Baccalaureate student perceptions of challenging family problems: Building bridges to acceptance.

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Abstract:

This study explored the attitudes of 147 undergraduate social work majors to working with difficult families. Students indicated which problems (from a list of 42, including hot topics such as homosexuality, transgender issues, abortion, and substance abuse) they believed they would find most difficult to work with and provided information regarding their own experience with these problems (personal or family, knowing of others with this situation, and no previous knowledge). Student reactions emerged in three qualitative domains: affective, cognitive, and experiential. Affective reactions tended to be strong and were reported in regard to issues such as abortion, religious differences, and abuse. Cognitive reactions tended to be categorized as "not knowing how" to work with the client or lack of training, while experiential reactions related to either personal experience or, the converse, no experience with the population. A better understanding of the nature of student barriers to working with particular family problems is useful for developing approaches that can reduce this reluctance through more inclusive educational experiences.

Article:

One issue that many social work instructors face is helping students build empathy toward individuals and families with problems about which the students have deeply held feelings or beliefs. This is especially true with controversial topics such as homosexuality or abortion, which may conflict with their personal beliefs or morality codes, or emotional issues such as abuse or chemical dependency, which may touch on their personal experiences. The present study presents a new way of understanding student reactions to challenging family problems such as abortion, addiction, transgender/lesbian/gay/bisexual/questioning issues, by characterizing the underlying quality of the student reaction as affective, cognitive, or experiential. By examining underlying themes that may influence building empathy and nonjudgmental attitudes toward the

goal of good clinical judgment, one can develop educational strategies to serve as a bridge to help students overcome these barriers and develop better understanding and acceptance of families and individuals whom they view as different from themselves.

BACKGROUND

Burman (2000) suggested, "[p]erhaps one of the greatest challenges to social work educators is not imparting knowledge to students, but inspiring and teaching them to think critically …" (p. 155). She goes on to state:

Rather than passive learners, we seek curious and inquiring minds, those that will explore and analyze situations and problems from diverse perspectives. This entails laying aside prejudgments, preconceptions, and being open to new information …, while confronting personal biases and opinions that limit a deep understanding of the complexity of problems-in-living and the means of coping with and resolving such difficulties. (p. 156)

The value of such a perspective cannot be overstated. As students grow and develop, they need to be open-minded to personal, social, religious, philosophical, and moral differences poses a challenge. Students may have already formulated ideas about persons who are different from themselves and have made judgments about those differences. Increasing critical thinking in social work education about such possible preconceived stereotypes and negative attitudes is important in helping students to serve individuals and groups they may regard negatively.

Stereotypes often are relied upon when one dislikes (or doesn't understand) a particular group or individual (Jussim, Nelson, Manis, & Soffin, 1995). There is considerable evidence that cultural stereotypes have negative consequences to individuals and families affected by poverty (Henley & Danzinger, 1996; Sidel, 2000), other races and ethnicities than their own (Carrillo, Holzhalb, & Thyer, 1993), gays and lesbians (Ariel & McPherson, 2000; Mallon, 1997), persons with disabilities (Dudley, 2000a; 2000b), perpetrators of domestic violence (Pyles & Postmus, 2004), child abusers (Dhooper, Royse, & Wolfe, 1991; Saunders, 1988), sexual predators (Buddie & Miller, 2001), and drug users (Goldberg, 1995; Griffin, 1991).

Discrimination against certain groups has a long history in our society of leading to a range of negative perceptions. For example, substance-abusing women often are viewed more negatively because of cultural stereotypes that promote the idea that it is worse for women to abuse alcohol than for men to do so and that alcohol abuse is associated with inappropriate sexual behavior. Female drug addicts also are typically viewed more negatively than male addicts (Goldberg, 1995). By using critical thinking in helping to break down this stereotype, analysis of where the barriers are can be completed. For example, is the issue more one of gender and gender expectations or one of bias against substance abusers themselves? Why are women perceived more negatively?

For some issues, rejecting or condescending attitudes are likely to occur because the alternative to nonjudgment may be associated with outcomes that are not easy to accept. In the case of domestic violence, for example, condemnation of the adults may seem a logical perspective if it leads to removing the children from an unsafe family environment (Stanley, 1997). Limited experience with certain issues also leads to stereotypical presumptions about individuals and families presenting with those issues. Dudley (2000a), for example, noted that students often have a limited perspective about specific service population groups. This occurs even with groups with whom they may have had some contact. In his work with social work students and people diagnosed with mental retardation, he found that students seldom had had meaningful past contact with this group and when they had, usually it was in a helping role in which they had a power advantage over the person with the disability. He concluded that these contact experiences were likely to result in students accepting and internalizing stereotypes about persons with disabilities and, more important, leaving themselves unaware of the stigma they may attach to persons with a disability.

Stereotypes associated with problem groups often imply an undeserving attribution that results in greater apathy, less willingness to understand, and fewer efforts to assist (Popple & Leighninger, 2005). According to one common stereotype, for example, poor people lack financial means because of individual character faults such as being lazy, unwilling to work, overly dependent on others, or lacking appropriate personal or family values. As a result of these attributions, poor persons are frequently viewed as largely responsible for their situations and less deserving of assistance (Henley & Danzinger, 1996; Sidel, 2000). Another example of the undeserving client is the father who spends most of his paycheck on gambling or drugs, leaving his family to deal with food scarcity and homelessness (Popple & Leighninger, 2005).

Because social work students need to avoid the limiting effect of such views on their ability to provide effective services, it is vital in our training of social workers to instill the importance of valuing individuals rather than the issues they present and to be vigilant against the judgment-distorting effects of prejudice, stereotype, and prejudgment. Otherwise, future social workers may quietly disengage from certain service populations because of their beliefs about that population either being too difficult to work with, or likely to require more assistance than they are worth. To help reduce such negative attitude formations, it is necessary to identify whether certain population groups (or social issues) present barriers to developing the skills and care capacities that are required in providing effective services. To better prepare social work students to work with populations with challenging characteristics, it is important first to identify which population groups students perceive as most difficult and why.

DEVELOPMENTAL FRAMEWORK OF THE STUDY

Because we believe that understanding the effect of preconceived notions or stereotypes of social work students towards specific client characteristics has important implications for instructional practices, a logical starting point was to select a group with undesirable characteristics and see by

comparison, if students distinguish such a group from others. We hypothesized that the stereotype of the alcoholic or substance abusing client would identify a client group that students would select "as not wanting to work with." The purpose then of the study was therefore to explore this cultural dislike for the alcoholic or substance abusing client by comparing their reported willingness to work with clients with other less stigmatized service issues. Since our research focus has been on substance-abusing families, and a majority of social work modalities center on family work (in child protective services, family counseling, school social work, substance abuse intervention), we posed our questions to students in the context of the family being the hypothetical client system. The organizing question of this study was "Will students perceive working with substance affected families as more challenging than working with families with other service issues?"

METHODOLOGY

This study used a survey design. The instrument used was created by the researchers and is available from them upon request. Students in four upper-level undergraduate social work classes at one Southeastern bachelor of social work program were asked to participate. (Institutional review board human subject approval from this university was received by authors.) Virtually all students were willing to complete the survey instrument. Students who happened to be in more than one of the classes in which the data forms were distributed were asked to complete the survey only once. Completion of the forms and debriefing questions directed to the second author (who was not an instructor for any of the classes) took approximately 20 min.

The instrument included a set of 42 service population characteristics that we identified from a variety of sources including introductory social work and clinical psychology textbooks, Internet pages on mental health and human services, and our personal and professional experiences. From the list, respondents were asked to select the top 10 issues they believed would be most challenging with which to work. They were then requested to further identify the three most challenging characteristics and to indicate the reasons for their choices. Last, they were asked to categorize their personal context with each of their three choices as it would relate to the following: involvement of immediate family, other family members, their own direct experience, strong personal, moral or religious beliefs, and knowledge about the problem or issue. A total of 147 usable surveys were collected and entered for data analysis into SPSS (Version 10).

RESULTS

Characteristics of the Sample

Most of the sample was female (89.1%), between the ages of 19 and 32 years (77.2%), with a mean age of 27 years, third- and fourth-year undergraduate students (83.6%), and majoring in social work (79.6%) or a related social science.

Most Challenging Family Issues

Table 1 presents a summary count of the issues perceived to be the most challenging. Of the 42 issues presented, 3 substance use/abuse-related behaviors (drug addiction, alcohol abuse, and illegal drug use) were selected to be among the top 15 identified family problems. Approximately 70% (n = 103) of the students identified at least one substance use/abuse-related issue. Almost half (46%) reported two or more drug, alcohol, or tobacco use issues in their list of the 10 most challenging issues. Another strong area of conflict emerged around types of abuse/domestic violence, including sexual and physical abuse.

TABLE 1 Number of Respondents for Most Challenging Family Issues

Issue	n	Issue	n
Domestic violence	94	Prescription drug abuse	28
Sexual abuse	93	Homosexuality	27
Physical abuse	81	Drinking problems	26
Racial prejudice	73	Physical disability	25
Suicide	66	Eating disorder	23
Drug addiction	60	Behavior problems	19
Psychological abuse	52	Conflict with children	19
Transgender issues	51	Trauma	19
Criminal activity	46	Poverty	15
Alcohol abuse	45	Midlife crisis	14
HIV/AIDS	42	Codependency	12
Serious physical illness	42	Separation/divorce	12
Abortion	41	Conflict with adolescents	11
Emotional abuse	41	Housing problems	10
Illegal drug use	40	Marital conflict	10
Religious differences	40	Financial worries	9
Death	38	Emotional problems	8

Immigrant/refugee	38	Marijuana use	8
Infidelity	38	Depression	7
Mental retardation	38	Tobacco use	5
Mental illness	28	Job stress	2

Emerging Category Codes

Category coding

We initially expected to find that the students would rate substance abusers as the worst offenders in terms of representing the least desirable clients. Students were asked to write a few words about why their top selections would be challenging. It was a surprise to realize that substance abuse was only one of several client problems that students indicated they would prefer to avoid in practice settings. As a way of analyzing their reasoning for the issues they identified as most challenging, we conducted qualitative coding of their narrative responses. Three themes characterizations emerged:

Affective ("I don't agree with this, and therefore would not be comfortable")

Cognitive ("I don't know anything about this and therefore would not be comfortable")

Experiential ("I've never experienced this," or, by contrast, "I grew up with this, and therefore would not be comfortable")

These three categories reflect different bases for why students expressed unfavorable attitudes toward certain groups or individuals with specific presenting problems. All 42 client issues fit into at least one of these three dimensions, and this led to the exploration of an integrated, whole learner model for understanding how students may erect barriers to learning. In this whole learner model, educators could take into account various dimensions (affective, cognitive, and experiential) when addressing barriers (and bridges) to particular client populations. The category assignments of the issues are noted in Table 2, along with exemplar quotes.

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The most frequently experienced issues observed in other families were domestic violence, death, racial prejudice, infidelity, abortion, and drug addiction. For three of the issues, more than half of the students indicated having no direct experience—immigrant/refugee, transgender issues, and suicide. More than half of the respondents who indicated they had no experience with transgender and immigrant/refugee issues also indicated having little or no knowledge of them. Mental retardation also was an issue wherein students admitted having little knowledge. Last,

moral or personal beliefs were factors affecting the perception of challenge for a number of issues including infidelity, abortion, religious differences, racial prejudice, drug addiction, sexual abuse, domestic violence, alcohol abuse, transgender issues, and suicide.

Of the 103 students who reported substance use/abuse related issues as among their 10 identified problems, 40 (38.8%) also reported at least one substance use/abuse issue among their top 3 issues of greatest challenge. Of the issues identified as most challenging, alcohol abuse was reported to be the most frequently experienced in respondents' own families and the only issue (other than death) with which the students reported not having some personal experience. Experience with drug addiction also was frequently cited, with most students reporting familiarity with experiences occurring in families other than their own.

DISCUSSION

One of the problems with stereotypes is that they often operate as a source of expectancy for behavior (Hamilton, Sherman, & Ruvolo, 1990; Jussim, 1990). When accepted, they provide a shortcut to information processing, which can lead to incorrect assumptions if no additional information is sought or considered. Further, the more accepted such stereotypes are, the less information individuals holding those views need to support their judgments about a group's failings and deficits (Christiansen, Kaplan, & Jones, 1999). When this pattern of processing is allowed to occur, the expectancy greatly reduces the ability of the service provider to help (or be seen as helpful to) that individual.

In social work, information processing based on stereotypic viewpoints can have considerable effect on inaccurately identifying client needs and inappropriate interventions toward achieving outcome goals. Dissonance literature indicates that the less one identifies with a group or individual the more likely they are to see them as strange and different. Further, the more different they are perceived to be, the more likely they are to be viewed to embody undesirable traits and characteristics which can in increase a practitioner's dislike for, and efforts to distance themselves from, the identified client (Norton, Monin, Cooper, & Hogg, 2003).

It is critical to work toward replacing such closed-ended views about client groups and replace them with more open approaches to information seeking that will promote greater understanding of client needs and improve services to achieve them. Fortunately, although undergraduate social work majors new to the social work field may be tempted to rely on stereotypes to inform their judgments, they also can be expected to want to be accurate in their assessments of others and hence be motivated to seek information that will disconfirm their stereotypes that they may initially presume to be the basis for their clients' behavior.

Of course, understanding student barriers and the etiology of their construction has the greatest meaning when it informs ameliorative strategies to overcome them and deepen student compassion and empathy for different clients and families in the future. If educators can understand the types of barriers that affect empathy, analysis of need, and determination of

effective actions, we should be able to use that information to develop instructional strategies to help students overcome beliefs and attitudes that may interfere with their ability to provide quality services. Some observations from the data that relate to this point include the following:

Students may draw from their own experiences that result in forming barriers about prospective clients or client groups. Respect must always be given to personal experience and any emotional pain associated with that experience. However, students need to recognize their experience is not the only relevant experience and possibly should not be used to define the parameters of a problem. For example, students who are in recovery from substance addiction who want to work with this population need to recognize that their own experience is but one of the tools they may rely on.

Lack of direct experience or lack of knowledge may also be a barrier to a full understanding of issues affecting families. Because of the value of experience as a teacher, it is important to expose students to a range of family problems. The recent emphasis on service learning, which the social work profession has a long history of providing, is a good example of how this goal can be achieved for nonclinical track students and for those early in their training—before internships and other practice placements. In addition, modeling correct social work responses and behaviors is an essential part of educating students, especially with respect to unknown groups. Thus, faculty interaction with students with disabilities, guest speakers representing specific client groups, and faculty facilitation of class content about these populations are some of the ways to provide experiential information about client groups for whom students may be inclined to be less accepting.

Issues that originate from the affective dimension, wherein morality and religious views such as abortion and religious differences and abuse reside, make for potent barriers. Here, students can take a significant step by declaring their biases and using these acknowledgments to frame or reframe their own understanding of an issue, and the client group for whom the issue is a problem. For example, students can be asked to indicate, "How do I feel about this?" (affective), "What do I really know about this issue?" (cognitive), and "What experience have I had with someone in this situation?" (experiential). Their answers can be used to build bridges from views that are circumscribed in nature comprehensive and balanced descriptions of client need, motivations, and capacities to effect positive change.

Substance abuse is one of a number of problem areas that social work students perceived to be challenging. The initial purpose of this study was to examine comparative challenges which students would identify in working with individuals, including a substance abuse problem within a family context. Our initial presumption was that, as a family issue, substance abuse, (particularly, illegal drug use) would likely be viewed as one of the most difficult by students. What we found was that substance abuse did rank as a determining issue, but other problems such as domestic violence, sexual and physical abuse, racial prejudice, and suicide also were identified as issues of great challenge for students. In addition, we found that thematic qualities

of their reported reactions—affective, cognitive, or experiential—provided insight into why they felt particular problems might be acutely challenging. These themes also suggest important instructional points for helping students overcome personal barriers toward establishing greater empathy and understanding of challenging client issues, as well as their own barriers to being objective analysts and effective delivers of human services.

Study Limitations and Recommendations for Future Research

The present study provided an exploratory look at a cohort of bachelor of social work students' reactions to clients challenging presenting problems. However, the exploratory nature of this study requires that the findings must be considered with caution due to several limitations. First, the study sample was not randomly selected and represented only one sample of students, assessed during one semester in one undergraduate program. Second, the responses represent a snapshot view of the students' reactions at the time the study was conducted which may change after exposure to a class on families in crisis, or following supervised field instruction in an appropriate practicum setting. Third, the respondents were asked to react to labels of family problems without a contextual framework may have limited their ability to draw conclusions. Anyone who has taught practice or diversity courses can affirm the fact that some of the most powerful biases initially may not be acknowledged consciously at all. In other words, the participant's blind spots may pose the most impermeable barrier to their effective practice with families.

Future studies, therefore, need to move beyond the limitations of this study and explore ways to test reactions to family problem labels in an affective, cognitive, and experiential context. Because actual contact with client families may not be suitable or feasible, other means of exposing students, such as through role plays and video clips of interviews or observations of families with specific family problems, should be explored. An additional area of focus should be on identifying specific aspects of family problems and the reasons students perceive them to likely be challenging or difficult. This process might include assessment of resource needs and personal skills that students believe they would need to effectively help families of specific presenting problems. Last, such problems do not exist in isolation so it is important to recognize that a particular family presentation is likely to encompass a range of problems presenting a far greater challenge than would any one standing alone.

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