panoply of resources.

#### TWO DISCOURSES

The dominant approach referred to as a principle-based discourse focuses on theories such as deontology and utilitarianism that emphasize universal principles usually outlined in codes of ethics. Walker (1998, p. 53), a moral philosopher, spoke about a theoretical-juridical approach to ethics; although this term is not utilized specifically in human services, it identifies certain central characteristics that are consistent with a principle-based discourse. They are condensed constructions of principles and procedures that can be taught, usually articulated as codes of ethics. They are impartial, impersonal, designed to be applicable across many contexts, and intended to guide action through formulaic processes such as decision-making models. Emphasis is on theory and logical thinking with emotions kept out of the equation. Other theorists have added that a principle-based discourse focuses on justice and duty, with questions centering on what one should do (Banks, 2004). The process is meant to be rational, formal, and deductive (e.g. Congress, 1999; Ford, 2006; Linzer, 1999; Robison & Reeser, 2000; Strom-Gottfried, 2007). Priority is on equality, aiming for fairness through a similar standard for everyone.

The other discourse, sometimes referred to as a situated/relational approach (Banks, 2004), is contextual and dialogical, incorporating difference and emotions. This approach to ethics puts much more emphasis on the specific importance of context, history, and community. It tends to be less top-down, seeking social negotiations and more input from service users, and utilizing processes that are more inductive. There is more focus on equity, rather than equality. Equity refers to recognizing the unequal access to power and privilege of those who are marginalized and transforming the structures that maintain inequities so that all have an equal chance at succeeding, whereas equality refers to providing the same opportunities to all without recognition of structural disadvantage. Emphasis is based on relationships, using narrative and analogy (Walker, 1998). Focus revolves around elements of care (Banks, 2004). More attention is based on the character of the professional with questions centering on how one should live. As a

model, it is less developed but has gained more ground in recent years, with some theoreticians (e.g. Banks, 2011; Bauman, 1993; Clifford & Burke, 2009; Foucault, 1990; Walker, 1998; Weinberg, 2016) believing its utility is of critical importance to the way ethics should be understood in the social professions. Banks (2004) provided a chart that, although using slightly different terms and concepts ("impartial detached" for principle-based and "partial situated" for situated/relational), captures many of the key differences the author is addressing.

#### IDEOLOGICAL UNDERPINNINGS-DUELING EPISTEMOLOGICAL PHILOSOPHIES

Each discourse has a strong ideological bent, with at their core dueling philosophies of epistemology. By dueling, I mean that they are in conflict but also that they represent dual ways of conceptualizing ethics in the helping professions. A principle-based perspective is grounded in a positivist epistemological stance. There is a belief in an objective reality, even if the discovery of it may be illusive (Fraser, Taylor, Jackson, & O'Jack, 1991). Positivists "believe the world is orderly and that how it works follows natural rules that we can come to understand" (Payne, 2005, p. 55). Therefore, the underlying assumption is that through one's ability to use rational methods of discovery, one can be ethical (Webb & McBeath, 1989). Furthermore, individuals can and should make ethical decisions based on purely rational grounds, with objectivity a central goal in the process. It is assumed that these processes can be separated from emotions. Essential to the principle-based discourse is the assumption that that there is a correct answer to ethical queries and that with using clear principles and decision-making procedures we can get to the correct answer. The emphasis is on "what it is right to do" and "obligations" (Taylor, 1989, p. 3). The discourse adopts the premise that principles can be universally applied (Hugman, 2005) and that context is of less importance in the process of decision making. According to this understanding, reason can transcend history, culture, and one's subjectivity. Furthermore, the authority to make ethical determinations is accorded primarily to the experts—what Walker (1998) referred to as a "closed moral community" (p. 71).

Why am I suggesting that the principle-based approach is dominant? Hugman (2005) argued that "the predominant approach of practical ethics in the caring professions has become that of 'principlism'" (p. 10), namely, ethics originating from primary principles. Banks (2011) concurred when she wrote, "In the global North and Western world, the main focus of modern ethics is frequently on principles of conduct or right action" (p. 7). She has done an extensive survey of codes of ethics, and she elaborated on the prominence of codes of ethics and codes of conduct that, for the most part, are expanding in size with each revision, particularly in the areas of standards and rules (p. 8). Hugman (2005) also suggested that three tenets "are the cornerstone of modernist thought" (p. 5) in ethics. They are a belief in reason to understand the world, utilization of objective observation to determine that which is ethical, and the universality of truths for all subjects. Walker (1998), too, in looking at moral theory in the modern world more generally, averred that the theoretical-juridical approach is the "template, the master form, of much twentieth-century ethics" (p. 36).

Alternatively, a situated/relational discourse is based in an interpretivist epistemological stance suggesting that human beings cannot stand outside of the world to be objective (Payne, 2005). According to this discourse, we are involved in recursive processes whereby our very involvement with others influences the study of those relationships and, consequently, our understanding of the world. Knowledge is socially constructed and heavily affected by context.

This approach assumes that we are subjective in our construction and comprehension of knowledge, however much we would like to be unbiased and objective. It includes an epistemological assumption that knowledge and morality are linked not just to rational cognitive processes but to one's affect and intuition as well. It is assumed that ethics is indeterminate and messy, that there is no "right" answer but one must choose from the best of a range of possibilities, all with potential harms (Weinberg, 2016). In the situated/relational discourse, more attention is paid to the political processes by which knowledge is constructed and applied; with whose voices have been legitimized and whose unwarranted; with the assumption that often the knowledge constructed (and what constitutes the ethical) supporting the existing social order, at times to the detriment of equity-seeking groups. It endeavors to expose the issues of ethics, especially processes of marginalization, to a broader segment of society.

#### CRITIQUE OF THE SITUATED/RELATIONAL DISCOURSE

The major critique of the situated/relational trope has been its relativism. Ethical relativism is a doctrine that assumes the morality of an individual's or group's action is governed by the norms of that group (Hyun, 2008). The question is, if there are no universal principles on which to base ethics, are all values equally valid? On this basis, how is one to choose one value over another for ethical decision making? One assumption of this position is that different cultural groups have dissimilar ethical norms and should not be evaluated by the norms of another group. However, we know that what constitutes a culture is not so easily defined or discrete, and furthermore, individuals' membership may be to more than one social group. Cultures also change over time (Hugman, 2014). Nor do all members of a group necessarily agree on norms and ethical standards of their culture. Essentially, ethical relativism could result in the fuzziness of an "anything goes" approach to ethical consideration or a "moral paralysis and an evasion of moral responsibility" (Kiss, 2006, p. 139). Yet, human service workers are mandated to make thorny evaluations so there is the risk that this discourse will not provide adequate support in ethical decision making.

Nonetheless, multiple systems of values do not automatically equate with ethical relativism (Rosenau, 1992). The task is to determine which values are primary to the human enterprise (such as avoidance of murder) and which are secondary, as context laden, but needed to operationalize the primary values (e.g., filial piety; Hugman, 2010). Individuals apply various methods to respond to the concerns of relativism (e.g., Kiss, 2006). But the emphasis here is on the problems with the dominant approach and highlighting the usefulness of the subordinated discourse, so more attention is given to an evaluation of the dominant narrative.

#### CRITIQUE OF THE PRINCIPLE-BASED DISCOURSE

A key vehicle for operationalizing the principle-based model is the development and use of codes of ethics. The intention is that the codes allow for a universal application of principles. However, underpinning this approach is an assumption that everyone should and can be treated the same for an ethical result. This conjecture ignores individuals' history, personal circumstances, and structural constraints (Webb & McBeath, 1989). All discourse has political intents

to influence and exercise power in particular ways, and the helping professions are not immune to these realities. Moreover, the universal principles that underpin the codes are always contestable. Who are the prototypes of "sameness"? One can speculate that norm is based on those who are in power, often excluding those on the margins whose ethics may diverge. For instance, the codes of ethics, on which most countries in the Global North rely, usually have proscriptions against dual relationships, despite recognizing the difficulties of avoiding them in some situations. In particular contexts, such as rural settings and First Nations reserves, dual relationships are not just a given but in fact enhance the likelihood of good quality practice and ethical treatment of service users, putting practitioners in a bind between what is necessary for effective and ethical work and what their professional body demands regarding ethical standards (Weinberg, 2015). Thus the universality of a principle-based discourse is problematic. Healy (2005) argued that "the meaning and practice of all professional activities-indeed all human activities-varies by context" (p. 2).

Preiser and Cilliers (2010) applied complexity theory to notions of ethics in organizations. They suggested that the varying levels of individual, organization, context, and society are so complex as to defy simple right and wrong answers. This is partly because the interactions between levels are "not easily discernable" (p. 266) and the boundaries are "emergent, temporary, fluid ... [and] provisional" (p. 267). Furthermore, what constitutes "good" and "bad" surface only through the interactions between those parts but require a reduction from complexity that will always leave out components that may in fact be important to a full understanding of the phenomenon. Because we cannot step "outside of" (p. 269) the epistemological framework that is applied to ensure objectivity, a provisional understanding of what is ethical is required.

Furthermore, principles, although universal, become manifest only through the enactment of singular acts (Orlie, 1997, p. 151). The emphasis in a principle-based discourse because it is expert driven, individualizes ethics and accentuates dyadic relationships, sometimes hiding from view the broader contextual factors that not only are relevant but also may make something ethically problematic. Considerations such as resource limitations, funding necessities, team dynamics are often viewed as political as opposed to ethical issues, rather than at the very heart of ethical considerations that practitioners must balance in making ethical decisions. Often the assumption in the application of codes is that individuals have choice and can make conscious decisions without sufficient reference to the broader macro factors that may limit or shape the choices available (Clifford & Burke, 2009).

In addition, the principle-based discourse has been viewed as a masculinist approach because it privileges thinking over affect. There is evidence to suggest that humans make ethical decisions in more complex ways than solely relying on reason (Craigie, 2011; Monin, Pizarro, & Beer, 2007). It has been argued that reasons are provided *after* an ethical decision is made, offering the justification for processes that are much more complex and intuitive than a principle-based approach would support (Haidt, 2001). Moreover, some theoreticians understand emotions as both collaborative and cultural, rather than strictly individualized responses to situations (Edwards, 1997) and can signal moral distress (Keinemans, 2015), thus being useful in ethical deliberations. Managing one's emotions is a central feature of professionals' ethics work (Banks, 2016) that is neglected in the principle-based discourse.

One primary strand of the principle-based discourse is Kantian ethics. Webb and McBeath (1989) argued that there is a dishonesty at the heart of this approach to ethics because its language hides an "individual's history, subjectivity and situation" and becomes a "mechanical

application" of universalistic principles (p. 493). It is primarily procedural. They contended that it is an "illusion of moral commitment, under which lie political strategies of power and resistance" (p. 494). Furthermore they identified a paradox, namely, that practitioners who apply this model work with service users to view their own lives as historical and changeable at the same time that these practitioners adopt ahistorical universalistic standards for judgement.

In the modern era, the powers we hold and the distance from understanding the effects of power have never been greater (Bauman, 1993). As practitioners, many people are involved in the decisions that are rendered, making one's ability to control the effects limited. At the same time, multiple barriers constrain the possibilities for acting in ways that match one's values (Weinberg, 2009). Therefore it has been suggested that all of us inevitability engage in harms, not out of malevolence or intention but due to our engagement in social processes. Orlie (1997) referred to this as ethical trespass. She suggested that those who are part of the relations of ruling (such as social workers, counselors, psychologists, etc.) are the most likely to trespass because they are the individuals engaged in normalizing processes (p. 23). Orlie (1997) stated, "Predominant forms of rationality and ethics ... tend to either neglect invisible powers or to understate their normalizing, unethical effects" (p. 141). The author contended that the principlebased discourse epitomizes this danger because rather than it opening the practitioner to question the bases of ethical issues, it can be viewed as providing a means for professionals to arrive at the "correct" answer for ethical dilemmas when true ethical behavior requires both an understanding of the inevitability of harm and the continual questioning of the bases on which ethical decisions are made.

These issues make the principle-based discourse insufficient as the basis upon which professionals must act. Yet that is the discourse that is dominant currently in the helping fields.

#### WHY IS THE PRINCIPLE-BASED DISCOURSE DOMINANT NOW?

#### Modernism, Neoliberalism, and Managerialism

Taylor (1989) has written a compelling text that outlines the historical development of what have become the dominant trends in moral philosophy. Therefore, my intention in this section is to emphasize a few considerations that are particularly relevant for the caring professions currently. With the rise of modernity, and the demise of the church, new political mechanisms were needed to ensure acceptance of the rule of the land. Scientific reason took the place of faith in matters of morality (Bauman, 1993). But "modern governance is dubious" and "inherently unstable ... because no such absolute source is forthcoming" (Orlie, 1997, p. 20). Orlie referred to this situation as the headlessness of modern rule (p. 51), which tends to be subtle, primarily invisible, while taken for granted and accepted as necessary. It results in a situation of authorizing the powers that be and conforming to social rules to ensure social stability (p. 57). It also disconnects individuals from the actions of the body politic and from mass society (p. 135). Consequently, there is a lack of social proximity and three processes result: (a) Ethical dilemmas are disconnected from political processes, (b) ethical questions are shielded from political contestation, and (c) those questions become individualized and private (p. 58).

The privatizing and individualizing processes referred to by Orlie are part of the effects of neo-liberalism sweeping the Global North. Neo-liberalism is both an ideology and a political process that elevates the values of the marketplace above those of all other values, including the importance of the state to look after one's citizens. According to Fourcade and Healy, as cited in Mudge (2008), it is rooted in a "moral project ... that praises 'the moral benefits of a market society' and identifies 'markets as a necessary condition for freedom in other aspects of life" (p. 706). Features of this system include privatizing industries and putting responsibility on individuals rather than on the state for the needs of the populace. Consequently the welfare state has moved to a residual model where the private sector, family, or volunteers are expected to care for the most vulnerable, with government picking up only a small portion of the responsibilities. A reduction in resources is part of this change, with practitioners required to do more with less. Ethical decisions are shaped by economic and practical decisions, often at the risk of one's preferred ethical stance (Weinberg, 2007).

Concomitant with neo-liberalism has been a move to managerialism, discourses that human service work would benefit from using managerial approaches from the for-profit world with its focus on efficiency and the measurement of productivity through evidence-based procedures (Clarke, 2004; Dickens, 2008; Rogowoski, 2011). Modernization has led to an emphasis of a means/ends orientation over a values-based orientation in society (de Ugarte & Martin-Aranaga, 2011). In addition, the legitimacy and credibility of professionals is increasingly questioned, so one assumption of managerialism is that staff must be monitored and evaluated. Measures such as extensive documentation, burgeoning standards (Banks, 2011), and close regulation through targets, audits, and performance indicators are processes designed to manage and scrutinize the work of professionals. Following rules and standards is an integral part of these procedures. The codes of conduct that are often part of codes of ethics, as well as the cognitive and linear approaches that are components of the principle-based discourse, conform to this type of narrative. These mechanistic components can flourish with little room for creativity or the recognition of aspects of practice that are hard to measure, such as the needs for relationship, or critical thinking, or creativity. Politically, this narrowed approach is consistent in a culture that aims for rationality, viewing success in terms of bottom lines with an emphasis on resource rationalization and restriction.

#### Risk Aversive Society

Currently, we are living in a risk-aversive society (Beck, 1992) that is engrossed in attempts to predict and regulate the future to reduce risk. The values of social justice and needs for care have been supplanted with safety and the avoidance of risk (Webb, 2006; Weinberg, 2010). Collective responsibilities to provide a social safety net have been replaced with individual obligations and responsibilities to evade perils. These emphases dovetail with the modernist prominence of individualism as a value, putting accountability and self-government squarely on the shoulders of individuals (Stanford, 2011). The risk-aversive society incorporates the value of prudentialism (Rose, 2000), namely, that one must act judiciously and sensibly to avoid risks and harm. The modernist emphasis extends to the expectation that rational actors will use cost—benefit analyses to assess hazards (Kemshall, 2010) and can conceptualize reality as calculable (Dean, 1999, p. 131). Individuals must manage ongoing uncertainty, anxiety, and fear. Rather than reducing danger, the mechanisms such as actuarial calculation, proliferate the discernment of possible risks.

A conflation of "objective hazards and normative judgments" occurs (Hunt, 2003, p. 167). These political stances are paired with moral judgments from risk discourses, resulting in moral regulation (Hunt, 2003). A primary responsibility societally for helping professionals is to make

judgments about the adequacy, health, and morality of clients' and patients' behavior. Power is at the core of what these professions do. Foucault's conception of power as a fluid and malleable force exercised by players rather than as a property that one does or does not possess (Foucault, 1982) is helpful in comprehending the politics of ethics. Power is not viewed as just repressive but also as productive in the ability to make things happen, such as in the construction of identities and social relationships, including understanding someone as good or bad. For instance, discourses about mothering impact on the identity of a woman whose baby is apprehended, likely leading her and society to view her as inadequate and potentially immoral. Service users are often framed as problematic high-risk populations who are morally suspect (Kemshall, 2010; Rose, 2000). Caring professionals are required to assess those able to reduce risks from those who cannot, providing social controls for and regulation of the latter group (Stanford, 2011).

These determinations have important public impacts and consequences (Shevellar & Barringham, 2016) and represent the control functions of the helping professions. For example, a decision to incarcerate a man for domestic violence is based on ethical standards that are enshrined in laws and policies. In addition, the distribution of resources is tied to those seen as morally worthy (although it is not framed in those terms but more "neutrally"). It is by being outside of what is taken as the norm that service users become the focus of society's gaze and the purview of the professions' work. Specific versions of truth are supported and maintained through particular systems of power with the attendant understanding of spoiled identities and ethically problematic behavior (Foucault, 1984a). Certain "regimes of truth" (Foucault, 1984b, p. 74), those systems of rules and procedures such as the codes of ethics, being established as "truth" are required to construct as necessary the involvement of professionals with such individuals or populations. All helping professional groups have an investment in these constructions of clienthood (Hall, Juhila, Parton, & Poso, 2003) and morality. The livelihood, prestige, and legitimacy of the professions are dependent on these constructions. This is the politics of ethics. Because risk is viewed as calculable, instruments such as decision-making models associated with the principlebased discourses proliferate.

The public effects extend not only to clients but also to the professionals. As an illustration, workers can be censured and have their licenses revoked for what are perceived as ethical breaches. Because risk discourses construct many types of behavior as morally problematic (Hunt, 2003), individuals may take up these discourses as their own taken-for-granted ways of operating and scrutinize themselves for being "at risk" and a "risk." Experts are increasingly expected to manage clients to reduce peril and are evaluated on the success of their strategies (Rose, 1996). When viewed as ineffective, the line becomes blurred between the "responsible" citizens such as social workers, nurses, or parole officers who are appraisers of risk and those who pose a threat due to their failure to lessen risks (McLaughlin, 2008).

According to Hunt (2003), discourses (e.g., the principle-based discourse) are at their most powerful when they can combine multiple discursive strands, such as those of the value of the marketplace in neoliberalism, the benefits of managerialism, and the reduction of risk. The principle-based discourse, which utilizes codes of ethics as a primary instrument, is well suited to become the dominant narrative because it assumes an objective, linear, logic-driven, and expert-based approach that can be evaluated and assessed for risk. The codes of ethics focus on individual responsibility with language such as "should" and "duties" as regular features of these documents (Banks, 2011). The implication is the need

for benchmarks for the monitoring and possible censure of practitioners, part of the disciplinary tactics that go hand in hand with the risk society and neo-liberalism. A whole armamentarium of technologies through which individuals are governed and govern themselves (Foucault, 1984b) such as audits of case files, licensing requirements that often include expectations of ongoing ethics training, complaint mechanisms, and boards of examiners to evaluate possible contraventions accompany workers, shaping and delimiting their work and setting the framework for evaluation of the ethics of their practice. These directions also dominate because they will more likely secure "much needed institutional endorsement and legitimation" (Webb, 2001, p. 60), in an era where the legitimacy of professionals has been increasingly questioned.

#### WHAT NEEDS TO BE DONE?

Despite the emphasis on the dualism of approaches in this article, I argue that it is necessary to bring together the binaries of principle-based and situated/relational discourses for ethics. Although they represent different epistemological positions that cannot be fused, at a process level I maintain that it is useful to embrace both models (e.g., Kiss, 2006). The tensions between the contextualized approach of a situated/relational and a universalistic principle-based discourse will remain, but examining ethics from both epistemological positions will enrich the decision-making processes around ethical conundrums. One should hold on to complexity and adopt a "both—and" approach to ethics. There is a need for pluralism, a position that supports the idea that although all values should not be evaluated as equally legitimate, identifying one primary value is not possible (Hugman, 2005). One way forward is to make a distinction between primary values that are broadly universal and those that are heavily dependent on context (Hugman, 2005).

The principle-based discourse attempts to articulate those values judged as primary with its emphasis on codes. This trope is an important device for protection of the public, accountability of professionals (a major usage in neo-liberalism), while providing legitimation for a sphere of professional activity, as well as inspiration and education for those professionals (Banks, 2004). In addition, an emphasis on rational and logical thinking is an important component in ethical deliberations.

But these components are only part of the search for morality. A continued questioning of which principles are being viewed as primary in decision-making processes would enhance ethical deliberations. The problematization of principles is key to acting ethically. Otherwise, according to Orlie (1997), principles are normalized. Alternatively, deep probing into what should be the norms would lead to more vigorous ethical considerations. The technical emphasis on linear processes and the normalization of universal principles actually diminishes the self-reflexivity and relationality that may be required to make truly ethical decisions (Orlie, 1997; Webb, 2006). The principle-based discourse can lead to rigid stances. Controversy and complexity need to be embraced and understood as at the heart of ethical deliberation. Helping professionals must ensure that the other discursive frames of ethics are incorporated, rather than closing down the discussion of ethics to a narrow range of procedures that omit some of the robust aspects of the situated/relational discourse.

Given the tilt toward individualism in the principle-based discourse, ethical considerations can omit more communal and contextual understandings. Attention to those values that are dependent on context, history, and culture must be considered. In addition the gendered qualities of caring, collaboration, and community, so essential to caring work, are important components that contribute to an ethical understanding (Healy, 2007). On a personal level, individual practitioners use both their cognitive skills and their emotions when confronted with ethical challenges, so recognizing the validity of affect as a signal of moral distress would strengthen the work.

Workers must be aware of their capacity to contribute to the naming and categorizing of service users as deficient and ethically problematic (Garrett, 2010). Instead, individuals must deconstruct those labels and bring to the fore broader structural dimensions in the construction of clienthood. At the level of discourse, through framing the debates using subordinated discourses, thinking can be changed, as the language employed can structure an understanding of the situation (Lakoff, 2004; Marston, 2013). For example, is a young single mother on social assistance seen as a drain on society or as receiving a legitimate benefit provided by the government in the same way as someone who receives a pension (Weinberg, 2006)? If the second interpretation is utilized, this illustration can be seen as dissident speech (Meyers, 1994; Nelson, 2001) that reframes an understanding of such a client through the use of a subordinated discourse. By employing a subordinated discourse, unconscious ways of thinking can be brought to consciousness, acting as a resistance and corrective to the dominant ways of structuring knowledge. It can move toward the creation of new norms and ethical standards. Similarly, by bringing in the subordinated discourse of a situated/relational discourse, ethical processes generally will be strengthened.

The decision-making processes of ethics are rife with realities that encompass economics, politics, and organizational factors (Rossiter, Walsh-Bowers, & Prilleltensky, 2002); thus it is crucial to identify the political bases underlying our approaches. Living ethically means both understanding the politics underpinning particular versions of ethics and consequently acting politically (Orlie, 1997). This can happen only by allowing for multiple perspectives and space to work collaboratively. It means questioning the given social order and being open to the perspectives of others, particularly those most likely to be silenced.

Workers in the helping fields are implicated in these political and ethical processes. They are part of the relations of ruling that determine who is viewed as meeting societal standards and who is not. There are always multiple agendas and vested interests, and these may divert practitioners from viewing the advantages of defining certain groups as immoral. One needs to be prepared to be militant in the critique and resistance to the neo-liberal project (Gray & Webb, 2013). This includes the professions' discourses about what constitutes ethics for both service users and practitioners. Addressing social work specifically, Webb (2006) contended that given the emphasis on reason, as well as "material self-interest and mass consumption" (p. 33), acting ethically is actually a more radical project than some might think. Recognizing the politics in ethics and seeing service users as groups that have been marginalized, not just as problematic individuals whose behavior is unacceptable in society, is essential. It requires valuing those who have been the focus of intervention and sincerely being open to their perspective while being respectful and collaborative in decision making and the solutions chosen.

Acting politically means recognizing the limits and inadequacies of any actions. Bauman (1993) argued that ethics is "inherently non-rational" (p. 11) because the process is not regular, repetitive, and predictable. Instead, ethics deals with paradox and contradiction, which are the features that make something ethically problematic. According to Preiser and Cilliers (2010), due to the complex nature of ethics, "We *know* we cannot get it right" (p. 270). It is critical to be able to tolerate ambiguity and acknowledge complexity while recognizing that there are ultimately no perfect answers. One's attitude is essential. Courage is an indispensable component: to move forward, knowing the inadequacy but also the necessity to act, as inaction is also a form of action. The helping professions, despite their flaws, still

provide vital services to aid and protect those who are vulnerable and to act as a clarion call for social transformation. We cannot escape contradiction and paradox (Weinberg, 2016). Therefore, humility about the aims and successes and ongoing critical self-reflection are needed.

Professionals must not just think imaginatively (Preiser & Cilliers, 2010) and transgressively but also be prepared to act as "responsible traitors" (Heldke, 1998; Weinberg, 2016). Responsible traitors recognize their privilege and advantage and use that privilege to upend inequitable practices. That stance requires recognition of the structural disadvantage for those who are clients and focus on the needs for redistribution through advocacy and activism. Practitioners need to be translators, and bivalent in their ability to use discourse to sway management about client or patient need (Marston, 2013). Challenging the organizations in which one is embedded is vital. The politics of ethics requires identifying macro structures as part of the ethical landscape that must be altered. A situated/relational discourse on ethics could support those decisions, as a key component of this narrative is to consider the context of practice.

To summarize, ethical consideration requires probing the very bases on which ethical decisions are made (Orlie, 1997). Continually questioning the normative values and methods for determining what constitutes the ethical is essential, as well as seeing the politics behind what is taken for granted. One crucial means of doing this is to bring in the discourse of situated/relational model so that it is as much a part of the discursive formations of ethical consideration as the principle-based discourse has been. The strategy of utilizing subordinated discourses to contribute to the shaping of the knowledge of social actors is useful. Integrating values of connection, community, collaboration, and emotion would strengthen one's approach. Practitioners must be self-reflexive and humble about the inescapability of trespass. Viewing one's own advantage and usage of power must be part of the exploration. Incorporating attitudes of humility, creativity, and courage are also key to ethical action.

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