Bread and roses: clinical social work with clients living in poverty

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ABSTRACT

This study was undertaken to explore the possible relationship between future clinical social workers' beliefs about the causes of poverty and their commitment to working with individuals living in poverty. The study was an attempt to respond to concerns that have been raised about a perceived abandonment of the poor by social workers in favor of private mental health practice with middle and upper class clients.

One-hundred and two students currently enrolled in the Masters program of the Smith College School for Social Work responded to a questionnaire designed to assess their preferred practice modality, perceptions of the causes of poverty, and level of interest in working with the poor after graduation. The questionnaire employed in this study was an established survey measure, so as to facilitate meaningful discussion of the findings in relation to the extant literature. Several possible changes to that measure for future study are discussed.

Major findings included a correlation between intention to enter clinical practice and participants' attributions of the causes of poverty to individual factors, a significant overall difference amongst participants between scores on the structural and individual attribution of the causes of poverty scales, a significant difference in the structural attribution scale by class year, a significant difference in the individual attribution scale by gender, and a correlation between interest in working with the poor and the participants' attributions of the causes of poverty to individual factors. These findings are
discussed within the context of the efficacy of social work education and the complexity of the ethical commitment of professional social workers to work with clients who are vulnerable, oppressed and living in poverty.
BREAD AND ROSES: CLINICAL SOCIAL WORK WITH CLIENTS LIVING IN POVERTY

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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CHAPTER I
INTRODUCTION

The purpose of this study is to explore the possible relationship between future clinical social workers' beliefs about the causes of poverty and their commitment to working with individuals living in poverty using an established survey measure (I. Weiss, personal communication, June 21, 2007) so as to facilitate meaningful discussion of the findings in relation to the extant literature. The context for this study is the poverty that is widespread in the United States. According to data from the 2005 American Community Survey, 38.2 million people, or 13.3 percent of the U.S. population, had an income below the poverty threshold in the previous 12 months (U.S. Bureau of the Census, 2006). Looking across the life span, by age 35, nearly one-third of the adults in the U.S. will have spent at least one year in poverty, with over half of the population experiencing poverty by the age of 65, and two-thirds by the age of 85 (Rank & Hirschl, 1999).

Many social scientists researching poverty have "focused on who loses out at the economic game, rather than addressing the fact that the game produces losers in the first place" (Rank, Yoon & Hirschl, 2003, p. 3). The overwhelming prevalence of experiences of poverty across the life span suggests that impoverishment is a structural feature of the social landscape in the United States, rather than an exclusively individual failing (Rank, Yoon & Hirschl, 2003). Other evidence for a structural explanation of poverty includes the lack of jobs offering sufficient compensation to raise families out of poverty and the
relative failure of U.S. governmental programs to alleviate poverty, when compared to other Western industrialized nations (Rank, Yoon & Hirschl, 2003).

Poverty is also an independent risk factor for common mental health disorders (Patel, Kirkwood, Pednekar, Weiss & Mabey, 2006; Fryers, Melzer & Jenkins, 2003; Belek, 2000), and a causal factor for depression in women and for antisocial personality and substance use disorders in men (Dohrenwend, Levav, Shrout & Schwartz, 1992). Mental health professionals may fall victim to the same biases that have lead many social science researchers, and the public at large, to focus more on "individual reasons (such as laziness, lack of effort, and low ability) as the most important factors related to poverty" (Rank, Yoon & Hirschl, 2003, p. 4). Blaming individuals living in poverty for their own suffering, rather than recognizing the structures holding poverty in place, mental health professionals may be less likely to offer needed mental health services to the poor (Smith, 2005; Lott, 2002).

Social workers in the United States are currently ethically obligated to address the needs of individuals living in poverty. The Code of ethics of the National Association of Social Workers (1996) states that

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed and living in poverty.

The inclusion of this statement in the guiding principles of social work in the U.S. suggests a consensus among social workers that serves to obfuscate a hearty historical debate in the literature about the purview and mission of the profession (e.g. Gibelman, 1999). In particular, concerns have been raised (Specht & Courtney, 1994; Falck, 1984)
about a perceived abandonment of the poor by social workers in favor of private mental health practice with middle and upper class clients. Such a wholesale abandonment would certainly represent anti-ethical professional behavior. These critiques, however, seem to equate the provision of mental health services with serving an exclusively middle and upper class clientele. Additionally, such class-based critiques may serve to devalue social work done with clients who are vulnerable and/or oppressed, but not living in poverty.
CHAPTER II
LITERATURE REVIEW

To participate in "the psychotherapeutic enterprise" (Specht & Courtney, 1994, p. 4) does not necessarily represent an abandonment of the poor by clinical social workers. To assume that it does might represent a biased belief that the poor cannot benefit from psychotherapy (Smith, 2005). Such a belief could lead to the conclusion that clinical social workers mental health practice must therefore be directed towards a middle and upper class clientele. Alternately, assumptions concerning the abandonment of the poor by clinical social workers could include a misguided belief that offering mental health services entails a turning away from commitment to "the perfectibility of society" in favor of efforts to "perfect the individual" (Specht & Courtney, 1994, p. 4).

A counter argument can be made that while social workers must indeed strive to effect social justice at the highest levels, the profession is also committed to alleviating the suffering of those currently oppressed by the very structures we seek to change (NASW, 1996). "We must simultaneously pull our clients out of the destructive river and go upstream to prevent their being pushed in" (Haynes, 1998, p. 504). Ethical social work addresses the relationship between the individual and their social environment, excluding neither. To the extent that psychotherapy offered to people living in poverty addresses this relationship, especially the very real impact of poverty on mental health status (Patel, Kirkwood, Pednekar, Weiss & Mabey, 2006; Fryers, Melzer & Jenkins, 2003; Belek,
2000; Dohrenwend, Levav, Shrout & Schwartz, 1992), that psychotherapy falls well
within the domain of social work.

The preamble to the Council on Social Work Education accreditation guidelines
(2001) outlines the knowledge base necessary to enter the social work profession in the
United States. The preamble (CSWE, 2001) asserts that social work is "Guided by a
person-in-environment perspective and respect for human diversity", not a dichotomous
person or environment perspective. These guidelines (CSWE, 2001) also specifically
require the inclusion of curricular content addressing "Populations at Risk and Social and
Economic Justice" for the accreditation of schools of social work. This requirement
underscores the commitment of the profession to educate its members about oppressive
and discriminatory social structures such as poverty.

There have been several recent studies of social work students' attitudes about the
causes of poverty (Weiss, 2006; Krummer-Nevo & Lev-Wiesel, 2005; Perry, 2003; Sun,
2001). These studies presuppose that as a key component of their professionalization,
social work students should be educated to understand "the structural nature of American
poverty that ensures the existence of economic losers" (Rank, Yoon & Hirschl, 2003, p.
3). This education works in opposition to the common tendency to attribute poverty to
negative personal attributes, a stance also known as classism (Lott, 2002). By attributing
poverty to negative personal attributes, classism allows individuals to make distance
between themselves and individuals living in poverty, and to avoid any responsibility for
social change.

In effect, these studies of social work students' attitudes about the causes of
poverty (Weiss, 2006; Krummer-Nevo & Lev-Wiesel, 2005; Perry, 2003; Sun, 2001)
represent an attempt to examine the levels of classism present in the minds of developing professionals in our field. Researches found positive correlations between both liberal political ideology and personal experiences with poverty, and social work students' attributions of structural rather than individual causes (Weiss, 2006; Krummer-Nevo & Lev-Wiesel, 2005; Perry, 2003; Sun, 2001). These correlates may indicate that pre-existing structural beliefs about the causes of poverty lead students to choose the social work profession in the first place due to a goodness of fit with their own value systems. The social work profession values an understanding of the structural nature of poverty (NASW, 1996), no matter what the etiology of that understanding might be.

Taking into consideration the values of a related profession engaged in "the psychotherapeutic enterprise" (Specht & Courtney, 1994, p. 4), the American Psychological Association's (2000) Resolution on poverty and economic status is the first official recognition, by that professional body, of the relationship between poverty and mental health. The resolution, which insists that "poverty is detrimental to psychological well-being" and that psychologists must "treat and address the needs of low-income individuals and families" (APA, 2000), was drafted in response to perceived classism running rampant among psychologists (Lott, 2002; Smith, 2005). Smith's (2005) unique interrogation of her own classism, in the realm of psychotherapy, contrasts classist attitudinal barriers on the part of psychologists with her own clinical experiences. In her view

Poor people make the same use of such [psychotherapeutic] opportunities that middle class and wealthy clients do; the difference is that they are otherwise forced to devote much more of their energies towards securing the basics of existence (Smith, 2005, p. 692).
In theory, social workers, focused on "the needs and empowerment of people who are vulnerable, oppressed and living in poverty" (NASW, 1996), should not be plagued by such biases. Social workers are therefore uniquely well-positioned to attend to the mental health needs of the poor in order to redress current discriminatory mental health resource allotment in the United States (Lott, 2002), especially in light of the association of poverty with the development of common mental health problems (Patel, Kirkwood, Pednekar, Weiss & Mabey, 2006; Fryers, Melzeer & Jenkins, 2003; Belek, 2000). In the spirit of labor and suffrage activist Rose Schneideman's oft-quoted statement that "the worker must have bread, but she must have roses, too" (Smith, 2005, p. 692), mental health services provided by clinical social workers take on a new cast.

The concept of minimal distributive justice, in which "a social minimum of primary goods below which nobody is allowed to fall" (McLaughlin, 2002, p. 195) is established, provides a useful framework for grounding Schneideman's poetic bread and roses in theory. Acknowledging psychological and emotional good health as falling within this realm of primary goods, clinical social work can be seen "as seeking the fair distribution of psychological conditions" (McLaughlin, 2002, p. 195). Mental health services offered to "people who are vulnerable, oppressed and living in poverty" (NASW, 1996), when viewed through the lens of minimal distributive justice, land squarely within the realm of social justice. The purview of the social work profession is delineated by the "person-in-environment perspective" (CSWE, 2001), which dictates a need for work at both the macro and micro levels simultaneously. Clinical social work with individuals living in poverty is a practical embodiment of this intersection.
In spite of the furor over the provision of mental health services by social workers to economically privileged clients (Gibelman, 1999; Specht & Courtney, 1994), little is known about social workers who do specifically choose to offer these mental health services to clients living in poverty. Weiss (2006) is unique among researchers in directly examining the relationship between causal attributions of poverty and social work students' preferences to practice with the poor. Those students most interested in working with poor clients all exhibited less inclination to perceive poverty as caused by individual factors such as lack of motivation or effort (Weiss, 2006). In other words, those social work students in this sample with fewer classist biases were indeed more likely to intend to honor the professional mission of social work, but the author points out the provisional, limited nature of these results (Weiss, 2006).

The Smith College School for Social Work represents an ideal location to begin to address this gap in the literature. The School's Mission statement (2003) claims a dedication to and specialization in educating

Excellence in clinical social work… to promote healing, growth and empowerment [and]…. shares with the social work profession its historic commitment to serve oppressed, disadvantaged and at risk members of our society (SCSSW, 2003).

Clinical social work students at this school may indeed represent a body of "unfaithful angels" seeking to establish private mental health practices with middle and upper class clients (Specht & Courtney, 1994). Alternately, curricular content that seeks to illuminate the oppressive and discriminatory social structures of systemic poverty (CSWE, 2001) may adequately professionalize these students to choose to serve the poor. Students at the Smith College School for Social Work may also have been drawn to the social work
profession due to a goodness-of-fit between their own pre-existing beliefs and values and 
the ethics of the profession itself. Among Smith College School for Social Work students 
who intend to enter clinical practice after graduation, is there a relationship between their 
beliefs about the causes of poverty and their commitment to working with individuals 
living in poverty? Students who intend to enter clinical practice and who attribute the 
causes of poverty to structural more than to individual risk factors were expected to be 
more likely to commit to working with the poor.
CHAPTER III
METHODOLOGY

Design

The design adopted for the present study was a partial replication of a cross-national study undertaken by Weiss, Gal & Dixon (2003) that examined the professional ideologies and practice preferences of graduating B.S.W. students in a variety of countries. The studied sample of students currently enrolled in the Masters program of the Smith College School for Social Work was chosen in an effort to test the external validity of Weiss, Gal & Dixon’s (2003) results. This sample of participants was also chosen for reasons of convenience since the current investigator is enrolled at the Smith College School for Social Work herself, and therefore had access to administrative support in contacting these students to request their participation. The study was an attempt to investigate future clinical social workers’ beliefs about the causes of poverty and the possible relationship between these beliefs and a commitment to working with individuals living in poverty, and was undertaken with the approval of the Human Subjects Review Committee of the Smith College School for Social Work (see Appendix G).

Participants

The population from which the sample was drawn for this study included all those students currently enrolled in the Masters program of the Smith College School for Social Work. Participants were recruited via a mass email (see Appendix E) to all enrollees in
Smith's MSW program. This email gave a brief description of the researcher and her study, an indication that participation in the study was voluntary, and that participants would be asked to give informed consent, and provided a link to the full consent form (see Appendix F), demographic questionnaire and survey measure online at www.surveymonkey.com.

Measures

Demographics. Gender, race, age and social work students' own experiences of poverty have been found to correlate with different beliefs about the causes of poverty (Sun, 2001; Krumr-Nrvo & Lev-Wiesel, 2005), so these demographic data were collected. Participants own experiences of poverty in childhood were measured following the method of researchers who found these experiences to be correlated with beliefs about the causes of poverty (Krumr-Nrvo & Lev-Wiesel, 2005). Participants in that study were asked to respond to the question, "How do you evaluate the economic status of your family-of-origin during your childhood?" on a 5-point Likert-type scale ranging from 1, not good at all, to 5, very good (Krumr-Nrvo & Lev-Wiesel, 2005). Level of exposure to curricular content about the causes of poverty over time may also influence beliefs, so participants were asked for their class year at the Smith College School for Social Work.

Ideology and professional preferences. Participants' intention to enter clinical practice upon graduation from the Smith College School for Social Work, their beliefs about the causes of poverty, and their commitment to working with the poor were measured using an abbreviated version of the Questionnaire for social work graduates: Ideology and professional preferences, which was provided to this author for use in the
current study by one of the its authors (I. Weiss, personal communication, June 21, 2007). This questionnaire was initially developed for use in a cross-national research project that examined the professional ideologies and practice preferences of graduating B.S.W. students in a variety of countries (Weiss, Gal & Dixon, 2003). Although the structure of social work education differs from country to country, the basic professional degree outside of the United States is the B.S.W., and most U.S. M.S.W. curricular content is taught internationally on the B.S.W. level (Weiss, 2006; Buchbinder, Eiskovits & Karneili-Miller, 2004), so the use of this survey with the current sample was appropriate and provides opportunities for comparison. The scales that were administered measured the independent variables of preferred practice modality (see Appendix A) and perceptions of the causes of poverty (see Appendices B &C), and the dependent variable of interest in working with the poor (see Appendix D). These scales were developed based on published research and the input of an expert panel, and then a principle components factor analysis of pretest data, with a division of items into factors with acceptable reliability and internal consistency (Weiss, 2006).
CHAPTER IV

ANALYSIS

Participant Demographics

One-hundred and two students currently enrolled in the Masters program of the Smith College School for Social Work consented to participate in this study. Of those students, 94.1% were female and 5.9% were male. Participants were also asked to report their race, and 2% reported that they were Korean, 8.2 % were African American, 2% were Latina/o, 78.6% were White: Non-Hispanic, 6.1% were Mixed/Bi-Racial, 1% were Arab, 1% were White: Jewish. One participant indicated that they were unwilling to respond to this item because they felt it would compromise their anonymity. Due to the small size of many of these reported racial groups, participants were split into two groups for the purposes of analysis: White and People of Color. The ages of participants ranged from 22 to 58, with a median age of 29 and a mean age of 31.89 (8.44). When asked about the economic status of their families of origin, 4.1% chose "not good at all", 7.1% chose "not good", 28.6% chose "somewhat good", 35.7% chose "good", and 24.5 % chose "very good". More students in their second year of study than in their first chose to participate; 62% of participants were from the class of 2008 and 38% of participants were from the class of 2009.

Ideology and Professional Preferences

Preferred Practice Modality. A Cronbach's alpha (alpha = .756, N = 96, N of items = 2) was run on the scale assessing participants' intention to enter clinical
practice upon graduation from the Smith College School for Social Work. This test determined that the items on this scale were moderately internally reliable, which suggested that the scale as a whole was appropriate for further analysis. Ninety-six participants completed this scale, which consisted of 5-point Likert-type scale items, with 1 indicating "strongly disagree" and 5 indicating "strongly agree". Scores ranged from 2.5 to 5, with a mean score of 4.35 (.067), a median score of 4.5, and a modal score of 5. There were no significant differences in preferred practice modality by class year, gender, race, age, or socioeconomic status of the family of origin. A Pearson correlation found a significant, positive, weak correlation between intention to enter clinical practice and participants' attributions of the causes of poverty to individual factors ($r = .231, p = .024$). Participants were more likely to intend to enter clinical practice the more that they attributed the causes of poverty to individual factors.

*Perceptions of the Causes of Poverty.* A Cronbach's alpa was run on both the scale assessing participants' perceptions that poverty is attributable to structural factors (alpha = .772, N = 94, N of items = 6), and the scale assessing participants' perceptions that poverty is attributable to individual factors (alpha = .766, N = 91, N of items = 13). These tests determined that the items on each of these scales were moderately internally reliable, which suggested that each scale as a whole was appropriate for further analysis. Ninety-seven participants completed these scales, which consisted of 5-point Likert-type scale items, with 1 indicating "strongly disagree" and 5 indicating "strongly agree". Scores ranged from 2.67 to 5 for the structural factors scale, and from 1 to 2.69 for the individual factors scale. The mean score on the structural factors scale was 3.88 (.058), with a median score of 3.83, and a modal score of 4. The
mean score on the individual factors scale was 1.79 (.041), with a median score of 1.85, and a modal score of 1.62. A paired samples t-test found a significant difference (t (96) = 25.48, p = .000) between scores on the structural and individual attribution scales. The mean score (m = 3.88) on the structural attribution scale was significantly higher than the individual attribution scale (m = 1.79).

There were no significant differences in the structural attribution scale by gender, race, age, or socioeconomic status of the family of origin. There were no significant differences in the individual attribution scale by class year, age, or socioeconomic status of the family of origin. A two-tailed t-test found a significant difference in the structural attribution scale by class year (t (93) = 2.124, p = .036). Participants from the class of '08 had a higher mean score (m = 3.98) than participants from the class of '09 (m = 3.73); members of the class of '08 attributed poverty to structural factors more than members of the class of '09. A two-tailed t-test also found a significant difference in the individual attribution scale by gender (t (95) = -2.856, p = .005). Men had a higher mean score (m = 2.23) than women (m = 1.76); men attributed poverty to individual factors more than women.

*Interest in Working with the Poor.* There were no significant differences in interest in working with the poor by class year, gender, race, age, or socioeconomic status of the family of origin. A Pearson correlation found a significant, negative, weak correlation between interest in working with the poor and the participants' attributions of the causes of poverty to individual factors (r = -.226, p = .027). Participants were less likely to be interested in working with the poor the more that they attributed the causes of poverty to individual factors. There was no correlation between interest in working with
the poor and participants' attributions of the causes of poverty to structural factors, nor
between interest in working with the poor and intention to enter clinical practice upon
graduation from the Smith College School for Social Work.
CHAPTER V
DISCUSSION

The purpose of this study was to address the contention that clinical social work students, such as the participants, are "unfaithful angels" seeking to establish private mental health practices with middle and upper class clients (Specht & Courtney, 1994). Does curricular content that seeks to illuminate the oppressive and discriminatory social structures of systemic poverty (CSWE, 2001) adequately professionalize these students to choose to serve the poor? Might students at the Smith College School for Social Work also have been drawn to the social work profession due to a goodness-of-fit between their own pre-existing beliefs and values and the ethics of the profession itself? The study was designed to investigate a potential relationship between participants' beliefs about the causes of poverty and their commitment to working clinically with individuals living in poverty. Students who reported that they intended to enter clinical practice and who attributed the causes of poverty to structural more than to individual risk factors were expected to be more likely to commit to working with the poor, but the data did not support this hypothesis.

Ideology and Professional Preferences

Preferred Practice Modality. This scale was designed to ascertain which participants intended to enter clinical practice after graduation. The Smith College School for Social Work's program is known for its clinical focus; according to the school's website (SCSSW, 2006)
The Smith College master of social work (M.S.W.) degree is nationally recognized for its dedication to and specialization in clinical social work, a focus on working with individuals, families and groups in a clinical setting. This specialization includes a mastery of clinical theory and practice, as well as an understanding of the sociocultural, social service and policy contexts of practice.

The scores on this scale, with a mean score of 4.35 (.067), a median score of 4.5, and a modal score of the highest possible score of 5, were therefore not surprising. This group of participants, then, are just the sort of social workers who intend to provide mental health services that critics (Gibelman, 1999; Specht & Courtney, 1994) have argued will target a middle and upper-middle class clientele. That there were no significant differences in preferred practice modality by class year, gender, race, age, or socioeconomic status of the family of origin further suggests a certain uniformity of purpose at the school.

The finding that participants were more likely to intend to enter clinical practice the more that they attributed the causes of poverty to individual factors might appear at first glance to support contentions (Specht & Courtney, 1994) that clinical social workers providing mental health services to clients living in poverty would blame these individuals for their own suffering. However, this association between the strength of interest in entering clinical practice and attributing the causes of poverty to individual rather than structural factors was not paired with a strong interest in working with the poor. It does appear that there are some students who might be focused on efforts to "perfect the individual" rather than "the perfectibility of society (Specht & Courtney, 1994, p. 4) if they were faced with providing mental health services to clients living in poverty, but participants were less likely to be interested in working with the poor the more that they attributed the causes of poverty to individual factors. In other words,
attributing the causes of poverty to individual rather than structural factors is associated with a certain aversion to working with these individuals. These particular students may be operating under the influence of the very same classist attitudinal barriers that psychologists (APA, 2000; Lott, 2002; Smith, 2005) have looked to social workers as a model for addressing ethically and in professional education.

Additionally, the items on the Preferred Practice Modality scale (see Appendix A), measuring participants’ preference to “Engage in psychotherapeutic interventions” and “Engage in psychological treatment that aims to enhance insight” after graduation, may have been based on an overly narrow definition of what clinical practice entails. For example, several other items in this portion of the questionnaire, such as “Advocate on behalf of disadvantaged groups” and “Engage in case management” might legitimately be considered part of the broad spectrum of activities undertaken in clinical practice, but were excluded from analysis. The narrow focus of these items tracks well with the engagement in “the psychotherapeutic enterprise” (Specht & Courtney, 1994, p. 4) that critics deem to be outside the realm of social work; that narrowness may not have captured the full spectrum of clinical social work as it is practiced today.

*Perceptions of the Causes of Poverty.* A comparison of the range of scores and mean scores for the structural attribution scale versus the individual attribution scale shows that, in general, student participants ascribe more to an attribution of poverty to structural factors. Scores ranged from 2.67 to 5 for the structural factors scale, and from 1 to 2.69 for the individual factors scale. The mean score on the structural factors scale was 3.88 (.058), which is above the midline of the Likert-type scale used in this measure, whereas the mean score on the individual factors scale was 1.79 (.041), which is below
the midline, and this difference in means was statistically significant. These findings may suggest that curricular content at the Smith College School for Social Work that seeks to illuminate the oppressive and discriminatory social structures of systemic poverty (CSWE, 2001) is effective. Alternately, students may have been drawn to the school, and the profession of social work in general, due to a goodness-of-fit between their own pre-existing beliefs and values and the ethics of the profession.

Unfortunately, due to the cross-sectional nature of the current study, stability or change in individual participants' attributions of the causes of poverty to structural versus individual factors over time was not measured. A future study might address this problem by measuring attitudes before students begin the MSW program, and at the time of their graduation. A control group of other students seeking a different professional degree with no particular stance towards populations at risk might also be used to ascertain the extent to which students are arriving at school already primed to accept the curriculum. The finding of a significant difference in the structural attribution scale by class year, in which participants from the class of '08 had a higher mean score (m = 3.98) than participants from the class of '09 (m = 3.73) may suggest that exposure to more curricular content that seeks to illuminate the oppressive and discriminatory social structures of systemic poverty (CSWE, 2001) influences attribution. Members of the class of '08 attributed poverty to structural factors more than members of the class of '09, however there was not enough control in the current study to conclude that this difference was due to more exposure to curricular content and not some other variable.

The significant difference in the individual attribution scale by gender found in this study replicates Sun's (2001) results. In that sample of social work students, males
rated individual causes of poverty significantly higher than their female counterparts.

Amongst participants in this study, men also attributed poverty to individual factors more than women, although there was no difference by gender for structural attributions. Sun (2001) cites Cryn's (1977) rather outmoded assertion that

it may be a generic male attribute to judge indigence and poverty more harshly than do women… The explanation is that behaviors associated with economic achievement are significantly more value-laden for men than they are for women. Moreover… those with family and provider responsibilities are less likely to have positive attitudes toward the poor than those with fewer domestic obligations (p. 49)

in an effort to explain this gender difference. More recent studies illuminate how differences in parenting (e.g. Pagano, Hirsch, Deutsch & McAdams, 2003) may lead to these gender differences, with parents focusing on individualistic skills over concern for others with sons, and the inverse for daughters.

This correlation between gender and attribution in the current study deserves to be interpreted with some caution, however, due to the relatively small number of male participants. According to the Office of the Registrar at the Smith College School for Social Work (V. Abrahamsen, personal communication, January 31, 2008), there are currently 201 women and 24 men enrolled in the School who would have been eligible for participation at the time the recruitment email was sent out. Of that group, a sample of 95 women, or roughly half the women, responded, whereas a sample of only 6, or roughly a quarter of the men, chose to respond. A different response by any of those male participants might have shifted the data in the current study such that a correlation between gender and attribution of the causes of poverty was no longer present.
Interest in Working with the Poor. Due to Krumer-Nevo and Lev-Wiesel's (2005) discovery of a positive correlation between willingness to help clients with basic needs and the student having been in a similar state of need earlier on in their development, a difference in interest in working with the poor based on the socioeconomic status of the student's family of origin was expected in this sample. No such difference was found, which may be explained several ways. In a longitudinal study of MSW students in California (N = 5,793), Perry (2003, p. 321) found that sociodemographic variables are the least stable predictors of students' interest in working with the poor and homeless, whereas ideological beliefs and personal motivations appear as the most noteworthy influences upon students' desires to work with this population.

Krumer-Nevo and Lev-Wiesel's (2005) study was a less powerful cross-sectional measurement with fewer participants (N = 91), so their finding may have been anomalous and not reflective of a more generalized trend. Additionally, Krumer-Nevo and Lev-Wiesel (2005) were concerned with social work students' willingness to facilitate the provision of "in-kind relief, such as blankets, clothes or housing or daycare" (p. 549). Perhaps a willingness to provide in-kind assistance, as opposed to the clinical assistance that is the focus of this study, is more associated with students' own experiences of poverty.

The significant, negative, weak correlation between interest in working with the poor and participants' attributions of the causes of poverty to individual factors in this study adds to the resilience of the findings by both Perry (2003) and Weiss (2006) that ideological beliefs are associated with interest in working with the poor among clinical social work students. Perry's (2003) measure of political ideology was not identical to the
measure used by Weiss that was also used in this study. However, the left-wing progressive or liberal orientation that she found was associated with an increased interest in working with the poor is typically considered to be a viewpoint that focuses more on structural factors in efforts to alleviate poverty.

The decreased likelihood that participants in the current study were interested in working with the poor the more that they attributed the causes of poverty to individual factors is also in indirect accordance with the results of Weiss' (2006) study, from which many of the measures used herein were drawn. The students Weiss (2006) surveyed who were most interested in working with the poor exhibited less inclination to perceive poverty as caused by lack of motivation, effort and responsibility. Although there was not a parallel positive correlation between interest in working with the poor and participants' attributions of the causes of poverty to structural factors in the current study, which would have been a direct replication of Weiss' (2006), the negative correlation between interest in working with the poor and attribution of poverty to individual factors found in this study may represent the other side of that coin.

Unlike Perry's (2003) finding that "the desire to prepare for private practice has a sustained negative impact on students' desires to work with the poor" (p. 333), there was no correlation between interest in working with the poor and intention to enter clinical practice upon graduation from the Smith College School for Social Work. This may have been because the current study did not specifically measure intention to enter private clinical practice, merely intention to enter any sort of clinical practice. A future study should include a measure of this distinction. This would aid in teasing out which participants fit the mold of "unfaithful angels" seeking to establish private mental health
practices with middle and upper class clients (Specht & Courtney, 1994), as opposed to those who intend to offer mental health services to clients in need.

Additionally, the *Code of ethics* of the National Association of Social Workers (1996) states that the social work profession should pay “particular attention to the needs and empowerment of people who are vulnerable, oppressed and living in poverty”. The single item measuring participants interest in working with the poor (see Appendix D) was imbedded within a scale that listed many other populations, for example “The homeless” and “Abused or neglected Children”, who are clearly vulnerable and/or oppressed, but may or may not be living in poverty. This method of measurement was adopted to replicate the work of prior investigators (Weiss, Gal & Dixon, 2003) for reasons of meaningful comparison, but it may have been too narrow and excluded areas of possible overlap amongst the discrete populations listed.

Also, the instructions asked participants to indicate the degree to which they would prefer to work with each of these different groups upon graduation, and many factors beyond interest in a particular population are likely to influence career choices. The location of a job, the quality of supervision, pay and benefits in the face of debt load from student loans, the overall theoretical orientation of the agency and any number of other circumstantial factors might influence the career choices made by a recent graduate. The wording of the question, therefore, may not have adequately directed participants to leave out factors beyond pure professional interest in a given population when contemplating their responses. On the other hand, that sort of idealized career track is unlikely to reflect the more complex working world graduates will actually encounter, so those responses might lack utility for study.
Further Considerations for Future Researchers

The issue of clinical social workers’ beliefs about the causes of poverty and their intentions to offer their services to individuals living in poverty appears to have been an apt choice for study. Critiques of social workers offering mental health services, epitomized by the words of Specht and Courtney (1994), as well as impassioned counter-arguments (e.g. Haynes, 1998), reached a fever pitch around the turn of the century, as the social work profession turned an eye towards self-definition, and have since died down (Perry, 2005). However, few research studies have actually addressed the questions those critiques raised as to what are the appropriate professional activities of social workers. The largest studies of this issue prior to the current investigation (e.g. Perry, 2005; Weiss, 2006) took their samples from a wide variety of social work schools. The choice of the Smith College School for Social Work as a source of participants allowed the current study to hone in on a group of students who chose to attend a specifically clinically oriented program, making them a closer fit with the profile of the “unfaithful angel” engaged in “the psychotherapeutic enterprise” (Specht & Courtney, 1994, p. 4) that so troubled critics.

In order to facilitate meaningful discussion of the findings of the current study in relation to the extant literature, the use of an established survey measure (I. Weiss, personal communication, June 21, 2007) was warranted. Future research might be enhanced by adding other measures to capture examine other facets of the issues in question. For example, in addition to the variety of suggestions made earlier in this report, the question regarding preferred population might include a request for a narrative response along with the Likert-type items. Such a question might ask the participant to
discuss their preferred clinical population and their reasons for making that choice, which could address the likely overlap between interest in vulnerable populations as opposed to exclusively those living in poverty. Narrative responses might also offer insight into the other factors that may influence career choices beyond simply a clinical social work students’ population of professional interest.

However it is studied, the underlying question of what constitute appropriate professional concerns for social workers, at least as posited by Specht & Courtney (1994), may lack a solid foundation. Suggesting that social workers ought to focus purely on social problems and not the psychological realm seems to be a naïve either/or stance that ignores the fundamental basis of the social work profession: the person in context. The findings of the current study offer a unique counterpoint to that initial argument. That clinical social work students at the Smith College School for Social Work attributed the causes of poverty to structural factors significantly more than to individual ones flies in the face of the suggestion that clinical social workers turn away from a commitment to “the perfectibility of society” in favor of efforts to “perfect the individual” (Specht & Courtney, 1994, p. 4). Nor were these students exclusively interested in engaging in traditional psychotherapy. Rather, these participants seem to have heeded the call that “the worker must have bread, but she must have roses, too” (Smith, 2005, p. 692). To the extent that members of the social work community remain open to interrogating our own motives, professional and ethical obligations, we will continue to become increasingly effective instruments in service of our clients' complex needs.
References


Appendix A

Preferred Practice Modality Scale Items¹

Provide material assistance
Engage in psychotherapeutic interventions
Engage in brokerage or referrals to other agencies
Engage in investigations into abuse
Engage in psychological treatment that aims to enhance insight
Offer organizational counseling
Engage in crisis intervention
Formulate social policy
Advocate on behalf of disadvantaged groups
Prepare reports for the justice system
Engage in case management
Supervise delinquents

¹ The questionnaire measure detailed in Appendices A, B, C and D was provided to the author by Idit Weiss-Gal, Ph.D., Senior Lecturer at the Bob Shapell School of Social Work of Tel Aviv University, for use in the current study only. For permission to use the measure for further study, please contact Dr. Weiss-Gal at iditweis@post.tau.ac.il or the Bob Shapell School of Social Work, Tel Aviv University, Ramat Aviv, Tel-Aviv, 69978, Israel.
Appendix B

*Attribution of the Causes of Poverty to Individual Factors Scale Items*

People become poor because of weak ego strength.

People are poor because their level of individual responsibility is low.

Many poor people suffer from emotional problems that are the basis of their economic difficulties.

People are poor because they don't want to work.

Poverty is generally a symptom of mental or emotional difficulties.

People are poor because they prefer to live off society.

People are poor because they lack sufficient will power.

Poverty is characteristic of certain individuals in society because those individuals suffer from mental difficulties.

People are poor because they do not make sufficient effort to find work.

Various personality disorders are, generally, the reason why people become poor.

People are poor because they do not know how to use their money responsibly.

The roots of poverty in most cases are to be found in the intra-personal problems of the poor person.

People that become poor generally suffer from some form of psychopathology.
Appendix C

*Attribution of the Causes of Poverty to Structural Factors Scale Items*

Poverty is the result of the inability of society to provide the basic needs of individuals.
Most of the poor are "victims" of social processes and situations.
Poverty is primarily the result of social/environmental factors.
People become poor because they belong to social groups that have been disadvantaged over the years.
Poverty is a result of the lack of readiness of society to allocate sufficient resources to help people in economic difficulties.
Poverty is the result of the failure of society to create sufficient jobs.
Appendix D

*Preferred Population Scale Items*

Adolescents in high schools
- The unemployed
- The chronically ill
- Abused or neglected children
- Drug addicts
- The mentally ill
- Married couples
- The poor
- The disabled
- Juvenile delinquents
- The chronically ill elderly
- Adult delinquents
- Single-parent families
- People with learning difficulties
- HIV-Positive individuals
- Immigrant families
- Victims of sexual abuse or assault
- The homeless
Appendix E

Recruitment Cover Letter

Dear Potential Participant,

I am Katharine Waggoner, BA., a student pursuing my MSW at the Smith College School for Social Work. For my thesis research I am collecting data for a research project. The purpose of this study is to explore your attitudes about the causes of poverty and your plans for practice after graduation. Participation in this study is voluntary and anonymous and will involve completing a questionnaire online at www.surveymonkey.com, which I anticipate will take about fifteen minutes of your time, although you may take as much time as you need. In order to participate in this study, you must be currently enrolled as a student in the Smith College School for Social Work's MSW program. To participate, please click on the link below, which will take you to the informed consent, and to the survey. Thank You.
Appendix F

Consent Form

Dear Potential Participant,

I am Katharine Waggoner, BA, a student pursuing my MSW at the Smith College School for Social Work. For my thesis research I am collecting data for a research project. The purpose of this study is to explore your attitudes about the causes of poverty and your plans for practice after graduation. Participation in this study will involve completing a questionnaire online at www.surveymonkey.com, which I anticipate will take about fifteen minutes of your time, although you may take as much time as you need. In order to participate in this study, you must be currently enrolled as a student in the Smith College School for Social Work's MSW program.

It is possible that choosing to participate in this study will be emotionally distressing because it asks you to think about poverty, which you may find brings up strong feelings, as well as asking you to think about your plans for the future, which could be stressful. I am asking you to risk this possible discomfort because an understanding of your attitudes about the causes of poverty and your plans for practice after graduation could inform and support the development of a curriculum at the Smith College School for Social Work that is potentially more relevant to students' lived experiences. Although I am not specifically offering compensation in return for participation, by choosing to complete this questionnaire you might receive the indirect benefit of a more relevant curriculum for either yourself or your future colleagues.

Participation in this study is voluntary and anonymous, and you may withdraw from the study by declining to submit your responses at the end of completing
the questionnaire. Data will be stored on an external hard drive in order to further safeguard information. Smith faculty and staff advisors to this study will have access to the data. In any publications or presentations, the data will be presented as a whole, and you will not be asked to make any individual statements that could be quoted. As required by Federal guidelines, all data will be kept in a secure location for a period of three years, and then they will be destroyed. I do not expect to need this data beyond those three years, but if I do, they will remain in that secure location and will be destroyed when they aren't needed anymore.

If you have any questions or concerns about this study, you are welcome and encouraged to contact me via email at kwaggone@smith.edu, or by calling me at (413) 563-3673. You are also welcome to contact the Chair of the Smith College School for Social Work Human Subjects Review Committee at (413) 595-7974.

BY SUBMITTING THIS SURVEY, YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTAND THE INFORMATION ABOVE AND THAT YOU HAVE HAD AN OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY. THANK YOU.

Sincerely,

Katharine Waggoner, BA
Appendix G

Human Subjects Review Committee Letter of Approval

October 23, 2007

Katharine Waggoner

Dear Katharine,

Your revised documents have been received and reviewed. All of the requested revisions have been made and we are now happy to give final approval to your study. We were glad to be able to see the questionnaire as it will be received by your participants.

*Please note the following requirements:*

**Consent Forms:** All subjects should be given a copy of the consent form.

**Maintaining Data:** You must retain signed consent documents for at least three (3) years past completion of the research activity.

*In addition, these requirements may also be applicable:*

**Amendments:** If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.
Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

This should be a very interesting and useful study. It will be very interesting to discover to what extent your participants have a commitment to work with social work’s historical client group. Of course, one of the problems is that the kinds of settings where creative work with this population is possible have become few and far between.

Good luck with your project.

Sincerely,

Ann Hartman D.S.W.
Chair, Human Subjects Review Committee

CC: Roger Miller, Research Advisor