

Chapter 6

Ethical Decision Making: A Reflexive Relational Model for Child and Youth Care

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Chapter Objectives

- Explore the usefulness of models for ethical decision making
- Differentiate ethical dilemmas from everyday ethical practice
- Propose a dedicated model of ethical decision making for Child and Youth Care Practice
- Illustrate the Reflexive Relational model with a practice example

Introduction: Why a Model is Needed

This chapter is about ethical deliberation and decision making. Essentially, it is about habits of mind that will serve you to maintain an ethical stance in your child and youth care practice. It offers a model to support you in ethically challenging situations and to encourage a habitual way of thinking that identifies and considers ethical aspects of situations in your everyday practice you might otherwise miss. First, however, it provides some reasons why we think a model is necessary.

Consistently conducting yourself ethically won't always be easy, and there will be times when it may not be possible to make a decision that feels right. Indeed, two workers can have completely different responses to the same difficult situation and each of their responses may well be ethically sound. There is no such thing as an ethical response that is universally

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acceptable (Barsky, 2010). This ambiguity can cause significant anxiety and how you manage that anxiety will have an impact on how ethical your practice is.

Child and youth care involves regular exposure to tricky situations where responding ethically, for a variety of reasons, will be difficult. For example, there will be times when all of the courses of action available to you have negative ramifications, like when keeping a confidence may allow some kind of harm to occur, but breaking it may also cause harm in the form of violating trust. You may not know what to do, initially or even after giving it much thought. You may have to compromise by choosing an undesirable course of action because it is the least undesirable of available options. This is an example of an ethical dilemma, defined in the introduction to this collection as arising when a difficult issue involving standards of right and wrong are at stake, and you have to choose between contradictory duties and obligations. Adopting and maintaining an ethical stance in your practice involves far more than just trying to be a good person. It involves developing your *praxis*. Jennifer White (who has written chapter 4 here) has defined praxis as “ethical, self-aware, responsive and accountable action, that reflects dimensions of knowing, doing and being” (White, 2013, p. 110). When faced with a tricky situation, juggling all the different things you know and need to know (i.e. knowing), using requisite skills (i.e. doing), all in a manner that is authentic to who you are (i.e. being) is a very tall order.

This chapter offers a model that has been designed to support you when faced with ethical dilemmas, but also when an ethical course of action is easy to identify but difficult to do – maybe because it’s scary or unpleasant, for example. When faced with ethically difficult situations, your body tends to communicate your feelings first, letting you know that care and consideration are required. Different people will have characteristically different ways their

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bodies respond to ethically difficult situations, and learning to tune in and recognize yours is an important part of developing your praxis.

It is also important to recognize the ethical aspects of low-stakes, seemingly mundane decisions you make every day – ones that don't make your heart race or your stomach feel sick.

Banks (2016) refers to these situations as “ethics work”, where decisions we make every day have ethical elements. How you handle these decisions is an important part of your ethical stance. This is because everything we do as Child and Youth Care practitioners can be seen in relation to potential harm or benefit, or as an expression of rights and responsibilities.

Responding to a child who doesn't want to wear his coat outside in the cold or to a young person who swears at you, for example, requires more than just consideration of what would effectively elicit a desired behaviour or stop an undesired one. There are ethical aspects to be considered, including, for example, the child's right to bodily autonomy, the young person's right to self-expression, your duty to care for the child, or how your action or inaction will affect the relationships with those involved. In many workplaces, problems and decisions have increasingly been understood in relation to their administrative and technical issues, often in a manner that makes it hard to consider the ethical elements (Bauman, 2006; Moss & Petrie, 2002).

To be able to consistently respond in a manner that is congruent with your own ethical stance, as well as with child and youth care principles and values, requires a habit of mind that actively considers the ethical dimensions of the many layers of circumstances in any given situation, layers that are part of a wider social ecology. It also requires the ability to tolerate uncertainty and the anxiety that often comes with it.

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All of us are embedded in a world full of injustices that confront us daily with questions not only of what to do, but what can be done. For some, shifting your habits away from always accepting as inevitable the status quo may be an important part of adopting your ethical stance; for others, it may be about choosing your related battles more carefully.

It can feel overwhelming when you begin to see and think about what it takes to maintain an ethical stance as a child and youth care professional. And everyone, no matter how experienced or advanced their practice, will sometimes find it difficult to respond ethically. Under such conditions, it is necessary to have specific tools that help counter the overwhelm, allow you to remain reflexive and support you to sort through both your own responses and the available information. The temptation to act quickly to relieve the anxiety wrought by a difficult situation may be very strong; conversely, your reaction may be to delay thinking about or responding to it, which can turn into a sort of mental paralysis. For all of these reasons, a tool is needed, one that is tailored to the specific demands and values of child and youth care practice.

What is a model of ethical decision making?

A model of ethical decision making is a structure for organizing information, so that you can make sure that you have considered all the relevant information that you can before you act on an ethical dilemma. This supports you in thinking through the situation so you can arrive at the best decision possible for you and the children, youth and families you work with. As stated by Matthison (2000), models of ethical decision making represent an “attempt to move ethical decision making away from the intuitive and towards the cognitive, by offering step-by-step approaches to ethical decision making” (p. 205). As we discussed earlier, ethical dilemmas are

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by their very nature problems that are impossible to solve without compromises. In a very real sense, there never can be a perfect solution.

Ethical decision making methods do not make choices for you, but they help you to avoid impulsive decisions or decisions based purely on personal hunches. They prescribe systematic methods of analysis in an attempt to offset the impact of bias as you decide what to do. Models of ethical decision making thus provide a counterpoint to professional codes of ethics in the human services, which are purposefully non-prescriptive because of the complexity and uniqueness of every ethical issue involving human beings. As stated by Eckles and Freeman in this collection, codes of ethics provide the “starting place for a shared commitment to general principles.”

Models of ethical decision-making have existed for many years across a range of professional contexts. Social work and counselling have been at the forefront of producing practical tools for ethical practice in the human services. These tools provide clear and specific procedures to be followed and focus on the process of ethical reasoning. They break ethical decisions down and suggest a sequence of steps for weighing alternatives that can lead you to a course of action (Cottone & Claus, 2000). They query the facts of each dilemma, the specific context and the relevant articles from the codes of ethics or local legislation. Sometimes they also ask you to consider how different theoretical approaches to ethics might respond to the dilemma at hand or how your personal values are influencing your reasoning. Concretely, models of ethical decision making can be thought of as a kind of map for navigating the tricky terrain of ethically challenging situations. They offer you a method for slowing down and organizing your thinking when you might otherwise become reactive.

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At the same time, most ethical decision making models tend to be linear. That means that they usually prescribe a structured sequence of events with a beginning and an end, and ethical decision making is seldom so neat and straight forward. More often than not, we need to go back and forth, considering different issues and their consequences and mentally testing out a range of solutions. Ethical decision making is more like a process of deliberation, one that requires us to carefully weigh alternatives and test hypotheses to see what actions will produce the most just outcomes. As you will see, the kind of deliberation we encourage in this chapter involves intentionality, reflection and reflexion, emotional presence and examination of context – all key characteristics of a child and youth approach (Garfat et al., 2018). At the same time, deliberation is useless unless it leads us to actions that will promote ethical outcomes. Taking action, and then evaluating the outcome, are important aspects of our responsibilities in doing ethics.

While ethical decision making models may speak to the values of the person using the model, they usually do not consider the affective or feeling dimension that is involved for the decision maker and stress rational processes instead. The model we are proposing includes feelings because, too often, ways of understanding ethical reasoning don't include the realm of emotions and the body – despite their clear and important contribution to the process (Krishnakumar & Rymph, 2012). As reviewed in the chapter on Reflexivity, feelings constitute a critical dimension of ethical reasoning in Child and Youth Care, both as a source of information and an aspect of engaging with ethical dilemmas that must be managed in order to make a sound decision. Feelings can also be useful in ethically challenging situations because they contribute to the impetus to act even when the situation is difficult. Valuing emotions that can inspire ethical actions is part of developing an ethical stance in your practice (Johnson, 2013). Ignoring or suppressing these aspects of your experience when 'thinking through' how to respond can

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often lead to unethical actions, because your feelings can lead you even when you do not acknowledge them. At the same time, surrendering entirely to your emotions can also be highly problematic and that is why a tool that takes feelings into account while weighing them against other sources of data are needed. This model is designed to help you come to know yourself better and to use that self-knowledge to identify what you might otherwise miss.

Finally, ethical decision making methods should reflect the ethos (or central values) of the profession for which they were developed. There has been relatively little written about ethical reasoning in Child and Youth Care, but the one model that does exist aligns strongly with a core value of the discipline, that of “self in action” (Krueger 2000, n.p.).

Ethical decision making in Child and Youth Care

In 1995, Frances Ricks and Thom Garfat outlined a ‘Self-Driven model’ of ethical decision making that was described as “centered in the self of the worker” (p. 395). This model described ethical decision making as a process of “reflective analysis” involving knowledge of ethical codes and agency values, critical thinking and evaluation in relation to the dilemma at hand, and the application of self-knowledge. Self-awareness was central to the model in that the self was described as acting as a filter through which all information is processed. In referring to this model some 18 years later, Stuart (2013) characterized the Self-Driven model this way: “The practitioner must know the self and be able to identify and articulate their worldview-including values, beliefs and ethics-and distinguish person bias from what is the right thing under the circumstances “(p. 173). This involves a process whereby facts about the ethical issue at hand and relevant knowledge interact with self-awareness to lead the Child and Youth Care practitioner to making a decision about what to do. Once a decision is reached, ethical actions are

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“actualized through the self” (p. 395), after which the entire sequence is evaluated. Garfat and Ricks (1995) describe this model as involving both a “personal and a professional process” (p. 396) that stresses the responsibility for self-awareness, owning one’s choices and evaluating one’s actions. The Self-Driven model outlines a process of ethical deliberation, but it does not specify discrete steps for thinking through an ethical problem or dilemma in the way most approaches to ethical decision making do. Instead, it identifies key ingredients to be considered, stresses the role of the self and, by association, reflexivity, in processing information that leads to a decision. At the same time, the Self-Driven model does not explicitly refer to relational practice, a critical second piece that is central to the ethos of Child and Youth Care. In tandem with reflexivity, it constitutes the core of all we do and is, in fact, the reason why self is so important. What follows is a discussion of self and relationship as the core values of Child and Youth Care, which in turn form the basis for a proposed model of ethical deliberation in our field that builds on Garfat and Ricks’ initial model.

The Ethos of Child and Youth Care: A foundation for ethical decision making

From the beginning, both relationship and the use of self were stressed as critical elements in Child and Youth Care practice. These values were at the core of what distinguished Child and Youth Care from other helping professions (Anglin, 1999). In other professions, the establishment of a relationship is seen as a preliminary step that provides a vehicle for the implementation of techniques and helping strategies. In Child and Youth Care, relationship, or co-creating relationships with children, youth and families **is** the intervention. As stated by Garfat, Freeman, Gharabaghi & Fulcher (2018), “There is no other form of helping that is so immediate, so grounded in the present experiencing, or so everyday” (p.11). In part, this is

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because we work in the lifespace and engage in the daily lives of the people we work with.

However, it is the quality of engagement that is foundational to our practice no matter what the setting is, where entering into a real connection is the basis for meaning making and empowerment. The literature of Child and Youth Care talks about “hanging in and hanging out” (Garfat, 1999), and the importance of rhythmic interactions (Maier, 1992), presence (Krueger, 1994) and personal connection (Maier, 1992) for promoting growth and development. You need only to pick up a text from an allied profession to see how different we are. We stress engagement rather than professional distance, and doing with, rather than doing for. Child and Youth Care workers **live** the relationship challenges of the people they work with and while they engage in interpretation (Garfat et al., 2018), the primary way of working is through engaging in healing interactions that are characterized by mutuality and authenticity. It is relationship that moves development forward.

The emphasis on relationship is the reason why Child and Youth care has stressed the use of the self and self-awareness. As stated by Frances Ricks, “without self, there is no other” (2001, n.p.). Because our **selves** are the primary tool in the intervention and the lens through which we make meaning about children, youth and their families, we must constantly be in touch with our own responses, including our feelings and our bodily reactions. This is both because our responses are critical sources of information that guide us forward in our actions, and because we have an ethical responsibility to manage our own needs so they do not contaminate our work with children, youth and families (see Mann-Feder this collection). These two core elements of Child and Youth Care have been further developed in the theoretical frameworks of our discipline, including Jennifer White’s model of praxis (2013) and in the Garfat et al. (2018) model of being, doing and interpreting.

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It is our contention that in order to follow a Child and Youth Care model of ethical decision making, reflexivity and relationality must serve as the core of the ethical deliberation process.

The Reflexive Relational Model in Child and Youth Care

The following proposes a specific model of ethical deliberation and decision making for Child and Youth Care practice. Building on the Self-Driven model, it posits reflexivity and relationality as core considerations through which all ethical reasoning is filtered. All relevant knowledge, including the knowledge of the situation (including relevant historic and recent events), of ethical theory, of features of the macro-system (See Bal this collection) and their relevance to the situation, of professional standards of practice and of relevant legislation, is considered in relation to the self and the relational context of the practice situation at hand. In addition, the outputs of ethical deliberation and reasoning, namely taking action and evaluating that action, must also be considered in light of the impact on relationship and the self.

The reflexive relational core of this model signifies the ways of knowing, doing and being that are the essence of Child and Youth Care. As such, they are located at the core of a spiral that reflects the ongoing, repeated returns to thinking about how the self impacts, is being impacted and will be impacted by the situation requiring ethical decision making, as well as impacts related to relationships. They are central contextual considerations as well as outcome considerations. Reflexive considerations include reflection on action, and as such returning to the core also entails returning to the facts of what has occurred. This is a critical dynamic of the reiterative process of ethical decision making. All the aspects of social location (see Mann-Feder this collection) are also core considerations, as are considerations of power dynamics and

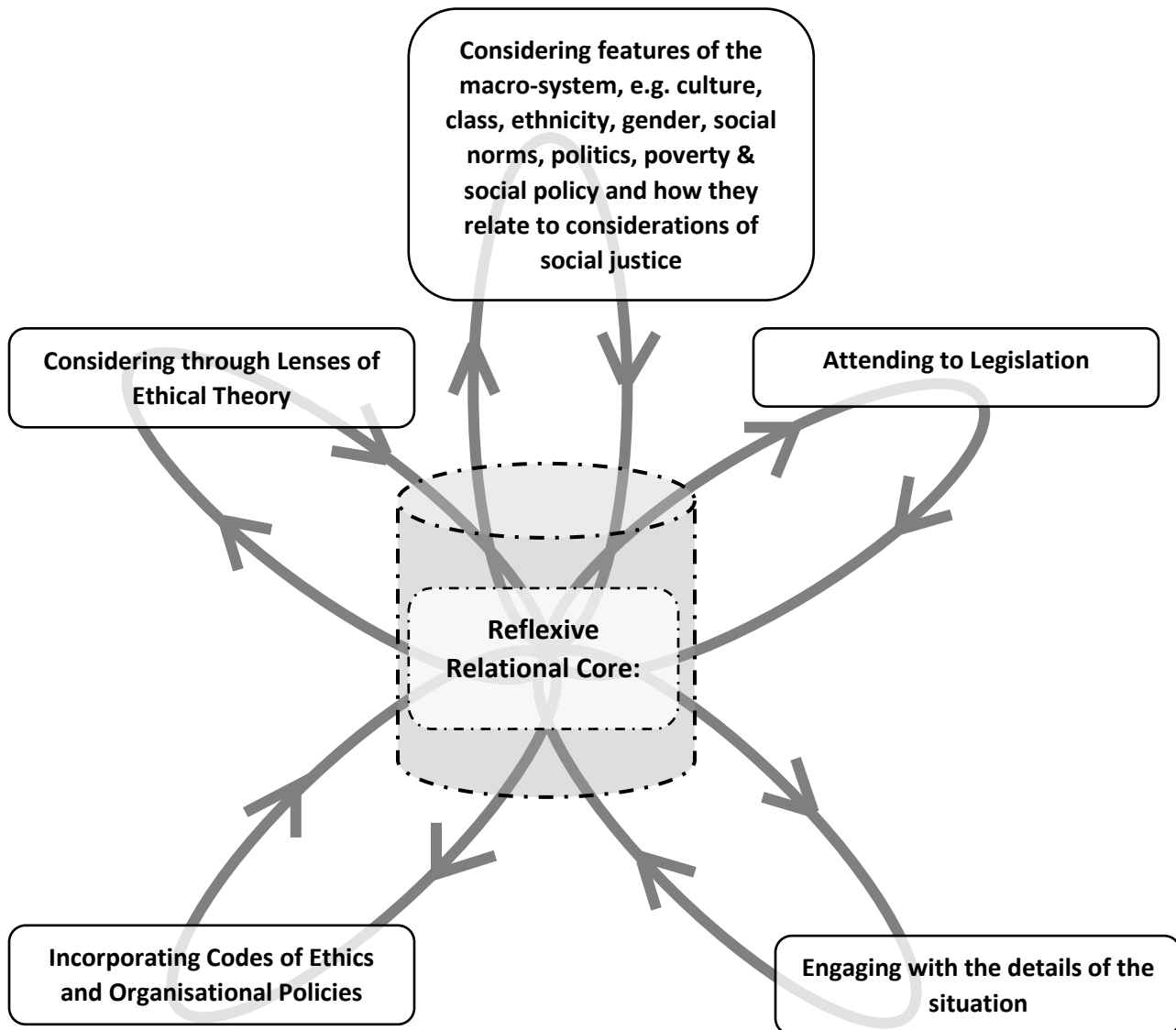
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privilege. Because these issues are so pervasive and so critical to an ethical stance, we have also placed them as inputs in the model in the form of macro-system considerations. The act to encourage information gathering and attunement to how the child, youth or family are experiencing issues of social location.

Deliberation of the wider considerations are organized into various layers and located on the outer loops spiraling out from and back into the reflexive relational core. This looping spiral reflects the non-linear nature of the experience of ethical decision-making, where you may return to the same or similar considerations, especially reflexive-relational considerations, several times as you take on board varying wider considerations.

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Figure 6.1: Figure 6.1: The Reflexive Relational Model with Inputs and Outputs



The levels that serve as inputs on the loops of the spiral are ethical theories, macro-system considerations, ethical codes, and relevant legislation. These all constitute knowledge that, when considered in light of the self and of the relational context, can assist in ethical

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deliberation. Ethical theories, whether consequentialist, utilitarian, virtue ethics or feminist ethics (See Greenwald and see White this collection) provide different perspectives on what is most important to consider. You might find that the solutions these theories suggest do not, in the end, imply moral actions that are dramatically different. On the other hand, the theories have implications for not just what you do, but how you do it: how you involve the young person and their family, and whether your actions encompass advocacy and intervention at the institutional level, as well as at the individual level. At another layer, it is critical that we pay attention to the social location of the child, youth and family, and that we query possible power inequities and structures of oppression that may be operating. At yet another layer, codes of ethics remind us of what our professional responsibilities are as defined by the field of Child and Youth Care, and how to apply them in practice. While this volume uses the North American Standards for Child and Youth Care Professionals as its main point of reference, your provincial or state association may have a Code of its own, as might your place of employment. It is also possible that your workplace has a Code of Conduct which is more specific than an ethical code and typically would spell out what you need to do in a much more explicit way. The last input, Legislation, is necessary because laws exist in North America, especially in relation to privacy and consent, that establish legal rights and obligations in relation to ethical issues and dilemmas (Spangler & Winkelmann, 2019; Budd, 2020). These laws exist at both a federal and a state or provincial level, and may be the determining factor in whether, for example, you are legally obligated to involve parents in a decision that their child is making. You might still decide to involve them after working through this decision making model and examining your own values, your relationship to the people involved, and the needs of the young person. However, it is critical to be aware that the child has the legal right to contest your decision. Another important policy to

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consider is the United Nations (UN) Convention on the Rights of the Child (1989) (see Stuart, this collection). While not legislation in the usual sense, the UN Convention has been embraced around the world as an important document that safeguards the universal rights of children and youth, including the right to have a say in what happens to them.

For each element in the Reflexive Relational model, there are a series of main questions to guide your process, and can act as a kind of short hand route through the model. Table 6.1 provides these key questions, and indicates what further data is needed to answer them.

CORE ELEMENTS	BASIC QUESTIONS	DATA REQUIRED
REFLEXIVITY Checking in with the self	What is the issue at stake? What does it bring up for me, in terms of my body and my feelings? How might my affective state influence my perceptions of what is happening?	-Reflection on action and reconstructing the events to identify ethical components -Identifying feelings and bodily sensations; making sense of what they might be communicating -Locating values -Facing the impact of social location and context, including power differentials and institutional norms
RELATIONALITY Considering relationship	What is my current relationship to this child, youth or family? What does this event tell me about our relationship? How does this event impact on other relationships?	-Determine the meaning in the context of current relationships -Identify the impact of culture, ethnicity, gender, class, sexuality -Reflect on how this event positions us in relation to each other -Affirm the rights of the child, youth or family -Determine what and how you will communicate about the ethical issues as you see them -Assess the impact of this event on the social ecology of the child, youth or family -Consider what information may be missing and who else you may need to involve, including supervisors, consultants, or peer consultants

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INPUTS ETHICAL THEORY Weighing criteria	BASIC QUESTIONS What are the relevant duties, virtues or outcomes according to theory? What would an ethic of care suggest as the best course of action?	DATA REQUIRED Knowledge of ethical theory
Social Justice	Are there issues of difference (culture, gender, sexual orientation, disability, socioeconomic status) that are at play here? What are the power dynamics of the current situation? Are there oppressive systems at work here? Is poverty a factor? Is advocating for social justice part of my responsibility here?	Inquiry into the perceptions of the child, youth or family Knowledge of their history and life circumstances Examination of agency policies and procedures that may contribute to disempowerment and discrimination
STANDARDS OF PRACTICE Incorporating the ethical code	Which articles of the Standards of Practice are relevant here? How is my responsibility defined in those articles?	Access to the relevant Code of Ethics, including one for your place of work if available.
LEGISLATION	Is there legislation that	Knowledge of relevant state/provincial/federal

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<p>Attending to local laws</p>	<p>applies in this situation? How are the legal rights of the child, youth or family defined? Are their rights being honoured or violated? How is my legal duty defined?</p>	<p>Legislation and the U.N. Convention on the Rights of the child</p>
<p>OUTPUTS PROPOSED ACTION Testing out courses of action and making a decision</p>	<p>BASIC QUESTIONS Overall, which action would promote best outcomes and minimize harm, both in the short term and the long term? Which action fulfills my professional responsibilities best? Which action is most consistent with CYC values? My own values? What actions do I need to take in relation to the child, youth and family? What advocacy is required on an institutional or community level?</p>	<p>DATA REQUIRED</p>
<p>EVALUATION Considering impact</p>	<p>How confident are you in standing behind your decision and actions? How</p>	

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	<p>willing would you be to share them with others you respect?</p> <p>What were the results of my actions?</p>	<p>What is the feedback from child, youth and family, and others in their social ecology? Do you need to ask for feedback?</p> <p>What came up for you in this process? What was helpful, and what detracted from your decision making?</p> <p>How can you do better next time?</p>
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<TABLE TITLE>Table 6.1: The Reflexive Relational Model with Prompts and Questions

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While so many things to consider may feel daunting, this model is designed to help you develop the confidence to tolerate uncertainty, remain open, take your time and look honestly at yourself and the circumstances around the decision at hand. It is also designed to be versatile in terms of the types of situations and personal tendencies that influence the process of ethical decision making. For example, if you are a person who immediately reaches for policies or rules when faced with a tricky situation, you would likely enter the deliberative process on the outer loop of the model entitled Standards of Practice or Legislation. By engaging in the process represented in the diagram, you may be reminded to reflect on the impact of your own history and/or current affective state on the way you are understanding your situation. Conversely, if you're the kind of person who tends to feel caught up in the emotional experience of an ethically complex situation, following the model can support you to digest and utilize some of that relevant emotional content, as well as think about the other layers of consideration. In other words, there is no set of steps that everyone should follow in one particular order. Instead, the whole range of considerations warrant your attention.

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There also may be occasions when you do not have time to consider the core and wider questions in making a decision about an ethically tricky situation. As you become more confident and tolerant of uncertainty and the other affective states triggered by these kinds of situations, you'll get better at determining those situations where you may rush into a decision in reaction to discomfort, and those situations that genuinely require a very swift response. In the latter situations, the process may look more like this:

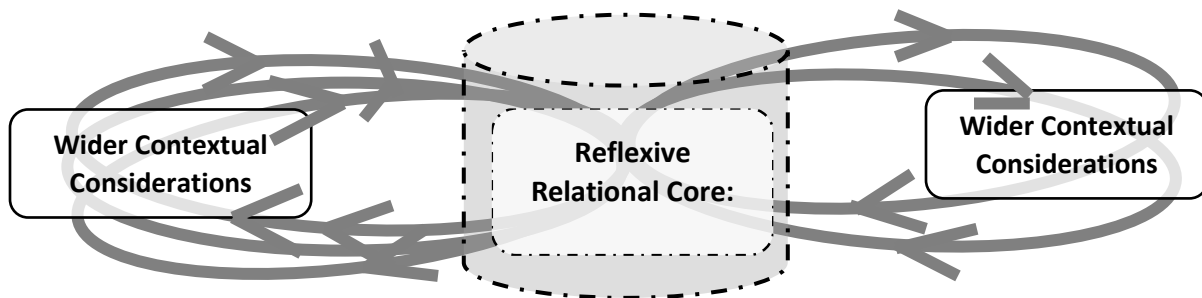


Figure 6.2: Operating Under Time Pressure: The Compressed Reflexive Relational Model

Not only is this process not linear in terms of a pre-set order of steps to follow, it also is not linear in terms of time. When we are under pressure and an almost immediate response is necessary – for instance when someone's immediate safety is under serious, imminent threat – the habits of mind cultivated in more spacious times will serve (or compromise) your ability to quickly process the gestalt of what you know about a situation and respond ethically. These same habits of mind will also support you to see the ethical issues in seemingly neutral situations, rather than overlooking them.

Ethical decision making is a difficult process which, as mentioned earlier, can bring up painful emotions. Because something always has to be compromised in relation to an ethical dilemma, it may not feel good when you finally make a decision and act. Even when there is

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some initial relief, there can also be guilt about those considerations that in the end were compromised, and the ways in which you could not fulfill all of your obligations. Remember that making a decision which leads to action is an accomplishment, because it means that you faced the situation and were able to do something to prevent harm or provide protection. Not acting on an ethical issue or dilemma can have far more devastating consequences. It is for this reason that we need tools to help us manage the stress involved so that we can take a stand. As outlined in the model proposed here, our ethical responsibility does not end when we act, part of our role is to assess the outcomes so that we can do better next time.

Applying the Relational Reflexive Model

You are a worker in a residential program for young people with emotional and behavioural difficulties. You have just returned from a swimming outing. Upon entering the building, you hear screaming from an adjacent room, including “You’re hurting me!” and “Get the **** off of me or I’ll trash your car.” You enter the room to check things out, and see Binesi (a young person) being held on the floor in a prone position (on his belly) by two members of staff. All three are red in the face. You also notice furniture on its side, plants knocked over, and pictures off the wall and broken. Binesi sees you and shouts to “get these *****ers off me.” When you don’t respond, he starts swearing. The staff wave you away. You realise the rest of the group of young people may be hearing this, and you exit. As you leave, you hear Binesi wail and call out for his mother.

You know that Binesi’s mother cancelled his weekend visit this morning—again. He also ‘fell out’ with another young person, and was held back from the swimming for bullying. You

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have sometimes found Binesi difficult to work with; you find you're a little bit scared when trying to set limits with him.

Some questions to consider:

(Reflexive Relational Core):

Reflexive considerations: What do you notice first, in terms of your thoughts and feelings about this scenario? What from your own background and upbringing will be influencing these thoughts and feelings? What might your body be telling you?

What exactly are you seeing here? Which details from the scenario stood out most; which did you miss on the first reading? What further information do you find yourself immediately wanting to know? What are the ethical components of this interaction? What are your values in relation to the use of restraint? Are you experiencing any value conflicts? How does the scenario with Binesi and your colleagues align with the core values of Child and Youth Care practice? Are there important power dynamics to consider?

Relational considerations: How might the quality of your relationship with Binesi and the two members of staff influence your consideration of this situation? How do the other young people relate to Binesi, and what might be the impact on them of witnessing this interaction? Are there other relationships that are relevant as context for this event?

Layers of Inputs to consider

(Ethical theory): How might a consideration of:

- respect for persons and children's rights;
- what the consequences might be if the staff had not physically restrained Binesi;
- how child-centred, relational, trustworthy the involved members of staff are generally, in their practice; and

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- the duties of care of the staff members involved (including you) in a situation like this

help you make sense of what you've just seen? What do these considerations point to as possible actions on your part?

(Codes and Policies): What do the North American Standards of Practice say about situations like these? What are the residential establishment's policies about physical restraint?

(Legislation) What does the law in your jurisdiction have to say about physical restraint and/or situations leading up to it? Does Binesi have legal rights in this situation that need to be considered?

(Considering the macro): what macro-issues may be relevant to this situation? How might your *self* influence your perceptions of them? For example, why might Binesi's mother have cancelled again and could a lack of cultural sensitivity on the part of staff be a factor?

Layers of output

(What action to take?) What do you need to do to be able to make better use of these considerations? What do you need to do to decide an ethical course of action? What more do you need to know? What are the options available to you now?

Applying the Relational Reflexive Model – Stage 2

Later, you decide you need more information and have a look at Binesi's file. In the intervention plan, you can find neither a mention of physical restraint nor a plan in place for how to help him when he loses his temper. You also look for the program's policy related to physical restraint, but can't seem to find anything. While you're looking over Binesi's file, a newer member of staff sees what you're doing and tells you that Binesi couldn't handle being held back from the swimming, "freaked out" and smashed the place up. She then casually remarks that Jackson, one

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of the two staff who were restraining Binesi, has been ‘gunning’ for Binesi all week because he thinks Binesi stole his phone. She goes on to state that Jackson probably ‘wound Binesi up’ on purpose. Staffing levels are poor just now. Jackson worked an evening shift yesterday, and a double shift today. You’re aware that he has been doing a lot of overtime lately.

Some questions to consider:

(Reflexive Core) How do you feel about what the newer member of staff has told you? What might this tell you about yourself? What are your thoughts about not finding the content you were looking for? Are you experiencing any value conflicts? How does the scenario with Binesi and your colleagues align with the core values of Child and Youth Care practice?

(Relational Core) What might not finding any documentation tell you about the people involved? What might it tell you about the establishment you work in? What does this scenario tell you about the relationships between staff and young people on the unit? What have you learned about your colleagues and their relationships with each other?

Layers of Input

(Ethical theory) How might considerations of:

- respect and rights;
- consequences of actions;
- virtues, habits and motivations of those involved; or
- relational responsibilities and duties of care

help you make sense of this unfolding information?

Does one jump out more in relation to this stage? For example, would the organizational culture in relation to children’s rights influence your considerations of what might have happened and what you need to do? Or, would it matter whether Jackson was doing all this extra work to make

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sure there were safe staffing levels or if he had a habit of doing lots of overtime when his motivation was to make extra money for expensive car repairs? Or, would the quality of relationship between Jackson, the other staff member and Binesi be a consideration that may be significant in deciding what to do? What do these considerations point to as possible actions on your part?

(Codes and policies) Which aspect of this new information are relevant to the code of ethics?

(Legal) Are there further legal considerations? What about Binesi's rights?

(Considering the macro): what macro-issues may be revealed by this new information? For example, what are some of the wider issues that influence the quality of relationships and practice, as well as staffing levels? If something unethical happened, is there a possibility that people at the level of management may also be culpable (depending on the circumstances)?

(Actions to take) What else do you need to do to be able to make better use of these considerations? What else do you need to do to decide an ethical course of action? What more do you need to know? What actions are available to you now? What feels best?

Discussion

This unfolding scenario not only reflects the real-world nature of how ethically complex situations happen over time, but that they are embedded within a network of relationships and social systems. Decision-making and other practices related to physically restraining children and young people are at the most extreme end of the continuum of ethical complexity and serious risk of harm. At the same time, they are not unusual occurrence in some Child and Youth Care settings (particularly residential child care and some school settings). All of the other details around about the initial witnessing of the physical restraint of Binesi are also not uncommon.

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The questions we provided are only a very small subset of those you must grapple with when faced with any decision that involves significantly restricting other people's choices and/or risking harmful outcomes.

Aside from Binesi being physically restrained, there are only a few things that can be known for sure. If you became convinced of what happened, or found yourself thinking in very certain terms around things like: who caused the damage to the room in scenario, whether or not the staff were supportive or neglectful in responding to Binesi's reaction to his mother's phone call, whether a physical restraint policy exists, or whether Jackson deliberately provoked Binesi, it would be useful to reflect on what is actually in the text, what you may have read into it, and why that might be. On the other hand, the newer member of staff in stage 2 is definitely gossiping about something very serious. The immediate decision of whether and how to address this might easily be overshadowed by trying to figure out what to do about what you witnessed upon return from swimming.

From an ethical perspective, physically restraining a child or young person could violate their right to physical autonomy and dignity; could cause physical and/or emotional harm; could be an abuse of power to satisfy the restrainers' own needs for control or even revenge; and could damage relationships amongst everyone involved. At the same time, not physically restraining a child where serious harm is imminent and there is no other practicable way to stop it from happening could violate one or more children's right to care and protection; could allow physical and/or emotional harm; could be a form of staff abdicating their responsibilities; and could also damage relationships amongst everyone involved. On a superficial level, the decision to restrain or not may appear straightforward and is not even always understood as an ethical decision. It is subject, however, to the perceptions, and the internal and external forces that influence those

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perceptions, of the people involved. The way people perceive the criteria of serious, imminent harm and least restrictive available is also embedded in wider systems that influence the circumstances around situations which may lead to a child being physical restrained, both within and beyond the child and youth care setting, including societal norms around gender, children and ethnicity, for example. This why developing rigor in your thinking habits, especially in relation to your reflexive relationality, and your ethical stance is so important.

When the Process Fails

Sometimes, however, all our best efforts fail, and we end up causing harm to the people we work with. The harm may not be immediate, and we may have had no way to predict all the outcomes of our actions. These are ethical mistakes that even well intentioned professionals can make. Sometimes those mistakes can be considered ethical lapses, because we inadvertently failed to take all the relevant facts into account or because we were operating on the basis of blind spots. Lapses are not equivalent to misconduct, and have nothing to do with the integrity of the worker. They are often hard to detect until after we have already taken action, because it is only through the impact that we can later identify what was missed.

Lapses are different, both in degree and because of the original intention, than outright violations of ethical standards. These are referred to as ethical breaches and can cause significant harm. Some ethical breaches are intentional, and constitute ethical misconduct, while other breaches result from neglect or gross misinterpretation of the original circumstances. In many cases, an ethical breach may lead to dismissal from your job. In places where Child and Youth Care practitioners are licensed, there can be disciplinary action on the part of the professional

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association, which can include fines, suspension of membership or even the loss of the right to practice.

The best protection against ethical lapses and ethical breaches is to develop your ethical sensitivity. This will be especially important in workplaces where problems are exclusively understood in relation their technical and administrative issues; in such settings, you may find it challenging to engage people in identifying and discussing the ethical dimensions of a decision. They may be unused or even resistant to thinking in this way. A practice culture of regular, meaningful dialogue about the ethical dimensions, not just of ethically tricky situations but the seemingly mundane, low-stakes ones as well, is another protection against lapses and breaches. Part of your ethical practice may well be to contribute to the development of conditions that promote more consistently ethical practice in the places where you work.

Conclusions

This chapter has reviewed the differences between ethical dilemmas and everyday “ethics work” and has proposed the Reflexive Relational Model as a unique method of ethical decision making that is in alignment with the ethos of Child and Youth Care. It builds on the literature of the field in placing reflexivity and relationality at the core of ethical practice, and advocates ethical deliberation that starts with where you are in your personal response to a difficult work situation. It also stresses the development of an ethical stance that supports ethical action, including advocacy at the institutional and community level, as well as the importance of evaluating your experiences with the model as a way to constantly increase your aptitude and your creativity in how you do ethics.

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Practice is integral to developing your ethical stance and involves a range of undertakings on your part. Practice using the Reflexive Relational Model, and be on the lookout for situations that have ethical dimensions that are not immediately obvious and require everyday ethics work. Try to tune in to your bodily reactions and your feelings at work, and embrace them as important sources of information about what is happening. Read over the Standards for Professional Practice, and educate yourself about the local laws that are relevant to doing ethics as well as the UN Convention on the Rights of the Child. Evaluate your actions, watching for both the intended and unintended consequences for the people you work with, those around them, and the broader environment. If you are unsure of what actions to take, consult with your supervisor or a trusted colleague. Often, just hearing yourself present the situation out loud can bring new insights. Advocate whenever and wherever you can for more discussions about ethics, and about actions that promote just conditions for children, youth and families. Remember that you will constantly be presented with opportunities to better prepare yourself and respond ethically. Above all, remind yourself that your ability to “do ethics” will evolve as you accumulate more experience as a Child and Youth Care practitioner.

Questions for Reflection

1. Think of a time when you faced an ethical dilemma. What kinds of bodily sensations and feelings do you remember? What might be your characteristic ways of responding in difficult ethical moments?
2. Based on your answers to question one, where do you think you might need to start in the Reflexive Relational model? What kinds of considerations are typical of your responses to ethical problems?

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3. Explain the difference between an ethical breach and an ethical lapse. How might good intentions lead to both kinds of mistakes?

Key Terms

- Ethical Model of Decision Making
- Deliberation
- Ethical Dilemma
- Habits of Mind
- Moral Emotions
- Moral Actions
- Moral Lapse
- Moral Breach

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