SOCIAL WORK'S MORAL AND EPISTEMOLOGICAL PLURALISM

By
Michael B. Friedman, LMSW
Adjunct Associate Professor
Columbia University School of Social Work

(This lecture was originally given to incoming students to the MSW program at Columbia in 2005. It was modestly revised in 2023.)

Welcome to the profession of social work. It is a great profession, which will give you a broad range of opportunities to have an impact on the lives of people and on society.

I am often asked by people who are debating with themselves about which helping profession to enter—social work, psychology, counseling and guidance, gerontology, etc. I always tell them social work. For two reasons. First, I love the "social" in social work—seeing people in the context of the broader world and seeing that changing society can help people have better lives. Second, I love the range of opportunities social work offers.

Think about it. As a social worker you can work in the public sector or the private sector. You can do psychotherapy, or you can create social systems. You can work for a social agency, a hospital, the government, a think tank, a research center, a foundation, an insurance company, or a corporation. What other profession prepares you for such a range of opportunities?

But I am not here to be a cheerleader for social work. My job today is to talk with you about some very fundamental and complicated issues within the profession of social work, about—as I say in the forbidding title of this lecture "The Social Work Profession's Epistemologies, Identities, and Sources of Knowledge." Not exactly the stuff of standup comedy.

What does it mean? It's actually not too difficult.

"Epistemology" means theory of knowledge. The question before us will be what is the nature of knowledge in the profession of social work? Is it science? Is it some other form of knowledge derived from experience? Is it knowledge that is bound by culture? Is it really pseudo-knowledge shaped by the power structure of our society? Are there moral truths as well as empirical truths? Etc.

"Identities" refers to a recurrent debate within the profession of social work about whether social work has a unique, defining identity and what such an identity would be. Is social work a pluralistic profession (my view) made up of a variety of activities done by social workers drawing from the history of our field? Is social work defined by the "social" in social work? Is it defined, that is, by a particular view of how to understand human beings and/or by a commitment to serve the poor and oppressed, to confront social injustice?

"Sources of knowledge" refers to the actual ways in which we acquire knowledge. Is it from scientific research? Quantitative or qualitative or both? Is from passing the traditions of practice from one generation to the next? Is it, possibly, from religious or moral convictions?

I confess that this lecture will not give thorough answers to all three of these issues. And that is not my goal. My goal is to provoke you to think for yourselves about these issues. To do so, I have constructed a lecture in three parts: (1) The Spirit and Diversity of Social Work, (2) Social Work Knowledge, and (3) Coming to Terms with Culture.

The Spirit and the Diversity of Social Work

In *The Closing of the American Mind*, Allen Bloom remarks, "Every educational system has a moral goal.... It wants to produce a certain kind of human being." ¹ A business school seeks to produce people who appreciate and are skilled at the complexities of making money and managing business, hopefully within the bounds of fairness and decency. A military school seeks to produce people who are skilled at the arts of war and, one hopes, of maintaining peace.

So, we should ask ourselves what kind of human being does a school of social work want to produce? Who do we, who teach in schools of social work, hope that you, our students, will become?

There are some longstanding disputes about what it means to be a social worker, especially between those who have a social vision of social work and those who have a clinical vision.² But I think that there is also a common image of what it means to be a social worker. And that, as Bloom maintains, it is fundamentally a moral image.

This may make some of you uncomfortable because we live in an age when many people, particularly people who have learned to respect personal and cultural differences, tend to believe that all moral concepts are an imposition of values by one person or culture on another.

This flawed perception of the concept of morality has been reinforced by the over-identification of morality with sexual values. It is sad that morality's realm has become so circumscribed—sad that morality has come to seem incompatible with acceptance of others and respect for their right to live life

as they see fit. It is sad because being moral is not fundamentally about the sorts of sexual acts one enjoys or about sexual fidelity or identity. And being moral is not about being blind to the virtues of diverse cultures or about rejecting the unique ways of individuals who do not conform.

Being moral is about being a good human being, surely an important concern even in the postmodern era. Morality should be understood not as a behavioral straitjacket inherited from a time of hypocritical constraints. It should be understood in contrast to being immoral, i.e., to being bad or evil, or in contrast to being amoral, i.e., being indifferent about being good, or in contrast to being purely self-interested or self-indulgent without regard to the well-being of others.

I would argue—with the Dalai Lama,³ for example—that being moral has everything to do with compassion, with caring about others, with seeking to find a fit between what is good for oneself and what is good for others.

Given this definition of morality, social work is fundamentally a moral profession. It is a profession that is devoted to pursuing the well-being of others.⁴ And it is the goal of a school of social work, therefore, to try to help you to become caring people who are devoted to pursuing the well-being of others.

Were the desire, the intention, to help people all that is needed, no one who chooses to attend a school of social work would need a social work education. I'm sure all of you have chosen to become social workers because you want to help people. But intention is not enough. Not all acts of caring or compassion are good. One can, and many people do, pursue well-being clumsily or even stupidly. The goal of a school of social work, therefore, is to prepare you to pursue the well-being of others with skill, with sophistication, with subtlety.

The starting point for this is the seemingly simple understanding that all human beings are multi-dimensional. Each of us is an individual. But each of us is also part of a family; a number of communities; a people; a nation; a society; a world composed of diverse peoples, societies, and nations; a global economy; a species with powerful biological imperatives, and a global environment.

Those who are religious would add that those who choose—or are chosen—are also part of a religion and that each of us, whether we believe it or not, is part of a spiritual whole.

At Columbia, this is called the "ecological" perspective of social work.

In addition to its implicit respect for human complexity, this perspective makes clear that for social work there are multiple possible points of intervention to help improve the lives of people. Individual psychotherapy, family therapy, building social skills, acting in *loco parentis*, helping those who attend to physical needs, negotiating social systems on behalf of individuals and families, community development, working for social and political change, humanizing the workplace, seeking economic justice, protecting the environment, and helping people confront their spiritual challenges—these and more are all roles that social workers play.

This diversity of possible helping interventions breeds certain unavoidable and irreconcilable tensions because it produces diverse understandings of what contributes to the well-being of human beings; it produces diverse methods to promote well-being; and it produces diverse values.

Convictions can clash and seem contradictory.

I think this strengthens social work. It makes social work a pluralistic profession, a profession which, therefore, is resilient and which is adaptable to the tensions and contradictions of pluralistic societies and to the diversity of the people and communities that we serve.

There is a recurrent impulse in human history to try to eliminate contradiction from human life. It is an impulse that has played itself out in philosophies which attempt to construct grand theories in which all seeming contradictions are revealed to be consistent. And, unfortunately, it is an impulse which has played itself out in recurrent violent efforts to impose visions of human perfection on the world. ⁵ Think of the crusades, think of the Inquisition, think of the bloodbath that followed the French Revolution, think of the totalitarian societies that emerged from the effort to force Marxian predictions of historical evolution on recalcitrant social structures, think of fascism's brutal and unwavering devotion to purifying the human race by slaughtering or working to death millions of Jews, Poles, socialists, and others who did not conform to its image of human perfection.

Plato was the first to try to construct a theory in which all contradictions were reconciled and in which the tension between the individual and the social was put to rest. His solution, for all its philosophical brilliance, should have served as a warning about the dangers of repressing diversity. What he sketched in *The Republic* ⁶ was a totalitarian society that denied the imperatives of individuality, love, and family in favor of playing one's role as a member of a nation.

Since then, a huge number of thinkers—and, unfortunately, doers—have been drawn by the siren song of consistency and the promise of human perfection to countenance violence in the name of idealism.

Many, however, were not seduced. Aristotle, for example, although a student of Plato, condemned his social vision as unsuitable to the realities of human life. He appreciated that human beings are flawed and susceptible to the temptations of money and power and that there could be no "philosopher king," as Plato called his recommended despot. Aristotle argued, therefore, for the protection given by democratic societies that tolerate difference.

In *Civilization and Its Discontents*,⁸ Freud made a similar observation but from the standpoint of the inner workings of human life. He noted that the many dimensions of human life are in constant tension. In essence he told us that integrity as an individual, loyalty to a spouse, devotion to family, commitment to work, responsible citizenship, support of global justice, commitment to the survival of the environment, and love of God or comparable spiritual devotions are not values that can be achieved simultaneously. Human life is inevitably imperfect; and, Freud maintained, it is not the job of psychoanalysts to eliminate the tensions and contradictions of human life.⁹

Similarly, I would argue, it is not our job as social workers to try to make life perfect, but only to help people find a reasonable degree of satisfaction with themselves and their situation.

Wait—"help people find a reasonable degree of satisfaction with themselves and their situation." Doesn't this sound too passive? Perhaps this is better: our job is to help people to **shape** themselves and their world—that's the active part—**shape** themselves and their world so far as they can so that they find a reasonable degree of satisfaction with themselves and their situation.

That seems reasonable, doesn't it? But it bothers me. There's still something too accommodating about it. It feels like collaborating with a terrible regime. It reminds me somehow of the movie *Seven Beauties*, ¹⁰ in which a worm of a man—a very good looking, highly sexual worm of a man—saves his own life by having sex with the vicious woman who is the commandant of the concentration camp where he has been imprisoned. Another character in the film, a profoundly intelligent and humane professor, drowns himself in a cesspool to escape the horrors of the camp. There should have been another alternative—a revolutionary alternative, a battle to overthrow the gross injustice of the place.

To some social workers helping people to find satisfaction within the constraints of human societies is the rough equivalent of Seven Beauties—as he was called—saving himself through a degrading act. The middle ground—of supporting a process of mutual accommodation of person and society—is not enough for them. They want a social transformation.

I am not a social revolutionary. Personally, and in my social work career, it has always seemed reasonable to seek a balance between personal improvement and social accommodation. That is probably why I have become a mental health advocate—seeking social changes to make it possible for people to help people struggling with psychological problems and psychiatric disabilities. Who knows?

The important point is that there is always this tension between measured, reasonable efforts to help people and their world accommodate to each other and a more revolutionary impulse to transform the world so that it promotes human fulfillment. Over the years there have been a number of efforts to resolve the tension between these two points of view. The most recent that I know of is the concept of "empowerment." ¹¹

When it is used with meaning rather than as an idle utterance by people who haven't grasped more than the sound of it, I like the concept of empowerment. It makes clear that there are two fundamental dimensions of social work. One is the effort to help people—especially people who are poor and are at the low end of the social totem pole—become strong enough in themselves to flourish in the world in which they find themselves. The second is the effort to change the world, to reduce the obstacles that are strewn in the paths of people who struggle to make life more than mere survival, the effort to create opportunities where now there are barriers of disadvantage and discrimination.

But, with great respect to Barbara Simon, who has done a brilliant job of shaping this concept to heal the rift in social work— I do **not** believe that the concept of empowerment ultimately succeeds. Empowering individuals, families, and communities to pursue their well-being more effectively while at the same time loosening the biases and constraints of hierarchical societies so as to give people social and political power does not adequately account for the vast diversity of social work. It ranges from the pursuit of slow inner transformations on one end of the spectrum to the pursuit of vast social transformations on the other.

Nor does it account for the anger of many people who want social transformation. They don't want just social accommodation. They believe that society is rotten to the core, that it has been constructed by rich people for the benefit of rich people with occasional droppings from the table for the

poor. They believe that the consciousness of people lowdown on the social hierarchy has been warped by ideologies which blind them to their personal and economic self-interests. They believe that democracy is a false promise, that the political process in the industrialized world is controlled by the rich, who essentially buy power. They believe that the economic, social, and political structure of the industrialized world is inherently unjust, oppressive, racist, sexist, etc. They believe that it is a structure that ultimately will result in the destruction of our planet either through nuclear holocaust or decay of the global environment.

In contrast, social activists like me experience considerable disenchantment with society as it is but tend to believe that capitalism is the source of the kinds of beneficial material comforts which became widespread in the industrialized world and have been slowly coming to some parts of the developing world. We tend to believe that democracy provides a framework through which the interests of people who are poor and out of power can be represented—even though they often are not. We believe that we can effect significant social changes within the framework of a democratic, capitalistic society even though such changes often take a very long time.

There are also social workers who are compassionate—dare I say it conservatives. 12 They tend to believe that social services need to be embedded in religions and to offer faith and salvation. They also believe that becoming a successful human being depends to a great extent on people having or developing a strong sense of personal responsibility. Many supported the change in the American social welfare system enacted through the Personal Responsibility Act, the change that set time limits on the receipt of welfare benefits and insisted that people who are not disabled work for a living. They may also support traditional sexual values—which they tend to refer to as "family values". And many oppose abortion.

In addition, there are a great many clinical social workers who do not regard social change as part of their job as social workers even if they support it personally. Professionally they tend to be apolitical, to believe that inner, personal transformation is the path to well-being and that the need for such transformations is not limited to people who are poor or disempowered. They just do not buy the view that we have a responsibility as social workers to devote ourselves solely to the lower end of the social hierarchy. Our responsibility is to promote healthy human development and well-being among all people who experience personal suffering.

These perspectives are different. None of them is entirely right or entirely wrong. Each brings a profound and powerful insight to the pursuit of human well-being. They are insights that should cause us all to waver in our points of view and to have some humility about what we know and do not know.

Social Work Knowledge

Social work, to say it again, is unavoidably—and wonderfully—a diverse profession. This creates quite a challenge to social work education.

I have said that social work education pursues the vision of a moral profession and that its goal is to facilitate the development of people who are caring and compassionate and who seek to promote the well-being of other human beings. But—given the diversity of the profession—how do we do that? How do we prepare you to help people intelligently while also respecting your right and inevitable obligation to choose among the diverse forms that help can take?

Part of the answer is by offering a diverse curriculum taught by a diverse faculty with diverse backgrounds and bases of knowledge. (It's a faculty that is so diverse that it is sometimes at each other's throats, but that's another story.)

But a larger part of the answer, I think, is that social work education seeks to prepare people more for practice than for theoretical speculation. Social work education is rooted in placements in real life settings, settings that serve people more complex than any image or theory can ever capture.

The centrality of placement to social work education reflects the fact that social work knowledge is rooted in experience. Social work methods are not based on moral precept or on faith.

This sense of the empirical base of social work knowledge in no way conflicts with my claim that social work is a moral profession or with my observation that some social workers are religious. There are several theories of morality. One of these theories is that doing good is following rules derived from one source or another. Another theory is that doing good is bringing about good outcomes. A third theory is the good actions emanate from good character. My view is a form of the third theory—that morality is compassion put into intelligent action in pursuit of human well-being.

Social work knowledge is not the source of our compassion; it is the source of intelligent action, which is acquired from experience of real people in the real world and from conceptualizations and theoretical formulations derived from such experience.

Similarly, although some social workers may become social workers because of religious faith and a belief that they have a calling, their choice of methods is—or should be--derived from experience about what helps people

and what does not rather than from religious precepts. Method, if not motivation, is empirical rather than religious.

In this regard social work is a product of a modern, post-enlightenment culture. It draws on a scientific impulse. Post-enlightenment culture is progressive in spirit. That is, it believes that knowledge will unfold over time. The quest for new insights and new discoveries is inherent in the scientific impulse as is the attempt to produce constant refinement of our methods and techniques.

Post-enlightenment culture has been challenged by a variety of points of view which are collectively referred to as "post-modernism." ¹³ These views are highly disparate but have in common skepticism, or even pessimism, about the possibility of empirical knowledge, particularly about human beings and human societies. The postmodern view is that beliefs that pass for social knowledge are simply reflections of various modern cultural biases. We are trapped, presumably, by our very languages into perceiving the world in ways which reflect the ideologies and biases of the cultures in which we have been raised and socialized.

I believe that there are two reasons why some social workers have been seduced by post-modern claims. First, postmodernism seems to fit their sympathy for people from "minority" groups and non-industrial societies. Second, postmodernism seems to provide intellectual support for the conviction that social workers should never impose their values on other people.

I will discuss the challenge of postmodernism later in the lecture. For the moment, I want to return to the nature of the empirical knowledge social workers use and develop.

Social workers draw heavily from the social sciences.

Clinical social work relies on psychological theories developed primarily outside of the field of social work. There are still Freudians among us as well as ego psychologists, interpersonal theorists, and others.

Group workers, community activists, social work administrators, and social work researchers also draw heavily from knowledge developed outside the field of social work.

But that is not to say that social workers have not made major contributions as well. Intelligent conceptualizations developed by social workers who are immersed in the realities of human life are not uncommon. You will encounter many of these theories, models, and frameworks in your courses

at Columbia. They will often be extremely useful, and I urge you to absorb as much as you can of them.

But none of the theories, frameworks, or models you will be taught will be fully adequate. All eventually are stretched beyond credibility by some concrete situation that the theory or framework cannot handle.

They need to be understood as useful devices rather than theories of higher and higher orders of truth.

For example, if any of you study social advocacy with me, I will teach you the Friedman framework for advocacy planning¹⁴ as well as frameworks developed by Prof. McGowan,¹⁵ by Brager and Holloway,¹⁶ by Cloward and Piven¹⁷, and others. And I will show you how none of these frameworks is fully adequate—even my own. My framework is pretty good for planning political action within the context of democratic process. McGowan's is very useful for case advocacy. Brager and Holloway's field theory is enormously helpful for working towards change from inside an organization. Cloward and Piven have much to tell us about riding waves of social dissensus to bring about large social changes. But none of these frameworks is adequate for all situations in which advocacy is called for.

As social work students, you will also be exposed to frameworks of individual intervention derived from Freud and his followers, to frameworks of human development derived largely from Erikson¹⁸ and Piaget,¹⁹ to frameworks of family intervention derived from a variety of theorists, to frameworks of mixed individual, family, and social interventions derived from the work of some of the great social workers such as Mary Richmond,²⁰ Helen Harris Perlman,²¹ Carol Meyer ²² (who taught here at Columbia), and others.

The experience and frameworks of understanding formulated over the history of social work will help you, but ultimately you will need to subject them to the test of your own experience. You need to learn to see as we, the faculty, want you to see; but you also need to see for yourselves and to conceptualize for yourselves.

This is very important, I think. The theories you learn will help you to see some realities you otherwise will miss. But if you accept any of these theories uncritically, you will be blinded to other perspectives that can be brought to bear on the same realities.

This is what is known as epistemological pluralism, and it is similar to the moral pluralism I discussed in the first part of this lecture. Like moral pluralism, it has the potential to strengthen social work because human

reality is too complex to be captured by any single theory and because the clash and exchange of ideas produces cognitive progress.

I confess that I love the give and take of a good debate and tend to believe that, in matters of human life, individual observations formed into conceptualizations subjected to critical reflection involving a number of good observers often provide as good insights as there can be.

But this view that good social work is a mix of insights and models of practice derived from a variety of fields and from insights and concepts derived from professional experience has increasingly been challenged by the view that social work practice should be more scientific, that it should be thoroughly informed by research.

Science is not about how you see things or I see things. It is about consensus of perception and consistency of findings among diverse researchers. The current catchphrase for this idea is "evidence-based practice." ²³ It is the belief that we should use practices that are supported by research findings.

This makes a great deal of sense. Drawing only from your own experience and the experience of people who do similar work inevitably subjects you to the bias of limited experience. Clinicians, for example, need to be very careful about drawing conclusions about the lives of people with schizophrenia because they only see the people who are in trouble. There is reason to believe that many people previously diagnosed with schizophrenia are actually leading lives that they find satisfactory and that, therefore, they don't seek help from mental health professionals.

In general, we need to be careful about beliefs about the success of our interventions because our impressions are inevitably formed from our experience with the people we serve. ²⁴ The people who are on our caseloads are generally people who choose to be there and feel that they get something important from the help we offer. What about all the others? What about the people who called and decided not to come in or were turned away? What about the people who never returned after their first appointment? What about the people who repeatedly don't show up? What about people with problems who manage without us?

If our caseloads are filled with people who are helped by our methods, we tend to believe that our methods are in general helpful. Not a reasonable conclusion.

In fact, there is a widespread impression—especially by the governmental agencies that fund our practice—that social workers, and others in helping

professions, persist in the use of practices that are not effective for the majority of people who need help. There is even a widespread impression that social workers and other helping professionals persist in practice which research has shown not to be effective.

For example, in the aftermath of the terrorist acts of 9/11, there was a widespread belief that survivors of the attacks should be given critical incident debriefing ²⁵ to help them deal with the immediate emotional distress of the disaster. However, there was already evidence from research on this method not only that it doesn't work but also that people who get critical incident debriefing are more likely to develop post-traumatic stress disorder than those who do not. Research also indicates that other forms of emotional first-aid²⁶ are effective. Clearly this is a case in which evidence-based practice should have been used.

The belief that practices that do not work are nevertheless used has led to a movement among those who fund social work services to spread the use of evidence-based practice. It is an important movement, which I support. But there are problems. No doubt we need to identify and use evidence-based practices. No doubt, we need to stop using practices that are known not to work; no doubt we need to recognize "clinician" bias; and no doubt we need to evaluate our practice empirically and systematically rather than impressionistically. But we cannot rely solely on evidence-based practices, if only because so much of what we do has not yet been subject to research and because we cannot ethically wait to use practices that have been supported by definitive research.

Research does not, and cannot, keep pace with the need for practical knowledge in real world environments dealing with complex people in complex environments served by complex systems. Should we renounce the use of practices experts support because of a lack of definitive research? Should we hold off on the use of promising, innovative practices until their effectiveness has been confirmed?

Given the limits of evidence-based practices available at this point in history, I prefer to talk about the importance of using "state-of-the-art" practices, i.e., practices that experts believe are the best that we can do at this moment in history. This concept is meant to suggest that we should give up practices that appear to be of limited or no value in favor of those which have either research or expert support. It is also meant to suggest both the kind of humility we should have about what we know and the hope we should have about the progress of knowledge and the consequent change of the state-of-the-art over time. And finally, it is meant to call attention to the need to act to help people now. We cannot wait for researchers to tell us how.

Fortunately, the field of social work has developed methods to enhance our impressions that do not require the rigors of completely scientific studies. I am thinking particularly of organized program evaluation. At its simplest program evaluation is a comparison of our goals with our achievements. A program is set up to serve a certain number of people. Does it? A program is set up to serve people with certain kinds of problems, to serve particular populations. Is it perhaps serving others instead? A program is built on certain expectations about the productivity of workers. Are they achieving it? Most importantly, programs are set up to improve people's lives in certain ways. Children who have experienced abuse or neglect should be able to live in security in a permanent home. To what extent does this happen? People who have no source of support are entitled to various benefits. Do they get them or do they get turned away? People with serious and persistent mental illnesses are supposed to be able to lead lives that they find satisfying in the community. Do they or are they doomed to a marginal existence despite our efforts on their behalf? We can answer some of these questions without definitive research, and we should.

At the beginning of this section of my lecture, I said that social work is more about practice than theory. It is a practical art, which should be informed by the scientific knowledge that is available; but it is also an art that has arisen out of the perception that many human needs are urgent. That sense of urgency is an important part of the value and nobility of our profession.

Coming To Terms With Culture

Now I want to talk a bit about the postmodern challenge to the scientific cast of social work and more importantly about how this postmodern perception has been embedded in the concept of cultural competence, ²⁸ which has become one of the dominant themes of social work practice.

I want to be clear at the outset of this discussion that I believe that cultural competence is a critical dimension of social work practice and I wholeheartedly support its emergence as a core requirement of social work education. But I think it needs to be carefully defined and carefully distinguished from a kind of uncritical cultural relativity that produces a profoundly conservative tendency to accept some forms of personal suffering as a matter of social fate.

And I think that you should anticipate that, as with the rest of social work practice, the tensions of the diverse political perspectives I spoke about at the beginning of this lecture will vastly complicate the task of being culturally competent.

What is cultural competence? It is both skill in interaction with clients from diverse cultures and a characteristic of sound service systems.

The skills of cultural competence rest on understanding cultural differences and their implications for engagement, assessment, and intervention with people we want to serve from cultures other than our own.

A culturally competent **system** is a bit more complicated to characterize. I find it useful to think in terms of five key characteristics.

- (1) A culturally competent system is built on understanding that different cultures follow different pathways to help ²⁹ and establishes outposts along these pathways. More simply stated a culturally competent system provides extensive outreach to various cultural groups and provides as much education about the usefulness of professional services as it can.
- (2) A culturally competent system is built on recognition of the importance of language and bicultural experience. Therefore, such a system actively recruits and then hires as many people from the cultures of people to be served as it possibly can.
- (3) A culturally competent system is also built on recognition of the need to train workers in the subtleties of engagement, diagnosis, assessment, and treatment of people from diverse cultures. It helps human service providers, for example, to understand differences in expression of need and differences in expectations about the provision of help.
- (4) A culturally competent system is built on understanding of the importance of participation in the power structure of the system. Therefore, it attends carefully to the promotion of diverse staff to supervisory and management positions, and it promotes the inclusion of members of the populations served on boards of directors, in regulatory agencies, etc.
- (5) And finally, a culturally competent system anticipates intercultural, particularly interracial, tensions and conflicts; and it attempts to provide processes through which these conflicts can be ameliorated if not eliminated.

It's unlikely that any contemporary social workers would object to these abstract conceptualizations of cultural competence. But in real life practice things can get sticky.

For example, a while ago the journal *Social Work* published an article on working with Indians who are Hindus³⁰, that it claimed was a good example of cultural competence.

The article offered, I thought, a fairly good picture of the ordinary Hindu family, but in pointing out that women are generally subservient homemakers in Indian families, it implied that this is something that a social worker not only needs to understand but also to accept. There are several problems with this.

First, in fact, there are many Hindu women who do not accept a role as subservient homemakers. They work outside the home for pay. They insist on equality. And they believe that Indian women should become more self-sufficient and independent. For example, when I was in India, I visited a program that is devoted to teaching women to read and to be tailors so that they have the opportunity to escape from men who, they told me, are often exploitative if not downright abusive. The people who run this program include good Hindus, who simply do not accept the traditional role of women. There are many such Indian women—and men. (For a good view of this, go see a recent Indian film called *Bride and Prejudice*.)

The second problem with the view that a culturally competent social worker should accept the prevailing social structure is that acceptance of some of the customs in India has dreadful consequences for some women. For example, dowry death—the murder of women after they marry and have paid their dowries—is apparently not uncommon in India. And, although it is against the law, it is often overlooked in fact. Surely, we should not accept this custom in the name of cultural competence.

The third problem is that it is not clear that cultural competence means acceptance of such social inequities as women playing a subservient role. That it is traditional doesn't make it right.

This is the conservative danger lurking in cultural competence. We are told not only to understand but also to respect cultural traditions. But some of these traditions involve the subservience of women, the exploitation of very poor people, or the de facto, if not de jure, political disempowerment of people in the lower classes—to mention just a few of the political downsides of tradition. Never forget that slavery was a tradition in the United States and was defended as a key element of the Southern culture. Never forget that virulent anti-Semitism is a traditional part of some cultures.

Before I am misunderstood, I want to repeat that I support cultural competence. The issues here are not as simple as for or against.

> The key issues are that:

- 1. Cultural competence, like all concepts, can be pushed beyond the limits of its usefulness.
- 2. Cultural competence is not a morally and politically neutral concept. It may result in more acceptance of the social situation of one's clients than is necessary or right.
- 3. Cultural competence should not be confused with cultural relativity, which is a profoundly conservative stance because it accepts all social practices and traditions as as good as all other practices and traditions and thus provides no grounds for seeking social change.
- 4. The meaning and use of the concept of cultural competence are as much subject to the fundamental debates of our pluralistic profession as many other concepts.

And that, I would argue, is good. Pluralism is of the essence of social work; it is a major source of its vitality. That means that hopefully you will not learn the one and only truth at the School of Social Work. Hopefully, you will be exposed to many perspectives and encouraged to develop your own opinions. Ultimately you will have to make judgments for yourself.

I hope that you do not make those judgments too quickly. I would recommend that you try to develop the habit while you are in school of subjecting what you read and what you are taught to critical scrutiny. Remain open to the possibility—to the likelihood in fact—that there are other perspectives to be brought to bear on your experience, perspectives which will open up new insights on realities which are always too complex to be captured by any single point of view.

What makes this particularly difficult is that you can't just sit around making judgments and re-judgments. You have to act. That in some ways is the core challenge for those of us who want to work for the well-being of other human beings. We must act without ever being totally certain.

At the beginning of this lecture, I quoted from Allan Bloom's book, *The Closing of the American Mind*. This book is sometimes seen as the last gasp complaints of a whiney elitist regretting the shift of American education from the study of the works of dead white men to a far broader range of work including women, people of color, people from diverse cultures, and people from developing nations.

That is not a totally inaccurate reading, but it misses the more profound and fundamental point of the book—that moral and cultural relativism has led to a kind of intellectual cowardice, to a stubborn refusal to scrutinize and make judgments about culturally accepted practices and beliefs. That cowardice is what Bloom regrets as "the closing of the American mind."

I wish you the courage it takes to keep an open mind.

¹ Bloom, A. (1988). The Closing Of The American Mind. Simon and Schuster.

² Haynes, K. (1998). "<u>The One-Hundred Year Debate: Social Reform vs. Individual Treatment</u>" in *Social Work*, November 1998.

³ Dalai Lama (1999). Ethics for the New Millennium.

⁴ NASW Code of Ethics (1999)

⁵ Berlin, I. (1988) "Pursuit of the Ideal"

⁶ Plato. The Republic.

⁷ Aristotle. The Nichomachean Ethics.

⁸ Freud, S. (1929). Civilization and Discontents. Civilization and Its Discontents - Wikipedia.

⁹ Freud S. (1937) "<u>Analysis Terminable and Interminable</u>".

¹⁰ Wertmuller, L. (1975) <u>Seven Beauties</u>.

¹¹ Simon, B. (1994) <u>The Empowerment Tradition in American Social Work</u>. Columbia University Press.

¹² Olasky, M (2000). Compassionate Conservatism The Free Press.

¹³ Duignan, Brian. "Postmodernism". Encyclopedia Britannica, 23 Dec. 2022.

¹⁴ Friedman M. SPEAK FOR YOURSELF (michaelbfriedman.com)

¹⁵ McGowan, B. (1988)"Advocacy," in Encyclopedia of Social Work, (18th ed.), NASW Press.

 $^{^{16}}$ Brager, G. & Holloway, S. (1992) "Assessing Prospects for Organizational Change: The Use of Force Field Analysis," *Administration In Social Work*.

 $^{^{17}}$ Cloward, R. & Piven, F. (1999) "Disruptive Dissensus: People and Power in the Industrial Age," in <u>Reflections on Community Organization</u>, Jack Rothman (Ed.

¹⁸ Erikson, E. (1959). *Childhood and Society*

¹⁹ Jean Piaget - Wikipedia

²⁰ Mary Richmond - Wikipedia

²¹ Perlman, Helen Harris | Encyclopedia.com

- ²³ McNeese C. and Thyer B. (2004) "<u>Evidence-based Practice in Social Work</u>" in *The Journal of Evidence-based Social Work*.
- ²⁴ Cohen P. and Cohen J. (1984). "<u>The Clinician's Illusion</u>" in *Archives of General Psychiatry*. December 1984.
- ²⁵ Jacobs, J. et al (2004). <u>The effectiveness of critical incident stress debriefing with primary and secondary trauma victims PubMed (nih.gov)</u>
- ²⁶ Psychological First Aid: How You Can Support Well-Being in Disaster Victims (cstsonline.org)
- ²⁷ Stockton S. (2010). The Rise of Evidence-Based Grantmaking (ssir.org)
- ²⁸ CDC. Cultural Competence In Health and Human Services | NPIN (cdc.gov)
- ²⁹ Rogler, L. and Cortes D. (1993) <u>Help-seeking pathways: a unifying concept in mental health care PubMed (nih.gov)</u>
- ³⁰ Hodge, D. (2004) Working with Hindu Clients in a Spiritually Sensitive Manner on JSTOR.

M.B. Friedman

²² Meyer Carol.pdf (columbia.edu)