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Abstract

This small-scale interview study considers experiences, difficulties and dilemmas of local SEN (Special Educational Needs) professionals such as SEN Caseworkers, and examines the neglected ethical dimensions of their role. It argues that fostering ‘ethical knowledge’ (Campbell, 2003), rather than an increase in prescriptive guidance, will enable more productive partnerships between professionals, and between parents and professionals respectively. The study demonstrates a SEN professionalism that is able to respond to moral complexity and that is willing to carry significant personal and moral burdens in order to meet the needs of children and young people with SEN. It also highlights experiences of routine moral stress (Cribb, 2011) which are not adequately addressed by either individuals or their organisations.
Ethical Accountability and Routine Moral Stress of SEN Professionals

Introduction

The context of this study is the recently introduced SEN Code of Practice (DfE, 2014) which intensifies expectations of, and makes more prescriptive demands on multi-agency partnership working for SEN professionals, as well as on working in closer partnership with parents. These new expectations and arrangements were first articulated in Support and Aspiration (DfE, 2011), the Coalition government’s landmark green paper on SEN. In it, the widely recognized current under-performance of the SEN system (Lamb, 2009) is explained by inadequate guidance for local professionals, rather than by the inherent complexities of the cases those professionals are seeking to support. No consideration is given to ethical or moral issues which exacerbate the complexity of professional responsibilities and relationships, and which may be felt as “moral burdens” (Cribb, 2011) equal to or greater than the bureaucratic burdens acknowledged in the report.

The 1981 Education Act first gave LAs (local authorities) important statutory functions in providing services for children with SEN. The main functions are to agree to and co-ordinate multi-professional statutory SEN Assessments, often resulting in what is now known as an Education, Health and Care Plan (EHCP). The EHCP sets out the additional provisions a named school and other local services have to make available for an individual with SEN, as well as the desired outcomes resulting from the provision (DfE, 2014). EHCPs are monitored through the Annual Review cycle and can be challenged through the SEND Tribunal. There is a strict timeline for completing the Assessment and the Plan, which forms part of the Single Data List performance data LA’s submit to central government (DCLG, 2014). This
work is carried out by SEN Caseworkers who may be qualified teachers or have other professional qualifications, although this varies from authority to authority. SEN Caseworkers increasingly operate in multi-disciplinary teams with Educational Psychologists, Advisory and Specialist Teachers and School Improvement Officers, and are now required to work closely with colleagues in Social Care and Health.

Whilst *Support & Aspiration* (DfE, 2011) and the recently issued SEN Code of Practice (DfE, 2014) do not address ethical dimensions, Fiedler & Van Haren (2009: p.160) argue that “the field of special education is wrought with ethical dilemmas”. Cribb (2011: p.119) describes the conflicts arising from negotiating tensions between the “normative expectations attached to [a] role and one’s own moral compass” as the “routine moral burden of occupying a professional role”, resulting in professionals experiencing moral stress because of the ‘impossibility of upholding all interests and values at stake’ (the definition of moral stress first offered by Kälvemark et al., 2004). The role of SEN Caseworker typically incorporates statutory, administrative, advisory and advocative functions where these competing interests and values are experienced on a daily basis.

**Professional ethics, ethical codes and ethical uncertainty**

There are many conceptualizations of professionalism and professional identity (Carr, 2000; Sculli, 2005; Evetts, 2006) with a general agreement that contemporary professional identities are threatened by audit and accountability practices. Critiques of managerialism highlight the friction between institutional and vocational identities and the resulting undermining of autonomy and personal judgement, with a shift in emphasis from ethics to efficiency (Ball, 2004). The biggest threat to professionalism
is seen in the “elimination of a moral landscape” (Stronach et al., 2002: p.130) with values such as autonomy, trust and risk-taking disregarded and conceptions of “uncertainty as the home ground of the moral person” (Bauman, 2008: p.63) considered to be in direct opposition to professional competence. Ehrich et al. (2013) distinguish between a professional accountability concerned with upholding professional standards, and moral accountability concerned with building and improving relationships. They argue that multiple forms of accountability pull professionals in different directions (compliance with organizational requirements versus the specific needs of a child for example), but also hold competing demands in balance, which is why moral accountability should be recognized as one facet in the multiple accountabilities required of professionals.

A key feature of traditional professional ethics is the adherence to norms defined by a professional body and articulated in a code of practice. It implies that individuals have the ability to reflect on the ethics of choices and have the opportunity to make considered decisions. Merely following ethical codes may, however, be unethical as it removes the responsibility of considered professional action from the professional (Dawson, 1994). Dawson describes ethical conduct that is guided by following professional codes as ‘outside-in’ professionalism, which he argues is limited in its usefulness for complex decision-making, and puts forward an ‘inside-out’ professionalism instead. This understanding of professionalism relies on practical wisdom and the application of common sense, gained from experience and moderated by communal reflection, as suggested by Aristotelian notions of virtue ethics.

Rejecting this polarization of outside-in and inside-out professionalism as “too morally obvious”, Stronach et al. (2002: p.125) focus on the “local, situated and
indeterminable nature of professional practice” (p.109) instead, where diversity and trust is valued in order to address the contradictory demands of the role. Whilst professionals may experience themselves as professionals in the very instances of tensions, contradictions and compromises “between the actual and the ideal, the possible and the desirable” (p.131), they will also identify with other like-minded local professionals in expressing a collective allegiance.

**Ethical decision making, moral dilemmas and moral stress**

Campbell (2008, p.366) advocates for a professionalism that demands both a collective and an individual sense of ethical responsibility; she proposes the concept of “ethical knowledge” as the defining knowledge base of teaching as a profession, understood as practical wisdom distinct from technical competencies, and as offering “tools for thinking about difficult matters”. However, this is not easily achieved, exemplified by the extensive body of literature which focuses on empirical studies of dilemmas, tensions and challenges which may jeopardize moral agency and ethical practice. Moral dilemmas manifest themselves in whether to openly voice moral opposition, quietly subvert expectations, or to live with the guilt of doing nothing; and in opposing interpretations about what constitutes the best interest of a child (Campbell, 2003). SEN professionals also experience the common ethical dilemmas of advocating for an individual’s need or interest versus meeting obligations prescribed by employer expectations, and particularly point to dilemmas between recommending ‘appropriate’ versus ‘available’ services (Helton et al., 2000), often resulting in moral stress.

Cronqvist et al. (2006) describe moral stress as the strain between personal (moral) values and professional requirements, where it may be clear what is expected and should be done, but not whether this ‘ought’ to be done. Whether to act in line with
this ‘ought’ or not is the difficult decision to make, and the process of considering the choice and its possible outcomes lead to feelings of stress. Kälvemark et al. (2004) distinguish between moral uncertainty, moral dilemmas where two or more principles and values conflict, and ‘moral distress’, where cognitive processes of deliberation result in affective discomfort. Moral distress is defined as “traditional negative stress symptoms that occur due to situations that involve ethical dimensions where [professionals] are not able to preserve all interests and values at stake” (p.1083).

‘Initial distress’ may cause feelings of frustration, anger and anxiety, but often results in an active response and assumes agency, whilst ‘reactive distress’ inverts these feelings into depression, nightmares, headaches and feelings of worthlessness. Identified causes for moral stress include: lack of available resources; having to choose actions which break regulations or established local practises; conflicting interests of those involved in decision-making processes; and a lack of supporting structures (Kälvemark et al., 2004). Cribb (2011) particularly focuses on the everyday and ongoing aspects of moral stress. Whilst they do not necessarily constitute crisis points for individuals because they realize that the potential harm or wrong done is quite small, and that the demands made on them appear legitimate, they are “burdened” by these tensions nevertheless.

The Research Project

This project was conducted in line with BERA (2011) guidelines for ethical research and located in a interpretivist, phenomenological research paradigm (O’Leary, 2014) with the research question arising from the convergence of personal experience, new government policy and existing literature on professionalism and professional ethics. Potential participants were approached via e-mail and five in-depth semi-structured interviews with SEN Caseworkers were held between October 2013 and February
2014, lasting for about one hour each, with the researcher viewing the process as interactional (Rapley, 2004) and herself as an insider. The recorded and transcribed interviews were coded and analysed drawing on constructivist grounded theory techniques (Charmaz, 2014). Data was anonymised and participants were given pseudonyms. All participants worked for the same local authority at the time of the interviews and were qualified teachers and experienced professionals. Whilst Julie, Gill and Victoria were long-serving members, Cathy and Mary were recent additions to the team.

**Recognition and experiences of routine moral stress**

Routine moral stress is a concept participants easily identify with once introduced. Julie ‘can absolutely, absolutely identify with it’ and states that ‘it is constant’, echoing Mary’s ‘yes, it happens all the time’, thereby highlighting the routine and pervasive nature of moral stress (Cribb, 2011). Victoria indicates that she only retrospectively linked very serious issues of personal well-being with ‘the stress of that role’, because whilst being confronted with difficult situations, ‘you just take it’.

A common reason given for experiencing moral stress is being inclined to side with parents rather than with the LA in a dispute: ‘I’ve seen both sides and can understand why the LA doesn’t agree, but it’s not necessarily what I would have done – my personal views’ (Victoria), reflecting here on the conflict between understanding a position that is adopted and a view that is held, and exemplifying the tension between what ‘should’ and what ‘ought’ to be done in Cronqvist et al.’s (2006) terms. Cathy explains that ‘meeting parents, you have to present the authority’s side of it, when actually sometimes you could think that you would be more on their side’. This is particularly the case when it is easy to understand what and why parents want
something, whilst at the same time not fully understanding what one’s own role requires and why. Being insufficiently inducted into the local rationale and local procedures may be one reason for the lack of understanding.

Participants agree that ‘the crunch point is often the SEND Tribunals’ (Mary), highlighting the tensions between the needs of the individual versus that of the whole community. Victoria relates a situation where the tribunal agreed with her own and the LA’s view that a 7-year old child with Autism would not be best placed in an out-of-borough residential school, but which still left ‘parents struggling with their child’ and her with a sense that although she ‘won’ a victory for the LA, ‘you don’t come away feeling that you have’. And Julie describes how she was very aware of the stress a family experienced due to a disability of one of the children and how transportation to school for that child would alleviate stress in the short term; but she also recognized budget constraints, the potential of profiteering by unscrupulous taxi firms and a notion of parental responsibility and autonomy which she felt ought to encourage self-reliance rather than the reliance on transport provision. She sighs: ‘I can see both sides and …I definitely swing’, demonstrating the burden experienced when conflicting priorities and needs can’t be easily reconciled into straightforward solutions and where “not all interests and values at stake” (Kälvemark et al., 2004) could be upheld. Julie continues she ‘would have to be very hard-hearted…to say, actually, it is not better to get transport for your child’. She describes walking away from a difficult meeting where ‘I would have to justify that….the authority needs someone like me, it doesn’t mean I have lost my sense of compassion’.

Becoming hard-hearted is a repeatedly expressed concern. Victoria highlights a case where she was conflicted between what she rationally agreed with and had to act on in any case, and what she knew parents were thinking and feeling: ‘I’ve had a case when
I agreed with the LA, but I could see the parents’ view - and being a parent myself, you really feel for the parents, but you’re having to...’. What she desired was to allow herself not to act on ‘a hard: you’ve got to stick to this line’, but rather to demonstrate compassion and empathy by being inconsistent. Whilst Victoria is well aware of her professional obligation to be consistent and has acted accordingly, it contradicted some of her personal values and wishes and has caused her moral stress. Mary describes a panel discussion where a decision needed to be made regarding a statutory assessment. As the child’s condition had been made worse by medical neglect and previous failures, her feeling was that this child should have every support possible, even though it was clear that the child did not meet the threshold criteria. Moral stress here is experienced when the role requires individuals to be consistent and firm for the sake of equity and transparency, whilst common decency and empathy desires flexibility or even unprincipled leniency.

It is clear, however, that whilst sometimes there is a temptingly evident solution which can’t be offered, this is often not the case. Gill discusses an example where she felt like ‘walking out of a meeting and bursting into tears actually’ because she had to tell a parent that her moving outside of the authority’s boundaries unexpectedly due to domestic violence would necessitate a reversal of a promised placement decision. Gill had to deliver bad news: ‘although it was quite a small thing, in some ways it was actually one of the most distressing things. I felt that I’d had to deliver an unpalatable message to a parent who took it very well, and just looked very sad. I wished I’d had a magic wand and could have changed it’. This is very different from being a ‘jobs-worth’ (Mary) and hiding behind procedures, but rather demonstrates participants’ acceptance of doing the hard work of balancing fairness and need on behalf of the wider community, and of carrying the resulting burden (Cribb, 2011).
powerlessness to bring about a fitting solution is experienced as particularly difficult because a ‘reasonable and understanding parent’ makes the necessary task harder, where feelings of hostility from, or unreasonable demands by, parents might alleviate the distress to some degree.

Conflicts and dilemmas are not only external, however, and participants talk repeatedly about competing professional values that may come into conflict with each other as contributing to routine moral stress, such as when the commitment to partnership working and the commitment to prioritizing a child’s best interest collide. Julie relates a case where she felt the family’s main motivation for seeking a residential placement might have been to free up space in the home and so she had to ask herself whether she was ‘going to continue being a partner, even if what they want is unreasonable and …not in the best interest of the child’.

Being the go-between and representing the LA whilst making demands on front-line staff is also experienced as morally stressful. SEN Caseworkers will articulate expectations of excellence in front-line practice for the benefit of a child, knowing full well how hard this will be on their colleagues: ‘there is huge pressure that I am imposing on front-line staff and there is a huge range of need that they have to deal with’ (Mary). Routine moral stress is also experienced where individuals perceive their organisation to be passing on responsibility, often because of a lack of resources and a slow and bureaucratic system. For Mary this means that ‘we are washing our hands’ and that ‘we have failed, yes, we have failed individuals’. She remembers a case where no suitable local provision was available for a young person, contributing to a deterioration of his mental health and family relationships and resulting in the need for a residential placement far away from home. In her view this should have been prevented: ‘we had nothing for him…we pass on responsibility for something
that is our responsibility…we are not putting in the resources for our young people so they have to go elsewhere…and I think that is wrong’. Moral stress here is caused by identifying with yet distancing herself from (Cribb, 2011) an organisation that repeatedly fails individuals (note how she uses ‘we’ instead of the ‘they’ she could have adopted) and she views this as a personal failure also. Whilst participants could contribute these and many other examples of how routine moral stress is experienced, they are less clear about how to manage or resolve it.

**Managing Routine Moral Stress**

On the whole, there is an overwhelming sense of routine moral stress not being owned and managed – not by the organisation, but also not by individuals affected. Availability of support for any form of stress is not formalized, but rather depends on personality and priorities of individual managers, and crucially is not asked for or expected by SEN Caseworkers in the same way that is common practice for other professionals, such as social workers for example. Cathy remarks that ‘there are no formal procedures of regularly having a debrief’, and whilst recognizing that the supervision sessions that currently focus on discussing case procedures could be used in different ways, she is not inclined to do so. Mary adds: ‘my experience about one-to-one is about procedure, it is didactic, it is not [about] being able to offload [although] I do think there is a need for it’. Victoria reflects on panels where difficult cases are discussed, ‘but you wouldn’t be able to raise how that’s making you feel and you don’t always get the answers you want, so really, you are stuck’.

All participants, in contrast, recognize colleagues as ‘people to offload with, to share with, [who] understand where you’re coming from’. For Julie, ‘the way I am coping is to talk to others who are also doing the same kind of job, who understand completely’. Unlike teachers or social workers, however, there is only a very small pool of
professionals who occupy this kind of role from where support can be drawn. Some, but by no means all, individuals can fall back on partners as in Julie’s case to ‘not only get things off my chest’, but rather to get ‘that reassurance sometimes’ of remaining ‘compassionate and decent’, after a day of conflict.

Some participants can tolerate routine moral stress more easily due to confidence in their own convictions, including being convinced that the job is worthwhile doing. For Julie the point of the job is at least in part ‘because I fight for things. Yes, it is partly who I am as a person, I certainly see myself as someone who doesn’t just accept the world as it is’ and so she re-frames some of the moral stress as a moral crusade she is willing to sacrifice and suffer for. Developing resilience is seen as an important way of managing moral stress. Gill understands this as ‘being able to switch off’ and learning to dissociate, because she knows that ‘sometimes things are very difficult and it isn’t easy to resolve things and some things are ongoing’ and that with some families it is ‘very difficult to get things right’. She concludes that ‘if I walked around with the burden of the world on my shoulders, then I probably would not be doing it for much longer’. This is an interesting response from the longest-standing member of the team, and whilst it might be interpreted as the maxim of someone who has stopped caring, it is more likely the voice of wisdom from a practitioner who has learned to negotiate a personal path between identifying with and distancing herself from her role (Cribb, 2011). Whilst Julie seems much more exercised about moral burdens, she also discusses her ability to recover, to bounce back and move on; and that whilst she may ‘argue and argue and argue’ for an outcome she wants to see for a child, when she can’t achieve this, ‘at the end of it, what do I do? Nothing, get over it, you know, get over it and move on to the next phase, I have to’. Drawing this fine line between resignation and resistance has clearly become an important tool in the
repertoire of resilience for long-serving SEN professionals. Participants discussed in this context the very high turnover of SEN Caseworkers and the extended sick-leave of one of their colleagues.

The flexibility of the role compensates for some of the frustrations and helps participants to manage routine moral stress. Gill makes an interesting observation when describing that ‘it is quite nice to be out in schools and talking to people, it’s always very nice to go to a non-controversial review meeting…that’s the nice bit of the job’ and indicates how she is utilizing the autonomy of the job to ‘reward’ herself with positive experiences and encounters as a way of managing routine moral stress. In fact, this observation is the only evidence of practitioners actively addressing their experiences of moral stress beyond talking about it.

Participants outline a number of ‘consolations’ to alleviate moral stress, even if they are not explicitly recognised. One such consolation is humour and making light of challenging situations, for instance when Gill relates how she ‘probably went home and had a glass of wine or something like that’ after a difficult meeting which actually made her cry. Mary mentions how management systems can help in coping with moral stress, for example where a peer-review process which determines how funding is allocated shifts difficult decisions away from her as individual, and onto the group as a whole. She is also consoled by the belief that failure in a particular case will at least lead to improved procedures for future cases: ‘because there has been such terrible practice around this case, it became clear that things will have to change’. And Gill acknowledges the importance of multi-professional working to relieve the burden of having to solve problems on her own as ‘there are other professionals who are just as likely to come up with the solutions’.
Conclusion

Support and Aspiration (DfE, 2011) constructed the identity of the local SEN professional as an adversarial other in relation to both frontline professionals and parents, occupying a role which produces unnecessary bureaucracy. Solutions were sought by prescribing ‘straightforward’ guidance in a new Code of Practice (DfE, 2014) rather than seeking to understand the challenges encountered by local professionals and equipping them to negotiate uncertain moral terrain. Their local identity is defined by being attracted by, committed to, and working as ambassadors for a particular local ethos which they expect to share with frontline staff. They have chosen to opt into a localism which is represented by LAs, but threatened by Support and Aspiration and wider current policy decisions (Lamb, 2011). Being a local practitioner means being involved in advancing the local ethos by implementing locally agreed policies and procedures, providing “pointers to locality” (Stronach et al., 2002: p.126) as common ground to work on behalf of local children.

Participants readily provide examples of experiencing routine moral stress, although they bring no prior knowledge of the concept. One particular area of anxiety is the fear that occupying this role and carrying the implied burdens changes who they are, turning them into hard-hearted, over-principled and uncompassionate individuals. Another is their acute awareness that they place huge demands on frontline colleagues that seem justified when focusing on desired outcomes for children, but are known to cause stress and anxiety to peers. There is little evidence of owning or managing this stress in their daily practice, also highlighting that there is insufficient formalized support for dealing with moral stress.

Moral accountability is not explicitly asked for by their organization, although individuals clearly articulate a conviction of personal moral responsibility. There is
some evidence that participants draw on ‘ethical knowledge’, although this is rudimentary; ‘moral thinking’ appears to be a neglected aspect in their professional practice and in their professional development. This does not mean that their professional acts are habitually unethical, but rather that moral accountability has not become a habitual practice or expectation. It appears to have left a void that is neither addressed by the individual, nor the organization, nor wider government policies and initiatives. This study has focused on the space where individuals carry the weight of identification with a flawed organisation that they remain loyal towards as the best way of improving local outcomes. Little account is taken of the high cost this asks of them, and addressing this both on a personal and institutional level seems an urgent and important task.
References


