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To Participate or Not to Participate, that is the Question: A Critical Phenomenological Study of Clinical Social Workers and their Political Participation

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ABSTRACT

The social work profession is rooted in aiding vulnerable populations to overcome individual problems and the socio-political structures negatively impacting their lives. Firmly embedded in the NASW’s Code of Ethics (2008) are the concepts of social justice, social change, and political engagement, which should transpire in every form of professional practice. This is further evidenced by the CSWE’s (2015) dictum that social work students should engage in collaborative action within the profession and in tandem with clients to usher in equitable policies and forge social reform. Yet, macro-oriented scholars have accused the profession of neglecting its obligation to social change (Harding, 2004) and condemned clinical social workers for working in private practice (Specht & Courtney, 1992).

Helping professionals, like all members of society, have been influenced by broader social attitudes toward those that require aid and the provision of social programs (Carinol, 1979). This qualitative study examined the political participation of clinical social workers, identifying how socio-political forces impacted their levels of political activity. A critical phenomenological methodology assisted in understanding how the concept of power influenced the broader societal forces affecting individual's level of engagement or inclination toward the
political process. A review of the social work literature revealed no studies assessing clinical social workers’ political participation.

Several major findings were discovered in this study: a gender gap existed between male and female clinical social workers’ political participation, with most female clinical social workers viewing themselves as unqualified and unknowledgeable and possessing low levels of political ambition and political confidence to engage in political participation; many of the female participants described the challenges of achieving a work-life balance between their professional careers and traditional gender-based roles; clinical social workers’ level of exposure to various forms of political participation during their early lives, social work education and post-MSW careers, influenced the development of their professional identity and integration of political activity in practice; and most participants found it unethical to intertwine any form of political participation into practice, but acknowledged how policies and laws directly impacted their personal and professional lives.

*Keywords*- critical phenomenology, political participation, clinical social work, gender socialization, professional socialization, professional identity
To Participate or Not to Participate, that is the Question: A Critical Phenomenological Study of Clinical Social Workers and their Political Participation

Jason A. Ostrander

BSW, Elms College, 2003
MSW, University of Connecticut, 2005

A Dissertation
Submitted in Partial Fulfillment of the Requirements for the Degree of Doctor of Philosophy
at the University of Connecticut
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2016
 APPROVAL PAGE

Doctor of Philosophy Dissertation

To Participate or Not to Participate, that is the Question: A Critical Phenomenological Study of Clinical Social Workers and their Political Participation

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2016
DEDICATION

To the Nancy A. Humphreys Institute for Political Social Work

To those who have been told you can’t, you shouldn’t, or you won’t.

I say, be brave and enter the arena.

*It is not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasms, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who neither know victory nor defeat.*

Theodore Roosevelt, *Citizenship in a Republic*, 1910
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I arrived at the University of Connecticut School of Social Work (UConn) for both my MSW and PhD because of the Nancy A. Humphreys Institute for Political Social Work. The experience I have had with the Institute has completely changed my life. A special thank you to all the Institute interns for influencing my thinking and research every day. The faculty at
UConn deserve special recognition for their friendship, advice, and support; and a special recognition to Dean Dr. Nina Heller for her dedication to UConn and enduring support for the doctoral program. I would like to acknowledge Drs. Scott Harding, Kathy Libal, Cristina Wilson, Joan Letendre, Megan Berthold, Brenda Kurz, Hsiu-Ju Lin, and Tricia Carlson for providing me the skills and opportunities to conduct research. A special thank you to Kathy Birmie for all your help and support!

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INTRODUCTION

Social work has a rich history of helping marginalized and oppressed populations through social reform. One of the primary characteristics of the profession is its dual emphasis on the individual and the environment. The latter includes the social, political and economic structures and actors that impact clients on a daily basis. The National Association of Social Workers’ (NASW) Code of Ethics (2008) affirms that social justice and political participation are hallmarks of the social work profession and should be embedded in every form of professional practice. The Council on Social Work Education (CSWE) (2015) asserts that social work students should learn how to engage in collaborative action within the profession and in tandem with clients to bring about effective policies and create change. Macro-oriented scholars, however, have accused the profession of neglecting its obligation to social justice and political participation, and focusing its energies on micro practice (Harding, 2004; Haynes & Mickelson, 1997; Reeser & Epstein, 1987, 1990). Further, social work scholars have condemned clinical social workers for working in private practice (Amidei, 1987; Dean, 1977; Jayarante, Davis-Sacks, & Chess, 1988; Smaller, 1987; Specht & Courtney, 1992). In a national randomized study of political participation by social workers who are NASW members, Rome and Hoechstetter (2010) found that nearly 62% of the sample worked in direct practice; half of these identified their place of employment as private/group practice, a mental health facility, or a hospital. Slightly less than 85% worked primarily with lower and middle-income clients. As is viewed in other social work studies (Ezell, 1993; Ritter, 2006; Wolk, 1981), women accounted for almost 80% of the sample. The largest age cohort (40.8%) consisted of those between 46-55 years old.
Existing literature demonstrates that social workers participate in politics at higher rates than the general public (Andrews, 1998; Ezell, 1993, 1994; Felderhoff, Hoefer, & Watson, 2015; Hamilton & Fauri, 2001; Parker & Sherraden, 1992; Reeser & Epstein, 1990; Ritter, 2006, 2007, 2008; Rome & Hoechstetter, 2010; Swank, 2012; Wolk, 1981). In the NASW Center for Workforce Studies’ (2005) national study of licensed social workers, women accounted for 81% of licensed social workers—of whom 86% were non-Hispanic White, 7% Black/African American, 4% Hispanic/Latino, 1% Asian/Pacific Islander, and 1% Native American/Alaskan. These characteristics—gender, race/ethnicity—are noteworthy, as they are associated with higher levels of political participation, as are older age (Wolk, 1981), and more years of professional experience (Ezell, 1993). The most frequently practiced form of political participation among social workers is voting; most engage in other less public displays of political involvement (e.g., encourage others to vote) and they have little or no engagement in electoral activities (such as working on a political campaign or running for office) (Dickinson, 2005; Domanski, 1998; Ezell, 1993; Felderhoff, Hoefer, & Watson, 2015; Hamilton & Fauri, 2001; Parker & Sherraden, 1992; Reeser, 1988; Reeser & Epstein, 1987; Ritter, 2007; Rome & Hoechstetter, 2010; Wolk, 1981). Of note, inconsistencies exist in the social work literature in explaining the political participation of clinical social workers (Harris & White, 2013).

In order to assess the motivating factors behind clinical social workers’ political participation, this study utilized a critical phenomenological methodology to focus on the lived experiences of clinical social workers, examining how social, political, and economic forces impact their political participation. This methodology assists in understanding how the concept of power influences these broader societal forces, and in turn, can illustrate their effect on individuals’ level of engagement or inclination toward the political process. Historically, helping
professionals, have been influenced by broader social attitudes toward those that need aid and the provision of social programs (Carinol, 1979). Comprehending why clinical social workers participate in politics can help elucidate the factors driving political participation (and impeding it) and lead to new tactics and tools to better meet the profession’s ethical obligations. Further, this understanding can inform the educational standards of schools of social work, which could lead to the ultimate outcome of a more “politicized practice” which illustrates fidelity to the profession’s defining principles of person-in-environment and social justice (Fisher and Karger, 1997).

This chapter provides a brief history of the social work profession and its role in the political arena, followed by a presentation of the current social work literature on political participation. I frame this research study utilizing structural social work theory articulated by Robert Mullaly (2007). To further contextualize the study, I provide a synopsis of the current social, economic, and political contexts in order to frame the positionality of the respondents and the investigator in this research. This study was designed to elucidate the following research questions:

1. How do clinical social workers conceptualize political participation?
2. What factors influence clinical social workers’ levels of political participation?
3. How do clinical social workers integrate political participation into their practice?
CHAPTER 1: BACKGROUND, RELEVANT CONTEXT, AND SIGNIFICANCE

Biologists often talk about the "ecology" of an organism: the tallest oak in the forest is the tallest not just because it grew from the hardiest acorn; it is the tallest also because no other trees blocked its sunlight, the soil around it was deep and rich, no rabbit chewed through its bark as a sapling, and no lumberjack cut it down before it matured. We all know that successful people come from hardy seeds. But do we know enough about the sunlight that warmed them, the soil in which they put down the roots, and the rabbits and lumberjacks they were lucky enough to avoid? —Malcolm Gladwell, Outliers, 2008, p. 19-20

Social Work History

Over time, political participation within the social work profession has “waxed and waned in concert with broader societal shifts in economic, political, and social conditions” (Meyer, 2008, n.p.). In part, the profession’s inconsistency and ambivalence toward political interventions may stem from Jane Addams’ and Mary Richmond’s different approaches to address societal ills (Meyer, 2008). While both women—who influenced the shape and direction of future social work practice—sought to change social conditions through government regulation of programs and services (Axinn & Stern, 2008), they undertook different methods to achieve these outcomes.

Jane Addams is credited with establishing Hull House, one of the first settlement houses in the United States, in Chicago in 1889. Many of the settlement house workers had progressive ideals and helped form unions, created work projects for recently unemployed men and women, led strikes over work hours and poor working conditions, spearheaded child labor legislation, and initiated housing reform (Addams, 1910). Some of these early social workers recognized the imperative to influence government to create new policies and private services to meet individual and group needs. This involvement in the political sphere resulted in an awareness of the importance of using power to influence governmental processes (Weismiller & Rome, 1995). Addams is credited with saying, “When the ideas and measures we have long been advocating
become part of a political campaign, would we not be the victims of a curious self-consciousness if we failed to follow them there?" (as cited in Lasch, 1965, p. 348)

However, not all social workers agreed with the idea of becoming political actors. Mary Richmond, credited with being a leader of the Charity Organization Society (COS) movement, was one such detractor (Weismiller & Rome, 1995). Richmond envisioned that “friendly visitors” would investigate families seeking assistance, thoroughly document their household visits, and distribute aid to those considered "worthy." Over time, the COS leaders developed "scientific" methods to separate the worthy and unworthy poor and to help discourage "dependence" on public and private aid (Gitterman & Germain, 2008). In general, Richmond and other COS leaders did not seek to make structural changes to address critical social problems. They also held that social workers should be nonpartisan and maintain objectivity in the political arena (Weismiller & Rome, 1995).

In 1915, Abraham Flexner (1915) delivered a speech to the National Conference of Charities and Corrections, in which he claimed the field of social work was not a profession (Morris, 2008). Since that time the social work profession has struggled to invalidate Flexner’s arguments (Gitterman, 2014). Mary Richmond responded reactively, taking the necessary steps to professionalize, and wrote Social Diagnosis in 1917, based on the medical model as a transmittable method of practice, thus emphasizing work with individuals. The emphasis on the medical model resulted in a focus on personality reform and the work of Sigmund Freud, resembling his psychoanalytic-psychotherapist practitioner and psychiatric casework approach. This method did not take into consideration the complexity of the environment and how it could impact the individual. This essentially shifted the social work profession away from its social
reform function, which was a hallmark of the settlement house movement (Gitterman & Germain, 2008).

Before the United States entered World War I, some prominent social workers publicly opposed U.S. military action, and were derided for their pacifist beliefs (Reisch & Andrews, 2002). Among them was Jeanette Rankin, a social worker from Montana, who was elected to the United States Congress in 1916 and again in 1940. She was the first social worker, and the first woman, elected to Congress (Haynes & Mickelson, 2009). During the Great Depression many social workers pursued social reforms and debated the role the profession should assume in the political realm (Weismiller & Rome, 1995). The Depression revealed that poverty was more complex than individual failings: unemployment and poverty were linked to structural issues, such as poor wages, long working hours, lax labor laws, and risky economic practices (Axinn & Stern, 2008; Jansson, 2014). Social work reformers, including Mary Church Terrell, George Edmund Haynes, Dorothy Height, Harry Hopkins, Frances Perkins, and Bertha Reynolds, became actors in national politics and societal reforms. By the mid-1930s the Rank and File Movement—a social work unionization effort—began as a grassroots organization in New York City and grew to be a national movement of over 15,000 members (Reisch & Andrews, 2002).

U.S. participation in World War II resulted in full employment and economic recovery. The war created economic opportunities for people of color and women in the United States. Although there was widespread prosperity for some, many people still lived in poverty and faced forms of social exclusion, particularly people of color (Axinn & Stern, 2008). At the conclusion of the war, soldiers serving overseas returned to reclaim their prior jobs, resulting in an erosion of many of the gains achieved for women and people of color. This set the stage for the civil rights and feminist movements (Axinn & Stern, 2008; Jansson, 2014). Soon, a conservative
political climate reemerged and was framed by Senator Joseph McCarthy, Vice President Richard Nixon, FBI Director J. Edgar Hoover, and a national backlash against Communists, sympathizers, and spies, especially those within the U.S. government. McCarthy questioned those with liberal political beliefs, including social workers, during congressional hearings. Many social workers, such as Bertha Reynolds, lost their jobs and were marginalized (Andrews & Reisch, 2002).

The Great Society programs of the 1960s were implemented with the goal of alleviating poverty and racial injustice which overlapped extensively (Jansson, 2014). The political climate was one of social and political upheaval and challenges to racial, ethnic, and gender discrimination. By the end of the decade, the NASW, the largest professional association for social workers, was being criticized by its membership for its lack of political participation. In response, NASW created the Education Legislative Action Network in 1971, and the Political Action and Candidate Election in 1975. These committees helped to bridge the divide between the clinical and community action segments of the NASW (Weismiller & Rome, 1995). Another social worker did not join Congress until the 1971 election of Ronald Dellums to the House of Representatives. Upon his retirement, his former chief of staff and fellow social worker, Barbara Lee, was elected to his Oakland, California seat (Lane & Humphreys, 2011), which she still holds today. She is also the current chair of the Congressional Social Work Caucus, which was founded in 2011 and offers a social work perspective to legislation in Congress. Social worker Barbara Mikulski, elected to Congress in 1976, was the first woman elected in her own right to the U.S. Senate in 1986 (Mikulski & Whitney, 2001), and the first woman to chair the Senate Appropriations Committee. Lane and Humphreys’ (2011) identified 467 social workers that had successfully run for political office and most were elected to local and state office.
With the elections of Ronald Reagan and George H. W. Bush, the 1980s and early 1990s saw a return to a conservative political climate in which social safety net programs were drastically cut undermining prior social and economic gains, particularly for the poor (Jansson, 2014). NASW and some state-level chapters’ leaders reacted by implementing a targeted political action effort, hiring more lobbyists and support staff (Weismiller & Rome, 1995). A number of macro-focused social work groups were founded during this time. In 1981, the First Annual Community Organization Faculty Symposium was held, which later became the Association for Community Organization and Social Administration (n.d.) (ACOSA), and the Bertha Capen Reynolds Society, now known as Social Welfare Action Alliance (n.d.) was established. In 1995, the Nancy A. Humphreys Institute for Political Social Work (n.d.) (Institute) was established at the University of Connecticut, School of Social Work. In its twenty-first year, the Institute offers a campaign school for social workers to learn how to work on a political campaign or run for political office. Other social work organizations have been founded to strengthen and develop students’ and clinical social workers’ engagement with the political process. These include: Influencing Social Policy (n.d.) (formerly Influencing State Policy, ISP), the Policy Conference 2.0. (ISP, n.d.), and YSocialWork (CRISP, n.d.). Prior to his retirement from Congress, Edolphus Towns, a social worker, founded the Congressional Research Institute for Social Work and Policy (CRISP). CRISP (n.d.) works with the Congressional Social Work Caucus to increase social work participation in the federal legislative process through such avenues as internships and to encourage social workers to become congressional or executive staff.
Political Participation and Social Work

There is a dearth of studies on the political participation of social workers. The first social work publication to analyze the political process was authored by James B. Reynolds in 1896 (Weismiller & Rome, 1995). Within the social work literature, 10 studies used professional social workers as research participants and sampled NASW members (Ezell, 1993; Felderhoff, Hoefer, & Watson, 2015; Hamilton & Fauri, 2001; Parker & Sherraden, 1992; Reeser & Epstein, 1990; Ritter, 2006, 2007, 2008; Rome & Hoechstetter, 2010; Wolk, 1981). An additional 16 studies have used various other subgroupings, such as executive directors of NASW Chapters (Pawlake & Flynn, 1990), administrators (Ezell, 1991), state NASW Chapter members (Hartnett, Harding, & Scanlon, 2005; Salcido & Seck, 1992; Scanlon, Hartnett, & Harding, 2006), child and family service workers (Andrews, 1998), social work leaders in health care (Domanski, 1998), undergraduate and graduate social work students (Bernklau Halvor, 2016; Hylton, 2015; Ostrander, Sandler, & Nieman, 2015; Pritzker & Burwell, 2016; Swank, 2012; Wolk, Pray, Weismiller, & Dempsey, 1996), and social work educators (Mary, 2002; Pritzker & Lane, 2014). Six additional studies contribute to the understanding of social workers’ involvement in the political arena: Rocha, Poe, and Thomas (2010) explored the perceived barriers to political participation; Rome, Hoechstetter, and Wolf-Branigin (2010) discussed empowering clients to participate in politics; Salcido (1984) examined social workers’ participation in political campaigns; and Haynes and Mickelson (2009), Humphreys (1994), and Humphreys and Lane (2011) studied social workers elected to public office.

Although the social work literature is limited, there have been several important discoveries. Certain characteristics of social workers have been found to be correlated with higher levels of political participation, including: being African American (Ezell, 1993; Reeser &
Epstein, 1990), NASW members (Ezell, 1993; Hamilton & Fauri, 2001), older (Rome & Hoechstetter, 2010; Wolk, 1981); high-income (Wolk, 1981), a homeowner (Parker & Sherraden, 1991); macro practitioners (Ezell, 1993; Reeser & Epstein, 1990; Wolk, 1981), and public sector workers (Rome & Hoechstetter, 2010); those identifying as Jewish (Reeser & Epstein, 1990); those with a macro focus in graduate school (Ostrander, Sandler, & Nieman, 2015); higher levels of education (Ezell, 1993; Parker & Sherraden, 1991; Wolk, 1981); and those with more years of professional experience (Ezell, 1993; Rome & Hoechstetter, 2010; Wolk, 1981).

Rome and Hoeschstetter (2010) created a tool to measure various political acts, terming such activity as either passive or active forms of political participation—including civic activities (Jenkins et al., 2003)—and asked respondents if they participated in them; Brady (1999) termed this type of method a “political action approach.” Rome and Hoechstetter (2010) categorized passive forms of political participation as including activities such as reading the news and writing a letter to the editor. Active forms of participation included testifying at a legislative hearing, campaigning for an elected official, participating in a rally or protest, and voting. In the research to date, social workers participate in passive forms of political participation in much greater numbers than active forms (Andrews, 1998; Ezell, 1993; Hamilton & Fauri, 2001; Lane, Ostrander, & Rhodes Smith, 2016; Ostrander, Sandler, Nieman, & Loveland, 2016; Parker & Sherraden, 1992; Rome & Hoechstetter, 2010; Swank, 2012; Wolk, 1981). Finally, Domanski (1998) integrated the multiple terms used in the social work literature to describe political acts and behaviors that make up the concept of political participation. Further, she created a model that divides the categories of active and passive participation into ten prototypes: communicator, advocate, voter, lobbyist, persuader, collaborator, campaigner, individualist, witness, and
activist. She contends that these roles are a “reliable empirical model for political participation that integrates routine social work professional functions with their political components” (p. 156).

**Theoretical Frame**

Maurice Moreau (1979, 1990) developed the theory of structural social work in the mid-1970s, and continued to refine this approach until his death in 1990. Moreau viewed structural social work as a way to collect and intertwine radical perspectives, such as Marxism, critical race theory, feminism, and intersectionality, into one approach (Carniol, 1995). Structural social work does not prioritize different forms of oppression (e.g., classism, racism), but rather views them as intersecting (Mullaly, 2002, 2007). This would suggest that sexism, racism, and classism are operating simultaneously, and structural social work strives to eliminate these phenomena, rather than help individuals to process their responses or adapt to these conditions. Built into this theory is an understanding that oppression and marginalization may be a global occurrence, but people experience it differently based on their social, economic, and political status (Moreau, 1990; Mullaly, 1997, 2007). Additionally, structural social work does not only focus on addressing macro issues but can be used on a micro and meso level. The central concern of this theory is power, and connecting the personal and the political, which can be accomplished by encouraging social work clients to subdue the forces that dominate them (Carniol, 1995; Moreau, 1990).

Structural social work is viewed as part of the critical theory school, seeking to move “from a society characterized by exploitation, inequality, and oppression to one that is emancipatory and free from domination” (Mullaly, 2007, pp. 214-215). Critical theory is based on the work of Karl Marx and his dialectical change theory. Although Marx’s theory provides a
broad view of larger societal interactions, his work focused on conflict and change between social classes. An outgrowth of Marx’s work, conflict theory, not only examines social class, but also tries to understand the unequal distribution of power and the oppression of groups who are not White, heterosexual, cisgender, and male (Pyles, 2009).

Mullaly (2007) posits that structural social work is based on a socialist ideology within radical social work, grounded in critical theory, and views society as something that can be changed. He contends that social problems and inequality stem from capitalistic systems (structural) and not from individual failings; encompass class, gender, race, etc., relations; exclude marginalized and oppressed groups from meaningful participation in society; and are self-perpetuating. Thus, he argues, micro and macro social workers should adopt structural social work theory into practice because the structural context influences their clients daily. According to Pond (1989, as cited in Mullaly, 2007), the distribution of economic rewards between different groups in the population and various parts of the country is an important determinant of the nation’s economic and social structure. Economic and social inequity are inextricably intertwined, and the distribution of income and wealth, the extent of poverty and privilege, have their effects on living standards, life chances, and opportunities. Moreover, inequalities in wealth have political implications, providing the wealthiest individuals with access to economic, social, and sometimes political power. For this reason, inequalities can become self-perpetuating, having an influence on the institutions that reinforce the class structure (pp. 244-245).

There are two overarching goals of structural social work theory: to assuage the negative influences facing marginalized and oppressed populations; and to change the systems and circumstances that maintain the aforementioned inequalities. Put simply, this theory seeks to
assist individuals with their specific, unique issues while helping to address, challenge and
deficits of larger social, economic, and political systems (Mullaly, 1997, 2007).

**Current Social, Economic, and Political Context**

Understanding the current social, economic, and political context of the United States is vital when considering the positionality of the respondents and the researcher in this study. Structural social work theory helps to frame the importance of how micro, meso, and macro systems work reciprocally and impact different groups. During this study, participants spontaneously began discussing racism, sexism, and classism. In order to place the participants’ interviews in the current social, economic, and political context, emergent topics discussed during the interviews are highlighted in this section.

**Race**

In June 2015, at the height of data collection for this study, a White supremacist entered a historic black church in South Carolina and started shooting, resulting in the deaths of nine African-American occupants. Shortly after that, a rash of church fires were reported in South Carolina; and in total, seven black churches caught fire, and at least three were deemed arson. This harkens back to the era in the Jim Crow south when church burning was a common tactic to terrorize black communities (Szep, Dunsmuir, & Stein, 2015). This event had a profound effect on some of the study participants.

Since the summer of 2014, the issue of police brutality, particularly with African Americans and people of color, has garnered national attention. The shooting death of Michael Brown by the police in Ferguson, Missouri and the choking death of Eric Garner by New York City police not only ignited protests and riots, but were a catalyst for the creation of the Black Lives Matter movement. Black Lives Matter was founded to raise awareness of the
disproportionate rate of death of Black people in encounters with law enforcement officials (Kindy, Fisher, Tate, & Jenkins, 2015; Somashekhar, Lowery, Alexander, Kindy, & Tate, 2015). In a 2015 survey, the Associated Press found that 44% of participants believed the deaths of Blacks that encounter police is a significant problem (Dobnik, 2015). The Washington Post researched the total number of police-involved deaths during 2015 and discovered that while African American men only make up 6% of the general public, they represent 40% of unarmed men shot by police. Three out of five African American or Hispanic men who were killed by police did not possess a weapon or gun (Kindy, Fisher, Tate, & Jenkins, 2015; Somashekhar, Lowery, Alexander, Kindy, & Tate, 2015). Not only are African American men disproportionately more likely to be shot by police officers, but they are five times more likely than Whites to be incarcerated and Latinos are twice as likely (Sakala, 2014). There is historical context for the often antagonistic and violent interactions between law enforcement and people of color.

The modern American police force can be traced to two historic features of early policing, slave patrols and Night Watches. These institutions were born out of slavery and were designed to control the behaviors of minorities (Turner, Giacopassi, & Vandiver, 2006). At the conclusion of the Civil War, the legacy of slavery and racism did not end and it could be argued that violence against African Americans only escalated during Reconstruction with the rise of White vigilante groups, such as the Klu Klux Klan. The legacy of past violence against African Americans and other people of color continued after the passage of the Civil Rights Act of 1964. African Americans, in particular, have experiences with law enforcement that range from racial profiling resulting in an increased likelihood of being stopped by police, to more lethal interactions when detained or placed in police custody (Kappeler, 2014).
In 2015 the Pew Research Center surveyed racial attitudes and the results demonstrated that 50% of Americans identified racism as a significant social problem. Also, 59% believed that the United States needs to continue making changes to achieve racial equality; when separating the poll by race, 53% of Whites think more needs to be accomplished to achieve racial equality. Roughly three-quarters of African Americans and approximately 60% of Hispanics characterized racism as an extensive issue (Doherty, Kiley, & Jameson, 2015). Race has long been central to an understanding of the American social landscape. However, race relations and attitudes are presented with a new challenge, in that the United States is transitioning from a majority White society to one comprised of a majority of people of color. As of 2014, 13 states have 40% or more of their population consisting of people of color. Of those states, California, Texas, Hawaii, and New Mexico have a majority population represented by people of color. Over the next 12 years Latinos and Asian Americans are expected to experience the most population growth in the United States. The Bureau of the Census projects that by 2044, Whites will make up 49.7% of the overall U.S. population, while 25% will be Latino, 12.7% African-American, 7.9% Asian, and 3.7% will bi- or multi-racial (Frey, 2014).

As racial minority groups of color begin to increase in size, White society is perceiving challenges to their power and privilege. Group threat theory posits two perceived primary drivers for White Americans’ negative response to demographic changes diminishing their majority status: economic climate (e.g., high unemployment) and the size of the minority group. Of note, the size of the minority group is directly related to their competition for economic resources and relative strength to engage in collective action (Craig & Richeson, 2014). For example, a 2016 poll found that 50% of Americans describe immigrants as a “burden on our country” (Yglesias, 2016, para. 3).
Economics

In late 2015, the Federal Reserve increased interest rates by a quarter of a percent, which symbolized confidence in the U.S. economy and the end of the recession (Appelbaum, 2015). Although the national unemployment rate dropped below 5%, not all racial groups have recaptured their prior wealth or employment levels. Not only has African Americans’ wealth continued to shrink, but their average salary has also dropped by 44 cents per hour over the past 15 years (Cohen, 2015). Economic inequality and low social mobility is inextricably tied to the pervasive and persistent racial inequality in the United States (Reeves, 2013). African Americans continue to experience an unemployment rate more than twice the White rate. Similarly, the Latino unemployment rate is twice that of Whites, and their weekly wages continue to decrease (Razza, 2015). Despite these trends, the buying power of people of color has continued to rise since 1990 because of their increasing population. African Americans’ purchasing power will increase from $316.3 billion in 1990 to $1.3 trillion by 2018. Similar increases are projected for Latinos ($210 billion to $1.6 trillion) and Asian Americans ($115.4 billion to $1 trillion) (Humphreys, 2013). An Urban Institute study predicts Latinos will account for over 55% of homeownership by 2020 (El Boghdady, 2014).

Economic inequality affects women as a cohort, however, women of color experience poverty at higher levels than White women. Women currently hold 49.3% of the jobs in the United States, yet tend to have multiple employers and are less likely to be self-employed. Also, a pay gap still exists when comparing the salaries of men and women (Council of Economic Advisers Issue Briefs, 2015). In the United States women in general are paid $.79 for every dollar a White man earns. For African American women the figure is $.60, for Latinas it is $.55, and Asian women are paid the most at $.84 for every dollar earned by a White man (U.S.
Since 2001 the gender pay gap has remained constant between $.24 and $.22. Unlike college-educated women, low-income and less educated women are unlikely to have access to health insurance through their employer, a retirement plan or savings. Also, only 44% of women have access to paid time off. Even when women and men are completing similar labor requirements, the pay gap does not disappear. When women elect to have children, providing them with paid maternity leave has shown to increase their productivity and enable them to amass greater earnings. If the minimum wage were increased to $10.10 per hour and indexed for inflation, 56% of women in the United States would benefit from the higher salary (Council of Economic Advisers Issue Briefs, 2015). Although there is mixed economic news for people of color and women an increase in their political participation has enabled them to assume greater political power.

**Political**

Race and gender have been recurring themes throughout the 2016 presidential primaries. The leading Republican presidential candidates used conservative rhetoric and ran for president to the right of the political spectrum. Many comments made during the Republican debates were inflammatory regarding women, immigration, African Americans, Muslims, and Hispanics, and seemed to reflect a battle for the ideals of the Republican Party. A boisterous Tea Party movement supported maintaining low wages and anti-immigration issues, while Republican elites were concerned that their long-held values, such as free trade, lower taxes, and less regulation, were being left behind. On May 26, 2016, billionaire Donald Trump earned enough delegates to win the Republican nomination for president. He won running against Republican elites and those with prior political experience, focusing his campaign on reaching blue-collar White men and working class cities and towns (Healy & Martin, 2016). Much of Trump’s
rhetoric has seemed to draw on the threats elucidated by group power theory, and essentially attributes the economic hardship experienced by middle and working class Whites to the influx of immigrants to the United States (Blow, 2016).

On the Democratic side, after a failed bid for the White House in 2008, Hillary Clinton ran again for president in the Democratic primary in 2016 and was focusing her message on women, people of color, and the middle class. Her primary opponent, Senator Bernie Sanders, ran as a democratic socialist and led a populist campaign focused on social inequality. Both campaigns tried to capitalize on social unrest to catapult them into the general election by appealing to women, the lower and middle class, African Americans, and Hispanics. However, on June 6, 2016, Hillary Clinton secured the most delegates to make history and become the first woman to secure a major political party's nomination for president (Fandos, 2015). The new political reality for the U.S. Congress is one influenced by anti-government and populist rhetoric and a hyper-partisan environment that has impeded its ability to address the needs of the American people. There seems to have been a significant push toward more neoliberal policies, which have exacerbated income inequality, undermined social welfare programs, and seen more federal responsibilities given to ill-prepared states and local communities. The net results have led to greater unemployment, fewer public dollars to address a crumbling infrastructure, and a shrinking middle class (Huetteman, 2015).

**Voting.** Since 1924, “political scientists have documented almost no change in the empirical predictors of voter turnout. Immigrants, minorities, young people, the less-educated, the poor, and the politically disinterested are systematically less likely to vote than those with higher social status” (Rolfe, 2013, p. 2). However, an increase in voting can been viewed during the 2004, 2008, and 2012 Presidential elections, when voter turnout was the highest it has been
in almost 40 years (Lieberman, 2012; Wolf, 2008). Not only was turnout higher but those who voted represented the most racially and ethnically diverse electorate in U.S. history. “African-American voter turnout rose to 65% in 2008 nearly matching White turnout (66%) for the first time in our nation's history. Youth voting was the highest in a generation. New voters in the lowest income and education brackets doubled from 2004 to 2008. Latino turnout rose to 50%—and is only likely to increase” (Lieberman, 2012, n.p.). As of 2015, African Americans accounted for 12.5% of the electorate, followed by Latinos at 11.4%, and Asian Americans at 4.2%. When focusing on states in which no candidate or political party has a majority of political support (such as Florida), people of color will become a larger portion of eligible voters; and by 2016 the eligible-to-vote Latino population will increase to 20.2%, African-Americans will account for 15.5%, and 2.2% of Asian-Americans will be eligible to vote (Oakford, 2015). Each year, more women register to vote and actually do vote, resulting in greater political clout for women. Exit polls from the 2012 presidential election reported that 53% of women voted (Omero & McGuinness, 2012). Further, 76% African American women were registered to vote and voted in larger numbers than any other group (Baxter, Holmes, & Griffin, 2015). There appears to be great change underfoot in American society with greater attention being given to race relations, changing population demographics, and social and economic injustice. Clinical social workers have a prime opportunity to reclaim the profession’s historical traditions and professional mandate to engage in political participation.

**Organization of the Dissertation**

This chapter introduced the research study through social work’s historical presence in politics, through structural social work theory, and by offering a contextual grounding in the social, economic, and political spheres of contemporary U.S. society. Chapter Two provides a
description of the study’s methodology and rationale for choosing a critical phenomenological approach. Further, it outlines how the research study was conducted and the analysis procedures utilized. Chapter Three offers descriptions of the participants—including their political interests and political participation—and brief biographic narratives. Chapter Four outlines key findings on gender socialization and political efficacy within the context of existing literature. Chapter Five follows a similar format, outlining the literature on professional socialization, followed by the central findings. Finally, Chapter Six discusses the implications of the current study for social work practice, social work education, and the influence on broader society, and offers recommendations for future research.
CHAPTER 2: METHODOLOGY

Wanderer, your footsteps are the road, and nothing more; wanderer, there is no road, the road is made by walking. By walking one makes the road, and upon glancing behind one sees the path that never will be trod again. Wanderer, there is no road—Only foam trails upon the sea. —Antonio Machado, *Campos de Castilla*, 1912

Rationale for the Research Design

The social work profession has had much debate concerning its “cause” and “function.” Of note, clinical social workers have been criticized in the literature for their lack of political engagement. However, until this study, no research exists that contextualizes the dynamic systems interactions that impact the political participation of clinical social workers. This study will help develop a richer understanding of how clinical social workers perceive political participation and what factors inhibit and/or enhance their participation. This chapter will: describe the research design; discuss the researcher’s positionality and reflexivity; attend to issues of rigor and trustworthiness; define the participant selection and protection process, and outline the qualitative data collection and analysis process.

Research Questions

Three research questions guided this study to better understand the lived experiences of clinical social workers’ political participation:

1. How do clinical social workers conceptualize political participation?
2. What factors influence clinical social workers' levels of political participation?
3. How do clinical social workers integrate political participation into their practice?
Research Design

Using a critical phenomenological approach, this study explored “the lived experiences” of clinical social workers and the various factors that contributed to their decision to (or not to) participate in politics. Critical Phenomenology assists in understanding “inequalities based on gender, race, social class, and sexual orientation as hidden (or not-so-hidden) subtexts of much of the knowledge produced in Western society” (Padgett, 2008, p.8). Through delineating power differentials and the social, political, and economic forces impacting clinical social workers’ daily lives and experiences, this study helps contextualize the decisions they are obliged to make between meeting the profession's mission and ethics and fulfilling their daily job responsibilities.

Data Collection

Data was collected using multiple modalities that provided several vantage points for understanding the political participation of clinical social workers. The study used in person and Skype interviews, which allowed for flexibility of data collection (Padgett, 2008). Seventeen interviews were conducted face-to-face, and six were carried out utilizing Skype. The primary techniques employed were semi-structured interviews and a demographic survey. Through the use of open-ended questions and the development of rapport, a sense of openness was achieved with participants to understand their perspectives on political participation. The ease with which this openness developed was likely due in part to social workers' use of talk therapy during their daily practice (Atkinson & Silverman, 1997). After conducting a verbal screening (see Appendix A) through which a participant was deemed eligible to participate, I offered them the option of a face-to-face or a Skype interview. Utilizing Skype technology allowed for participants to feel a sense of comfort and ease to participate from their home or a place of safety. To protect the identity of participants, I conducted the Skype interviews from the privacy
of a locked office (Hanna, 2012). Before the interview took place, I explained the informed consent sheet (see Appendix B) to the participant and requested verbal approval.

A Smartpen was used as the primary recording device for the interviews, and a secondary Olympus audio recorder was used as a backup. No participant refused to have his/her interview recorded. Although all interviews were recorded, I took thorough field notes during each interview and wrote a memo afterward on most participants. All data was downloaded from the Smartpen (both the recording and PDF version of the field notes) and the Olympus recorder as soon as possible and transferred to a password-protected laptop. Each participant was assigned a unique identifier, and all personal information was removed to protect the confidentiality of the participants. After all data had been collected, the master list connecting the participants' identity and his/her unique identifiers was destroyed.

As a backup, all of the study’s documents were uploaded to Dropbox (a password-protected cloud-based server). A third party signed a confidentiality statement and two people transcribed all interviews. Once I compared each transcription to the corresponding recording (to ensure accuracy), the transcript was uploaded into NVivo 11 for Mac—a qualitative research software program to help organize and sort data for analysis—and the recording was deleted. At the conclusion of each interview, a demographic survey created in Qualtrics—a web-based survey system with protected servers and programming that is easy for participants to navigate—was administered through the use of an iPad. The survey collected basic demographic information (Appendix C) and included political participation level scales to contextualize the data. The survey data was downloaded and entered into SPSS version 23 for Mac.
**Initial Plan for Study and Challenges**

While developing this study, I sought to limit the need for paper files to be maintained and protected. One way to achieve this was to have participants self-administer a demographic survey on an iPad; the survey was designed utilizing Dillman, Smyth, and Christian's (2009) work on Internet-based surveys. Qualtrics eliminates the necessity of paper documents connecting the participant to the study and maintains its consistency between interview methods. When scheduling an interview, and knowing participants could be located anywhere in New England, I initially offered participants a Skype interview. If the participant did not feel comfortable with technology or Skype, I drove to the participant and completed the interview face-to-face; only six interviews were conducted utilizing Skype. At the conclusion of the face-to-face interviews, I presented the participant with a pre-loaded iPad with the Qualtrics survey. For those electing a Skype interview, at the end of the interview I emailed the participant the Qualtrics survey link. While still on Skype, the participant completed the survey.

Before conducting this research, I tested the iPad utilizing Wi-Fi at my home, in public places with free and open access, and by utilizing a hotspot created with my mobile phone. In every case, the iPad and Qualtrics worked as anticipated. There were no technical difficulties with the equipment during the first interview, and the participants were forthcoming about their experiences relating to political participation. However, during the following four interviews (conducted face-to-face) the iPad was unable to load the Qualtrics survey. The participants observed the program not working and offered to complete the questionnaire at a later time. I utilized Dillman et al.’s (2009) strategies for Internet-based surveys and emailed the demographic survey link to each participant; this included personalizing each participant’s email (including the survey link) and conducting repeated contacts to facilitate the participants’
completing the survey. However, one participant did not respond to the first email. Adhering to Dillman’s method, I sent a second personalized email, told the participant how important the demographic survey was to my research, and included the survey link. Unfortunately, the participant never completed the survey. Before conducting the fifth scheduled interview, and after multiple conversations with Qualtrics’ customer support staff, the problem was identified and resolved for every subsequent interview.

**Interviews**

**First Interviews.** A semi-structured interview guide (Appendix D) was developed to answer the aforementioned three research questions, and utilized during all formal interviews, which each lasted 75-90 minutes. Over the course of the study, the semi-structured interview questions were modified with input from my dissertation committee members. For example, three questions during the first three interviews were not eliciting responses relating to the overall purpose of the questions. With input from my dissertation committee, the questions were revised and proved effective during subsequent interviews. A multitude of probes and follow-up questions were utilized to expand upon the participants’ responses. Also, this technique encouraged participants to continue to speak freely (Padgett, 2008).

**Second Interviews.** All first interviews were transcribed before second interviews were conducted. I listened to each interview and when a question was not fully answered, and a new question and thought were triggered, I wrote notes to capture this information. This enabled me to resolve which participants needed to be re-interviewed to truly grasp the participants’ lived experiences and answer the research questions. Based on this information, five participants were selected to be re-interviewed. Similar to the first interviews, probes and follow-up questions were used to explore the interview content. To improve the interviewees’ recollections, I used
the following techniques: encouraged the participants to take their time answering questions; read back to the interviewee specific portions from the first interview to help them recall our prior discussion; asked participants to use recent specific memories; and used specific events as contextualized cues, such as “just before your children finished school for the summer…” (Thomsen and Brinkman, 2009).

Field Notes

At the conclusion of every interview, I identified a quiet location to take extensive field notes. This included my impressions and reactions to the interview (e.g., demeanor, body language), observations (e.g., environment, agency), as well as ideas and questions for further consideration. Field notes were critical in documenting my thoughts and trying to understand the perspective of the participants, clients, and the agencies.

Sampling

This study would not have been possible without the commitment from the participants. As the data were being analyzed, I began to view participants as co-researchers because they not only seemed to engage wholeheartedly in this process, but they also invested in the successful completion of this study. Over the course of a year, most of the participants checked-in and offered clarification around phrasing.

Participants

After receiving approval from the University of Connecticut Institutional Review Board, nonprobability purposive and snowball sampling methods were employed due to its exploratory nature (Jones, Torres, & Arminio, 2013). To begin the recruitment process, I contacted specific agencies that employ licensed clinical social workers who reside in Connecticut, Rhode Island, Massachusetts, Vermont, New Hampshire, and Maine. I focused on this region because I have a
broad professional network in New England. According to the NASW Center for Workforce Studies’ (2005), almost 14,500 licensed social workers were identified in New England. At the conclusion of each interview, I provided my contact information to be shared with other potential participants. The combination of purposive and snowball sampling enabled me to recruit and enroll participants with relative ease. I was able to secure most of my first interviews between April and May 2015. The goal of this sampling strategy and study design was not to generalize to the larger social work population or to test if a theory could adequately explain and predict what clinical social workers experienced. Rather, it was created to capture a rich and thick description of the phenomenon—in this case the political participation and political interests of clinical social workers (Padgett, 2008). In this study, clinical social workers were considered the experts on their “lived experiences.” In order to have participated in this study, the social workers must have: had a Master’s degree in Social Work; had two-years post-education clinical practice experience; and provided direct clinical therapeutic services to clients.

**Demographic Survey**

At the conclusion of each interview, the participant was provided with a self-administered demographic survey (Appendix C), which was created in Qualtrics. Participants who had face-to-face interviews completed their survey in the Qualtrics program, which was set up on an iPad. Participants who utilized Skype received an email with a link providing access to the demographic survey. The electronic survey eliminated a paper trail connecting the respondent to the study and allowed for consistency in collecting this data between face-to-face and Skype interviews. The survey asked participants basic demographic questions and incorporated Rome and Hoechstetter’s (2010) political participation scale. The 18-item scale assesses what types of political activities social workers participate in most frequently, using 5-
point Likert response sets (from "never" to "always"). A political participation score ranging from 0 to 72 for each respondent was calculated. Ostrander, Sandler, and Nieman (2015) conducted a study utilizing this scale to assess the political participation level of MSW students. When determining the validity of the scale, its Cronbach's alpha was determined to be .919. Further, when the scale was separated into "passive" and "active" subscales, the Cronbach's alpha of the nine-item "passive" scale was .835, and that of the nine-item "active" scale was .869. The data from the demographic survey was uploaded into SPSS version 23 for Mac on a password protected computer to assist in describing the sample. The results from this survey appear in Chapter Three.

Data Analysis

Saturation

Over the course of this study, 23 first and five follow-up interviews were conducted. Charmaz (2006) argues that the purpose and the size of a particular study will ultimately determine the sample size. For example, if the research is making "modest claims," then "25 [participants are] adequate for smaller projects" (p. 114). Green and Thorgood (2009) reason that researchers have funding or time restrictions on their work, and do not have the ability to analyze qualitative data continually until theoretical saturation has been achieved; they suggest that such considerations should be provided for doctoral research.

Coding

A professional transcription service was utilized to transcribe all the interviews. The Institutional Review Board (IRB) approved the use and required the transcription service to sign a confidentiality statement. All interviews were transcribed into a Word document and saved on a password-protected laptop. The Word documents were then uploaded into NVivo 11 for Mac.
Before coding the interviews, I listened to each interview and read along with the transcript. This served two purposes: first, I could error check the transcription before coding; and second, I could get a "feel" for the interviews prior to creating an initial codebook.

**Initial Codebook.** In order to create an initial codebook, I utilized four interviews based on the following criteria: 1) a participant with no experience engaging in political participation; 2) a participant with significant experience engaging in political participation; and 3) the two participants I interviewed twice, prior to coding. The participants also varied by age (ranged from late 20s to late 50s), gender (one male and three females), race (one person of color and three White participants), and geography (Connecticut, Massachusetts, Rhode Island, and Maine). These criteria enabled me to create an initial codebook based on a diverse group of participants (e.g., race, gender, age, geography, and professional experience). In order to capture the nuances of each participant’s experience, I devised a first and second cycle coding methodology, as recommended by Saldaña (2013). First cycle coding allows for initial separating and sorting of data according to the different type of coding employed. Second cycle coding is “more challenging” because it requires “such analytic skills as classifying, prioritizing, integrating, synthesizing, abstracting, conceptualizing, and theory building” (p. 58). The coding methods were selected based on the research questions, the exploratory nature of this study, and the data collected from the use of semi-structured interviews.

**First Cycle.** I utilized first cycle coding with four interviews within this study. In order to capture broad patterns and potential categories, I used Holistic Coding. Holistic Coding "lumps" the data together and maintains whole passages to honor the participants' narratives. Further, it is used as a preparatory approach for more nuanced coding in further coding cycles
(Saldaña, 2013). This allowed me to separate the larger segments of data into categories based on their general meaning, which resulted in 156 first cycle codes.

**Second Cycle.** After completing first cycle coding, I implemented the second cycle of Eclectic Coding to refine further the Holistic Codes developed. Eclectic Coding allows for the use of multiple types of coding styles that are purposefully selected to help further nuance first cycle analysis. For this data analysis cycle, I elected to use four coding methods: In Vivo, Emotion, Values, and Descriptive Coding. In Vivo Coding uses the participant's own language from the data as codes. Emotion Coding classifies emotions discussed by the participant or witnessed by the researcher. Values Coding reflects the participants “values, attitudes, and beliefs,” which represent their perspectives (p. 268). Descriptive Coding normally uses a noun to summarize the overall theme of the passage. Each coding method assists in further capturing the essence and meaning of the participants’ narratives (Saldaña, 2013).

**Initial Codebook Refinement.** After employing the first and second coding cycles, 388 codes were created. This list needed to be further refined and merged to create categories and subcategories of the codes to be used on the remaining interviews. A three-part protocol was designed by the researcher to reduce the initial list of codes: 1) the codes were reviewed and merged based on the similarity between coding names and review of highlighted passages within each code. This step was quick and eliminated one-third of the codes because there was significant overlap and duplication; 2) the codes were then broken into categories and subcategories based on passages within each code; and, 3) the category and subcategory were reviewed individually, and all highlighted passages were read. If highlighted passages seemed to be coded incorrectly or no longer applied to the corresponding code, the passage(s) were removed and re-coded. At the conclusion, all the concepts captured by the highlighted passages
in total were listed in an Excel spreadsheet. A dictionary and thesaurus were utilized to ensure the codes accurately represented the participants’ narratives. At the conclusion of this refinement process, 13 broad categories and 40 sub-categories were created and defined to code the remaining 19 interviews. This process also helped strengthen credibility and trustworthiness of the findings.

Co-Coder

Coding is a subjective and demanding act of organizing and sorting narrative into silos of meaning. In order to further increase the rigor and trustworthiness of the coding process, a co-coder was employed (Padgett, 2008). The co-coder was a recent MSW graduate from the University of Connecticut School of Social Work, and successfully passed a qualitative research course and worked on other research projects related to this study’s topic. Before she began coding, I trained her for two hours on coding, reflexivity, bracketing, and the NVivo software.

Independent Co-Coding. The co-coder and I independently coded each interview using the initial codebook I created. We kept a journal of questions, comments, and reflexivity for each interview coded. To reduce bias, I did not read the co-coder’s journal until after the coding process had concluded. Further, any conflicts identified (e.g., missing code, refinement of a code’s definition) with the initial codebook were noted and changed in the coder’s initial codebook. Once both coders were finished, we met twice for 90 minutes to discuss discrepancies. These conversations were based on the data (both the interviews and journal entries) and how best to fit the codes to the data. After reaching consensus on all discrepancies, we were left with a much richer data set for my later analysis.
Analytic Memos

The use of analytic memos throughout this study served as a repository for: coding ideas; justifying coding choices; flushing out nuances in emergent data; and creating categories and subcategories (Saldaña, 2013). This process provides an audit trail to understand how decisions and conclusions were reached throughout this study.

Thematic Analysis

Thematic analysis involves identifying patterns in participants’ narratives and identifying common threads that emerge and assist in understanding a phenomenon. The co-coder and I identified meaning for the larger themes through the use of the interview data, member checking, analytic memos, and peer debriefing. The two primary themes are gender socialization and professional socialization, which are discussed in Chapters Four and Five.

Validity and Trustworthiness

As with quantitative research, qualitative researchers seek to verify the reliability and validity of the collection and interpretation of data. However, in qualitative research this process is described as trustworthiness, credibility, or rigor (Padgett, 2008). Padgett (2008) credits Lincoln and Guba with creating criteria for qualitative research, which they called credibility, transferability, auditability, and confirmability. Some of the most common threats in qualitative studies are lack of trustworthiness, reactivity, researcher bias, and respondent bias (Padgett, 2008), which I addressed by utilizing an audit trail, peer debriefing, prolonged engagement, member checking, and awareness of researcher bias. Further, the investigator's positionality is outlined in this chapter, which helps in understanding potential researcher bias.
Audit Trail. An audit trail was maintained throughout the collection and analysis of the data. In order to be transparent about the formation of the study, memos concerning decisions made, data collected and analyzed, and processes followed were documented. My dissertation proposal documented my literature review and initial theoretical understanding of clinical social workers’ political participation. Notes were taken at the completion of most first and second interviews to record my thoughts after each interaction with a participant. Demographic survey results were available as well as transcripts, a codebook, and analytic memos, which were collected and categorized in digital folders throughout the project. Yet it is the transcripts that kept me most focused and accountable to the interviewees’ perspectives, which emerged from the transcripts. This data was cross-referenced with memos, and demographic data.

Peer Debriefing and Support. In order to minimize researcher biases and reactivity, I obtained feedback from my dissertation committee through peer debriefing. Not only did this technique help control for my social positionality and potential bias, but it also helped me be honest to the process and the emergent findings (Padgett, 2008). My committee offered insightful feedback, a fresh perspective, and supported me through the emotional ups and downs of interviews and data analysis. Also, having worked in the field of politics for almost 15 years, peer debriefing helped control for my potential bias as it related to influencing the interviews and data analysis.

Member-checking. Throughout the study, I often spoke with many of the participants to ensure I understood their words and stories, which took place during the interviews. This practice continued while analyzing the data and writing of the dissertation. If there were differences in understanding, I sought to clarify the participant’s interpretations of their lived experiences. Also, I conferred with the participants to verify my analysis of the multiple
interviews. Using this strategy not only supported the validity of the data but also helped to safeguard against researcher bias (Padgett, 2008).

**Formulating the Study**

**Pre-Dissertation Research**

In 2012, I was engaged in the first semester of the University of Connecticut School of Social Work Ph.D. program. As part of my studies, I was required to investigate a topic and submit the findings for presentation to a professional social work conference. My social work practice had always been in politics, and I wanted to investigate the political participation of social workers. To help focus my interest, I turned to the social work literature and found only a handful of studies had been conducted on social work students and their political participation. I elected to collect original data and use the students at the University of Connecticut School of Social Work as participants. The school of social work was not only a convenient sample, but the students self-select their area of specialization (method) before submitting their application. The students have a choice of five methods—casework, group work, community organizing, policy practice, and administration—and this allowed me to statistically compare students based on their selected method. The results revealed that casework and group work students exhibited very low levels of political participation. This finding reinforced personal opinions I developed from my time in practice and made me curious to understand why. Subsequently, I was introduced to other social work scholars working on various projects that overlapped with my research findings. These experiences were influential in focusing my dissertation research and my newfound focus on re-energizing the long dormant political segment of the profession’s history.
Researcher’s Role: Positionality and Reflexivity

Since this study was developed using a critical phenomenological approach, I have become more aware of systematic inequalities and power differentials that exist in United States society (Padgett, 2008). In studies utilizing NASW membership for their sampling frame (Ezell, 1993; Ritter, 2007; Wolk, 1981), women accounted for almost 80% of the sample and the largest age cohort (40.8%) consisted of those between 46-55 years old. In the NASW Center for Workforce Studies’ (2005) national study of licensed social workers, women accounted for 81% of the total sample and were 86% non-Hispanic White. These demographics closely matched the participants in my study. In almost every way I differ from those I interviewed; I identify as a White, heterosexual, cisgender, male, and have lived in rural western Massachusetts for most of life. I am 35 years old and identify as a social worker, specifically a political social worker. I can never eliminate all of my bias, but I can remain mindful through constantly assessing and being aware of my position (Padgett, 2008). As the “instrument” of data collection, analysis, and interpretation (Padgett, 2008), I believe it is important to be reflexive about the aspects of my life that can influence this study. As I conducted this study, I was mindful of two different fragments of my past that could potentially bias my research.

Lack of Trust with People in Power. The experiences of my pre-adolescence, where I was made to feel powerless and vulnerable to someone responsible for my wellbeing, influenced the lack of trust I have with people in power. This lack of trust with people in authority is best demonstrated with a story. During my sophomore year in high school, I heard my friends discussing pre-SATs and SATs, and the colleges they wanted to attend. After making an appointment with my guidance counselor, I began asking questions about the college process. He immediately discouraged me from thinking about college and told me that I should focus on
getting a trade job like my other family members. As with other times in my life, I ignored his pessimism and began investigating college. During my junior year, I identified a state program offering high school students the opportunity to attend college during their senior year. I made an appointment with the principal of my high school and discussed my desire to apply for the program. After initially being dismissed, I made another appointment, and he agreed to support my application. I completed my senior year of high school at the local community college. This and other experiences enabled me to empathize with those confronting obstacles and navigating systems for their wellbeing; whereas for me the first dismissal was a call to action to change the impossible to become possible. I recognize that not all people may have this reaction based on their own prior experiences, which are in part determined by their social location. This experience and others like it are the primary reason I was drawn to the social work profession.

**Experience in Political Practice.** My difficulty trusting those in power was always a challenge working in politics. My social work practice has always been in the political sphere; this includes working on political campaigns, lobbying for non-profit organizations, serving as an advocate, and working for a congressman. I have had the honor to work for politicians I find honest and ethical. There are few times I can recall disagreeing with a vote or position that a candidate or elected representative took while I was working for them. This made my struggle with trusting those in power manageable. Thus, it made me excellent at my job. In my various capacities, I was expected to help achieve the agenda of the politician. In politics, one frequently confronts barriers or receives partial truths. To overcome these obstacles, I made sure I was the most knowledgeable about subject matter and used the Congressman’s position to reach a fair and just solution.
Limitations

Sample. This study’s findings are based on a nonprobability convenience and snowball sample of 23 participants. As this is a qualitative study, the sample size is appropriate for understanding the lived experiences of clinical social workers’ political participation. These findings are not generalizable to all clinical social workers. Although there is some demographic variation within the sample and it appears to align with literature describing this population, differing results are likely to be found based on other characteristics, such as geographic region, gender, race and ethnicity, sexual orientation, or age. Like all qualitative research, the interviews represent a point in time; the first interviews happened from the middle of April until the beginning of June 2015, and the second interviews were conducted during January of 2016. Contemporary social, economic, and political events likely impacted the interviewees’ opinions and perspective on political participation.

Researcher Bias. As outlined at the beginning of this chapter, acknowledging my bias and subjectivity is critical. As a political social worker, a Ph.D. candidate, and a social work professor, it is challenging to parse out how my life experiences have influenced the questions I used to conduct interviews, write memos and notes, and analyze interviews. Therefore, I implemented strategies to ensure rigor and trustworthiness to help control for my bias.

Ethical Considerations

Confidentiality of study participants was maintained throughout the research process. A waiver of signed consent was approved for this study. All interviewees were provided with an information sheet detailing their rights as a participant, and the contact information for the Student Investigator, the Major Advisor, and the Institutional Review Board (IRB)—the body responsible to ensure all participants in this study are protected from harm. During the first
interview, the information sheet was reviewed (with the recording device on) with each participant to achieve a verbal understanding of his/her rights. Before the second interview, the participant was reminded of their rights and provided with another information sheet.

Once the interviews were transcribed, they were uploaded into NVivo 10 on a password-protected computer, and the recordings were deleted after transcription. The transcribers were asked to sign a confidentiality agreement before they could begin working on the project; both transcribers agreed to sign confidentiality agreements. Each participant was assigned a unique identifier, and all personal information was removed from this dissertation to protect their confidentiality. The participants were asked to select a public interview location that allowed for privacy, minimized distraction, and ensured comfort, which led to an honest, open and in-depth discussion. After all first and second interviews and member checking was completed, the master list connecting the participant’s unique identifier with their personal information was deleted. No other person was present during the determination of eligibility and the interviews.

Potential risks for participants were minimal. The only risk for participating in this study was the amount of time spent in the interview. Although the topic of politics can be a sensitive subject for some, the study focused on the clinical social workers’ political participation and their experiences. There are no potential benefits to participants directly. The clinical social workers’ experiences could help benefit the social work profession and influence how schools of social work teach new professionals. Those that participated in the first interview could choose between a $10 gift card to Dunkin Donuts or Starbucks, which was a “thank you” for their time. For those preferring a Skype interview, their gift card was emailed directly from either Dunkin’ Donuts or Starbucks. Interviewees did not receive another incentive for participating in second interviews or for member checking their words.
Summary

This critical phenomenological study aims to better understand the lived experiences of clinical social workers’ political participation, a group that has been criticized in the literature for their lack of political engagement. At present, no qualitative study exists on this topic. In order to better understand this phenomenon, interviews were conducted to understand the "lived experiences" of clinical social workers by providing a lens for viewing the social, economic, and political factors that influence their political participation. Understudied topics are best explored using qualitative methods and a phenomenological approach. Quantitative studies currently exist describing civic and political activities in which social workers engage (Ritter, 2006, 2007, 2008; Rome & Hoechstetter, 2010), however none delve into understanding the nuances of different factors influencing clinical social workers. It is expected that this study will help develop a richer understanding of how clinical social workers perceive political participation and what factors inhibit and/or enhance their political participation.
CHAPTER 3: PARTICIPANTS

This chapter provides a detailed overview of the participants in this study, their political interests, and their political participation. Demographic characteristics of the participants are summarized. Brief biographical descriptions are included to contextualize qualitative findings presented in Chapter 4 and Chapter 5 (see Table 3.5).

Quantitative Data

Survey data was gathered for two purposes: first, it provided contextualized information on the clinical social workers that were interviewed for this study; and second, the information offered a robust understanding of the participants’ political participation and political interests.

Demographics

Twenty-three participants were interviewed for this study, and only one participant did not complete the survey, resulting in a 96% response rate. A second interview was conducted with five participants to explore more thoroughly the concepts discussed in the first interview (Patton, 2014). Univariate analysis was employed to describe the demographic characteristics of the sample. The mean age of the sample was 43 years old, and ages ranged from 28-66 years. Regarding gender (see Figure 3.1), 77% of participants identified as female and 18% as male; one participant identified as a transgender male. Almost 70% of the sample identified as Non-Hispanic White, 14% were Black or African-American, 9% identified as Hispanic/Latino, and 4.5% identified as Afro-Caribbean and Bi- or Multi-Racial (see Figure 3.2). As indicated in Figures 3.1 and 3.2, the sample for this study is primarily White and female, which is relatively close to the demographic breakdown of the social work profession. All participants identified
their sexual orientation as heterosexual, more than half (54%) were married, and slightly more than one-third (32%) were affiliated with a religion.

*Figure 3.1 Gender*

![Gender Bar Chart]

*Figure 3.2 Race & Ethnicity*

![Race & Ethnicity Bar Chart]

Participants discussed their undergraduate and graduate educations during their interviews (see Figure 3.3). Of all 23 participants, only five (22%) attended an undergraduate program in social work and three (13%) were accepted into a graduate social work program with advanced standing. The participants attended graduate social work programs in 10 states and one
participant studied social work internationally. Of the 10 states, eight participants (35%) attended social work programs in Massachusetts, four (17%) in Connecticut, four (17%) in New York and New Jersey, and the remaining seven (30%) programs were located in such states as Maryland, Missouri, and Pennsylvania.

The survey asked the participants to describe their community and in what state they currently reside. All of the participants currently live in the six New England states. Of the 23 participants, 40% live in a rural community, 37% in a suburban setting and 23% live in a city (14% in a small city and 9% in a large city). Most participants (90%) lived in Massachusetts and Connecticut, and no participants were from New Hampshire or Vermont. Four of the seven participants screened out of the study were from these two states. There was an annual household income range (see Figure 3.4) from $35,000 to more than $160,000. Almost half (45%) of the participants had a household income range between $60,000 to $99,999, and 35% had a household income of $100,000 or more. According to the most recent United States Census (2010), the median household income for families living in the Northeast was $59,210 and the mean household income was $83,722.
Of the participants interviewed for this study, 54% report they “always” or “often” participate in politics. Not surprisingly, 68% of participants viewed themselves as being involved in promoting social justice. As indicated in Table 3.1, 77% of participants identify as belonging to the Democratic Party, however, just 33% selected “very strong” and “strong” when identifying with a political party. Only 36% of interviewees indicated some sense of
responsibility to participate in politics. Of note, almost all participants had a heightened interest in community politics and affairs on a local (86%), state (90%), and national (90%) level.

Table 3.1 Political Interests

<table>
<thead>
<tr>
<th>Political Party (n = 22)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Republican</td>
<td>2 (9)</td>
</tr>
<tr>
<td>Democratic</td>
<td>17 (77)</td>
</tr>
<tr>
<td>Not Registered with a Party</td>
<td>2 (9)</td>
</tr>
</tbody>
</table>

Identification with a Political Party (n=15)

<table>
<thead>
<tr>
<th>Identification with a Political Party (n=15)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Strong/Strong</td>
<td>5 (33)</td>
</tr>
<tr>
<td>Somewhat Strong/Not Strong</td>
<td>9 (60)</td>
</tr>
</tbody>
</table>

Interest in Community Politics and Affairs (n=22)

<table>
<thead>
<tr>
<th>Interest in Community Politics and Affairs (n=22)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local (very and somewhat interested)</td>
<td>19 (86)</td>
</tr>
<tr>
<td>State (very and somewhat interested)</td>
<td>20 (90)</td>
</tr>
<tr>
<td>National (very and somewhat interested)</td>
<td>20 (90)</td>
</tr>
</tbody>
</table>

Political Participation

A political participation score (PP) was operationalized via an 18-item scale (Table 3.2), which was modified based on Rome and Hoechstetter’s (2010) original study. The scores ranged from 0 to 90 and were calculated for each respondent creating a total score of the 18 items. The average score for the participants was 61 with a minimum score of 30 and a maximum score of 89. A lower score signified lower political participation while a higher score represented a greater level of political participation. The political activities in which interviewees most frequently participated were identified by merging "often" and "always" response options.
Table 3.2 Political Participation Scale

<table>
<thead>
<tr>
<th>Political Activity (n = 22, α= .961)</th>
<th>n(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vote</td>
<td>19 (86)</td>
</tr>
<tr>
<td>Encourage others to vote</td>
<td>18 (81)</td>
</tr>
<tr>
<td>Read, listen, or watch the news</td>
<td>16 (72)</td>
</tr>
<tr>
<td>Knows who represents me in Congress</td>
<td>13 (59)</td>
</tr>
<tr>
<td>Follow progress of legislation that interests me</td>
<td>13 (59)</td>
</tr>
<tr>
<td>Knows who represents me in state government</td>
<td>12 (54)</td>
</tr>
<tr>
<td>Discuss current policy issues with others</td>
<td>11 (50)</td>
</tr>
<tr>
<td>Takes an active role in issues that affect me</td>
<td>11 (50)</td>
</tr>
<tr>
<td>Share my political opinions with others</td>
<td>10 (45)</td>
</tr>
<tr>
<td>Encourage others to participate in rallies/marches</td>
<td>10 (45)</td>
</tr>
<tr>
<td>Takes an active role in issues that affect my clients</td>
<td>10 (45)</td>
</tr>
<tr>
<td>Participate/contribute to groups that affect policy</td>
<td>8 (36)</td>
</tr>
<tr>
<td>Keep track of how my legislator votes</td>
<td>7 (31)</td>
</tr>
<tr>
<td>Actively campaign</td>
<td>6 (27)</td>
</tr>
<tr>
<td>Voice my opinion in the media</td>
<td>6 (27)</td>
</tr>
<tr>
<td>Participate in rallies/marches</td>
<td>5 (22)</td>
</tr>
<tr>
<td>Attend public hearings</td>
<td>5 (22)</td>
</tr>
<tr>
<td>Testify at federal, state, or local hearings</td>
<td>4 (18)</td>
</tr>
</tbody>
</table>

Note: *Italicics* = Passive, **Bold** = Active
When the scale was divided into “passive” and “active” sub-scales, further findings were uncovered. The active political participation subscale (Table 3.3) has 10-items; the average score was 31, and participants scored a minimum of 16 and a maximum of 51. The median (50%) of the active subscale scores was identified (33.5) and served as the dividing point between high and low engagement. When crosstabs were run comparing gender to the active subscale scores, 25% of male participants and 59% of female participants had scores below the median, which signified low engagement. When crosstabs were run using the variable of race, the results were identical to those of gender.

A review of the active forms of political engagement by participants revealed a list comprised of activities that one would do in the public sphere. There were two active forms of political participation clinical social workers engaged in most frequently: voting (86%) and taking an active role on issues viewed as affecting them (50%). The remaining activities deemed active were engaged in by less than half of participants. Particularly noteworthy is that approximately 30% of participants report never keeping track of their legislators’ votes, slightly more than one-quarter (27%) have never actively campaigned or voiced their opinion to the media, one-fifths (20%) have never participated in a rally, march or attended a public hearing, and 18% report never testifying at a federal, state, or local hearing.
Table 3.3 Active Political Participation Sub-Scale

<table>
<thead>
<tr>
<th>Political Activity</th>
<th>n(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vote</td>
<td>19 (86)</td>
</tr>
<tr>
<td>Takes an active role on issues that affect me</td>
<td>11 (50)</td>
</tr>
<tr>
<td>Takes an active role on issues that affect my clients</td>
<td>10 (45)</td>
</tr>
<tr>
<td>Participate/contribute to groups that affect policy</td>
<td>8 (36)</td>
</tr>
<tr>
<td>Keep track of how my legislator votes</td>
<td>7 (31)</td>
</tr>
<tr>
<td>Actively campaign</td>
<td>6 (27)</td>
</tr>
<tr>
<td>Voice my opinion in the media</td>
<td>6 (27)</td>
</tr>
<tr>
<td>Participate in rallies/marches</td>
<td>5 (22)</td>
</tr>
<tr>
<td>Attend public hearings</td>
<td>5 (22)</td>
</tr>
<tr>
<td>Testify at federal, state, or local hearings</td>
<td>4 (18)</td>
</tr>
</tbody>
</table>

The passive political participation scale (Table 3.4) is comprised of 8-items; participants’ average score was 29, with a minimum score of 14 and a maximum score of 40. The median (50%) of the passive subscale scores was identified (27) and served as the dividing point between high and low engagement. When crosstabs were run comparing gender to the active subscale scores, 25% of the male participants and 65% of the female participants had scores below the median, which signified low engagement. As with the active subscale, a similar test was run using race and the results were identical to those of gender.

Clinical social workers most frequently engaged in “passive” forms of political participation. The most common “passive” activities engaged in by more than half of the participants, include: encouraging others to vote (81%); keeping up with the news (72%); knowing who represents them in the federal government and following the progress of
legislation of interest (59%); knowing who represents them in state government (54%); and discussing current policy issues with others (50%). Of note, contrary to “active” forms of political participation, “passive” forms of political engagement seem to allow clinical social workers to participate using the telephone, the internet, and social media. The “passive” activities do not seem to require participants to engage publicly nor be viewed by others engaging in political activities. Further, these political activities require less of the participants’ time and their resources.

Table 3.4 Passive Political Participation Sub-Scale

<table>
<thead>
<tr>
<th>Political Activity (n = 22, α = .929)</th>
<th>n(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourage others to vote</td>
<td>18 (81)</td>
</tr>
<tr>
<td>Read, listen, or watch the news</td>
<td>16 (72)</td>
</tr>
<tr>
<td>Knows who represents me in Congress</td>
<td>13 (59)</td>
</tr>
<tr>
<td>Follow progress of legislation that interests me</td>
<td>13 (59)</td>
</tr>
<tr>
<td>Knows who represents me in state government</td>
<td>12 (54)</td>
</tr>
<tr>
<td>Discuss current policy issues with others</td>
<td>11 (50)</td>
</tr>
<tr>
<td>Share my political opinions with others</td>
<td>10 (45)</td>
</tr>
<tr>
<td>Encourage others to participate in rallies/marches</td>
<td>10 (45)</td>
</tr>
</tbody>
</table>

Biographical Descriptions

Table 3.5 provides a biographical description of each participant in this study. These snapshots of the participants are included to contextualize qualitative findings presented in Chapter 4 (gender socialization) and Chapter 5 (professional socialization).
**Table 3.5 Participants Biographical Descriptions**

<table>
<thead>
<tr>
<th>Participant ID #</th>
<th>Biographical Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Participant 1 was a White woman in her mid-30s. She was a newlywed and lived in rural Connecticut with her husband and son. She had her MSW for two years. She was a recovering addict and wanted to help people who suffered from addiction. She was employed at a private mental health and substance abuse inpatient treatment center. When asked about political participation, she acknowledged being a non-participant and not keeping up with world events.</td>
</tr>
<tr>
<td>2</td>
<td>Participant 2 was a White woman in her 40s. She lived in Connecticut, was in agency management, and maintained a caseload. She was employed at a private non-profit agency, and worked with clients who were recovering addicts and had a mental health diagnosis. She was an elected official and identified as a Republican.</td>
</tr>
<tr>
<td>3</td>
<td>Participant 3 was a White woman in her 40s. She lived in Massachusetts, worked in an addiction and mental health agency, and had a private practice. She lived with her partner and was engaged. She held strong progressive political views and is cynical about the political system. She infrequently engaged in politics but was aware of current world events.</td>
</tr>
<tr>
<td>4</td>
<td>Participant 4 was a White woman in her 60s. She lived in Massachusetts, was married, and had adult children. She had a private practice and had lived in multiple states. She identified as a feminist and told stories of</td>
</tr>
</tbody>
</table>
protesting and engaging in politics during the early 1970s in New York City when the Supreme Court agreed to hear the case of Roe v. Wade.

<p>| Participant 5 was a White woman in her 40s. She lived in Connecticut and worked with people who are incarcerated. She was a divorced mother with two children. She held progressive political views and was very active in politics. She passionately believed that social work was intertwined with politics and they should not be separated. |
| Participant 6 was a Latina, identified as a Puerto Rican, and was in her 60s. She lived in Connecticut and worked as a school social worker. She was married and had two adult children. She helped register families to vote, helped organize her colleagues to engage in politics, and worked in partnership with her agency administration to advocate for funding. |
| Participant 7 was a White woman in her 30s and lived in Connecticut where she was a school social worker in an elementary school. She had a child and completed her MSW within the last 10 years. She identified as being politically aware, but did not believe politics had a place in her work. |
| Participant 8 was a White woman in her late 40s. She lived in rural Maine and was divorced with no children. She was interested in macro practice, but focused on clinical practice because she feared she would not find employment. She worked as a clinical social worker in a private, non-profit agency. She served one term as a state elected official. |</p>
<table>
<thead>
<tr>
<th></th>
<th>Participant 9 was a single White woman in her early 50s and had a son. She lived in Massachusetts and worked in a non-profit mental health agency as a clinical social worker. She did not think political participation should be integrated into her clinical work.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Participant 10 was a White woman in her early 20s. She lived in Massachusetts and worked with sexually and physically abused children. She was single and talked about people using social programs as “abusing the system” and “lazy.” The only political act she discussed was her reasons for registering to vote at the age of 18.</td>
</tr>
<tr>
<td>10</td>
<td>Participant 11 was a White woman in her 60s. She lived in Massachusetts, was married, and had adult children. She was employed at a private non-profit agency and worked her entire career with clients who had been diagnosed with cancer. She found herself in constant conflict between what the organization wanted and her role as a social worker. During her interview she said she engaged in protesting, rallying, voting, and advocating.</td>
</tr>
<tr>
<td>11</td>
<td>Participant 12 was a White woman in her early 30s. She lived in Massachusetts and worked with sexually and physically abused children. She was married and had children. She disclosed that she was bullied and acknowledged the bullying as the motivating factor to become a social worker. She viewed herself as politically unaware and disengaged.</td>
</tr>
<tr>
<td>12</td>
<td>Participant 13 was a White woman in her 60s. She lived in Massachusetts, was in agency management, and maintained a caseload.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
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<td>52</td>
<td>She was employed at a private, non-profit organization and worked with clients who were recovering addicts and had a mental health diagnosis. She identified as a Republican and had conservative views.</td>
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<td>14</td>
<td>Participant 14 was a White woman in her early 40s. She lived in Maine, was a domestic abuse survivor, and was married with no children. She was interested in macro practice in her undergraduate social work program where she attended rallies, engaged in picketing, and other types of electoral participation, but viewed clinical practice as a “calling.” She worked as a clinical social worker in a school.</td>
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<td>15</td>
<td>Participant 15 was a White man in his 50s. He lived in Connecticut, was married and had children, and worked as a clinical social worker for a government agency. His job required him to make recommendations for treatment to his supervisor. He believed that social work and politics were interconnected.</td>
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<td>16</td>
<td>Participant 16 was a White man in his 30s. He lived in Massachusetts, was single, and worked as a clinical social worker in private practice. He advocated for issues specific to clinical social workers. Although he was engaged and active in politics, he did not believe politics had a place in practice.</td>
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| 17 | Participant 17 was a White woman in her 30s. She lived in a city in Massachusetts, was married and had two children. She worked as a program manager and a clinical social worker. She was very active in
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<td>local and state politics. She did not perceive what she did as political participation; rather she framed it as advocacy and civic engagement.</td>
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<td>18</td>
<td>Participant 18 was a White woman in her 40s. She lived in a city in Connecticut, was married and had children. She worked as a clinical social worker in private practice. She held conservative views on immigration and fiscal issues. She demonstrated liberal views on most social issues.</td>
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<td>19</td>
<td>Participant 19 was a Black/African American transgender man in his 50s. He lived in a city in Massachusetts, was married to a woman, and had children. He recently became a &quot;grandma.&quot; Although he had strong opinions on the social work profession's responsibility to work in the political sphere, he only engaged in &quot;passive&quot; forms of political participation.</td>
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<td>20</td>
<td>Participant 20 was a Latina, who identified as a Puerto Rican, and was in her 20s. She lived in Connecticut, was single, and lived with her boyfriend. She was employed at a private, non-profit agency and worked with families. Her family is active in politics.</td>
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<td>21</td>
<td>Participant 21 was an Afro-Caribbean Haitian man in his 40s. He lived in a city in Connecticut, was married, and had two biological children and a foster child. He worked as a clinical social worker for a government agency. He had a private practice and closed it within the last year. He believed that social work and politics were interconnected, but was not personally engaged in politics.</td>
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<td>Participant 22 was a Black/African American man in his 50s. He lived in an urban community in Massachusetts, his wife died the prior year, and he had three children. He was a pastor in his church and worked as a clinical social worker in a private, non-profit mental health and substance abuse agency. He was active in politics and viewed social service agencies and health insurance as interfering with social work practice.</td>
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<td>22</td>
<td>Participant 23 was a White woman in her 40s. She lived in Rhode Island, was married, had two children and two grandchildren. She completed her BSW and MSW in Rhode Island. She identified as a liberal and was active in local, state, and national politics.</td>
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CHAPTER 4: GENDER SOCIALIZATION

There is an elementary aspiration which undergirds the humane impulse in our history and our culture and binds us together as political activists. This is a simple, irreducible, indisputable aspiration. It is the ‘dream of justice’ for a beloved community, in which the level of terror in people's lives is sharply reduced or maybe eliminated. It is the belief that extremes and excesses of inequality must be reduced so that each person is free to fully develop his or her full potential. This is why we take precious time out of our lives and give it to politics. — Paul Wellstone, Speech to the Minnesota Nurses Association, 1985

The three primary objectives of this study were to identify how clinical social workers conceptualize political participation, identify the factors that influence clinical social workers’ levels of political participation, and to understand how clinical social workers integrate political participation into their practice. As described in Chapter Two, data from the first and second interviews were analyzed using a robust methodology to answer the research questions. This chapter begins by discussing the literature on the political participation and gender socialization for clinical social workers to help frame an understanding of these concepts. Next, the study findings are presented, followed by a discussion of the findings in relationship to the research objectives outline above. In summary, clinical social workers in this study conceptualize political participation differently than the general public. In order to fully capture their differences, participants have been categorized into four groups based on the typologies developed by Jenkins, Andolina, Keeter, and Zukin (2003): civic specialist, electoral specialist, dual activists, and the disengaged. Further, clinical social workers’ political engagement and efficacy seems to be influenced by their gender socialization, which has not been captured in the social work literature on political participation to date.
Literature Review

Political Participation Conceptualized

The most widely used and conceptualized model of political participation originates in Verba, Schlozman, and Brady’s (1995) landmark political science study. They characterized political participation as an “activity that has the intent or effect of influencing government action-- either directly by affecting the making or implementation of public policy or indirectly by influencing the selection of people who make those policies” (p. 38). This includes: voting; gaining and using political knowledge; being aware of political issues; protesting a policy issue or government decision; contributing money to and volunteering with campaigns or political committees; and other politically-directed activities, such as running for elected office. Verba et al. (1995) narrowed their definition of political participation to exclude political awareness activities (e.g., reading the newspaper or watching the news) and civic engagement activities (e.g., volunteering for a community agency or being engaged in organized religion) that do not explicitly target elected officials. They found that while civic engagement significantly impacted interviewees’ political participation as defined above, they do not consider civic engagement to be political participation because time, energy and/or resources were being directed toward the various activities rather than toward appointed or elected officials.

Although social work has enshrined political participation into its important documents, multiple conceptualizations of this practice exist in the literature, and there is no consensus on the form it should take for all types of social work practice. Further, there are inconsistencies in understanding the political participation of clinical social workers. In the social work literature, scholars include the concepts of activism (Domanski, 1998; Ezell, 1993; Swank 2012; Wolk, 1981, 1996), political action (Rome & Hoeschstetter, 2010), and advocacy (Bernklau Halvor,
in definitions of political participation. Some embrace Verba et al.’s (1995) political science model, however, some social work and political science researchers have broadened this definition to include civic participation. Ritter (2006) argues that the traditional definitions of political participation do not include “civic participation” because it is viewed as an apolitical activity. Although not all forms of civic engagement have a political purpose, in the political science literature Jenkins et al. (2003) contend that civic engagement can be used for purely political reasons. Utilizing a nationally representative sample of 3,246 respondents, the authors formulated four typologies based on their nationally representative sample: civic specialist, electoral specialist, dual activists, and the disengaged. A civic specialist is someone who most frequently engages in civic activities which focus on community “problem solving and helping others, a definition that encompasses a vast range of settings, goals, and behaviors” (p. 1). Electoral specialists are primarily engaged in electoral activities (e.g., helping a candidate win an election). They also found that women are slightly less likely to be electoral specialists compared to men. However, gender did not seem to influence men and women’s overall engagement levels. Yet there are those who participate in both civic and electoral activities, which the authors termed dual activists. Finally, some people do not participate in electoral activities nor civic engagement in their communities, and these study participants are termed disengaged.

**Gender Socialization**

While the social work profession has an ethical obligation to promote social change, it is also influenced by broader societal and cultural beliefs. To ascertain the impact of gender socialization on political participation, the political science literature was reviewed. Much of the literature to date reveals that men and women continue to view family responsibilities differently
(Burns, Schlozman, & Verba, 2001; Fox & Lawless, 2012; McGlen & O’Connor, 1998).

Conover and Gray (1983) define sex-role socialization as a “division of activities into the public extra-familial jobs done by the male and the private intra-familial ones performed by the female” (p. 2). Fox and Lawless (2012) conducted a study comparing 4,000 survey responses from 2001 and 2011, and found statistically significant differences between men and women, such as women being responsible for the majority of household tasks and child rearing. Of note, the data further suggests that women struggle to balance their professional careers and family responsibilities (Enloe, 2004; Fox & Lawless, 2012; Freedman, 2002). Although traditional gender norms that describe men as the providers and women as responsible for the home have declined, research demonstrates that these stereotypical norms and attitudes continue to impact if and how women will view themselves as qualified to participate and actually engage in politics (Fox & Lawless, 2003, 2012).

Burns, Schlozman, and Verba (2001) found that women who are employed have a decrease in political participation due to a lack of leisure time. As women's hours spent working increases, their political participation drops; this is not the case for men. Further, as women focus on their career, they tend to participate in less visible and formal political activities (Lister, 2007). This is also observed when women marry and become part of two-income households. In contrast to their male spouses, women elect to allocate time raising their children and tending to family responsibilities (Burns, Schlozman, & Verba, 2001; Fox & Lawless, 2012; Silbermann, 2015; Verba, Schlozman, & Brady, 1995), which results in more leisure time for men (Fox & Lawless, 2012; Sayer, 2005). When women report having children living in their home, they also convey lower levels of political ambition (Bowers, 2003; Fox & Lawless, 2003, 2010).
Thus, the political arena is perceived differently by men and women based primarily on their societal beliefs concerning the roles and expectations of men and women (Enloe, 2004; Freedman, 2002). The gender socialization literature is based on rational choice models to help elucidate the various reasons men decide to, or not to, seek political office (Black, 1972; Rohde, 1979). As such, there is a paucity of studies to evaluate gender differences among multiple forms of political and civic engagement of men and women (Costantini 1990; Fox, 2011; Moore, 2005). Even less is known about how race and gender, and their intersection (Hardy-Fanta, 1993; Jaramillo, 2010; Moore, 2005), affect women’s political participation (Simien, 2007). Further, there is little research focusing on occupations and levels of political activism (Fox, 2011; Fox & Lawless, 2003, 2004; Fox, Lawless, & Feeley 2001).

Women account for more than three-fourths of social workers in the United States, with the social work profession often called a “female-dominated profession” (McPhail, 2004). McPhail (2004) argues that this is a false characterization. While numerically women make up the overwhelming majority of social work professionals, with regard to power differentials, they are in the minority given that male social workers are paid higher salaries and more frequently hold administrative positions. Currently, a scarcity of social work literature exists to assist in understanding how men and women perceive the various dimensions of political participation, such as political knowledge, political ambition, political opinions, and political interests.

**Political Efficacy**

The concept of political efficacy is an often-discussed topic in political science. Campbell, Gurin, and Miller (1954) define political efficacy as “a combination of one’s sense of competence in the political sphere and one’s assessment of the responsiveness of the system” (p. 187). Beginning with the work of Robert Lane (1959), the notion of political efficacy has been
used to help explain political participation, and more than a dozen studies have differentiated two
types of political efficacy: internal efficacy and external efficacy (Beaumont, 2011; Easton,
1965; Easton & Dennis, 1967; Verba & Nie, 1972; Verba, Schlozman, & Brady, 1995; Morrell,
2005).

Internal political efficacy is understood as one’s ability to “achieve desired results in the
political domain through personal engagement and an efficient use of one’s own capacities and
resources” (Caprara, Vecchione, Capanna, & Mebane, 2009, p. 1002). One who has high
internal political efficacy believes that he or she understands how to take part in the political
process and is not intimidated by obstacles that may be encountered. External political efficacy
“concerns people’s belief that the political system is amenable to change through individual and
collective influence” (p. 1002). A person with high external political efficacy views the political
system and leaders as responsive and accessible to the general public.

Bandura (1977) argues that behavior is influenced by the environment and is bolstered by
parents, peers, or others that impact one’s broader socialization; however, behavior change is
possible. While people will avoid circumstances where they may fail or be asked to exceed their
perceived ability, people will engage in activities or behaviors they believe they are capable to
undertake. Caprara et al. (2009) posit that when this concept is applied to political participation,
one would assume that a person who deems action as essential and indicated some sense of
confidence in his or her ability to participate, would act on that belief and would thus experience
high internal efficacy.

Fox and Lawless (2011) explored how gender socialization and traditional gender roles
impacted women’s engagement in electoral politics. They found that men are socialized to be
“confident, assertive, and self-promoting,” and when women demonstrate similar characteristics
it is often perceived as “inappropriate or undesirable [for them] to possess these characteristics” (p. 60). Similarly, studies on gender stereotyping (Alexander & Andersen, 1993; Dolan, 2010; Huddy & Terkildsen, 1993; Lawless, 2004; McDermott, 1997, 1998) reveal that male political candidates are viewed by voters as “more assertive, competent, self-confident, and strong leaders,” while, female political candidates are viewed “as more liberal, compassionate, and empathetic” (Hayes, Lawless, & Baitinger, 2014, p. 1197). This has resulted in women exhibiting a decrease in political ambition due to low confidence in their leadership capacities, while men demonstrate a higher level of confidence (Lawless & Fox, 2005, 2010, 2012). As we witness more women engaging in elite levels of politics, it appears that gender socialization in this area is changing, though the gender gap is still present (Fox, 2011).

Scholars have consistently reported a gender gap in political knowledge (Dolan, 2011; Dow, 2009; Lizotte & Sidman, 2009; Mendez & Osborn 2010; Sanbonmatsu, 2003; Stolle & Gidengil, 2010; Verba, Burns, & Schlozman, 1997). When women are surveyed about political issues, they answer fewer questions correctly than men (Burns, Schlozman, & Verba, 2001; Delli Carpini & Keeter, 2000; Dolan, 2011) and more often answer with “don’t know” (Lizotte & Sidman, 2009). A recent study by Ondercin and Jones-White (2011) found women have a self-imposed requirement to have higher levels of political knowledge prior to participating in political activities. Additionally, scholars found that women hold a similarly higher standard than men when deciding to run for elected office (Fulton, Maestas, Maisel, & Stone, 2006; Fox & Lawless, 2005). Of note is that women have lower levels of confidence and a disbelief in their qualifications to offer political opinions and to discuss politics (Atkeson & Rapoport 2003; Jennings & Farah, 1981; Marder 1987; Mendelberg, Karpowitz, & Goedert 2014; Nir & McClurg 2015). This is significant, as research demonstrates that individuals with higher levels
of political knowledge have a greater likelihood of participating in politics (Barabas, Jerit, Pollock, & Rainery, 2014; Burns, Schlozman, & Verba, 2001; Hannagan, Littvay, and Popa 2014; Lizotte and Sidman 2009; Ondercin, Garand, and Crapanzano, 2011; Verba, Schlozman, & Brady, 1995). Gidengil, Giles, and Thomas (2008) argue that women “remain more likely than men to think that politics is too complicated for them to understand” (p. 536). Further impacting women's political participation is their self-reported low levels of political competence (Thomas, 2012), political interest (Bennett & Bennett, 1989; Verba, Schlozman, & Brady, 1995), and ambition (Bledsoe & Herring, 1990; Burns, Schlozman, & Verba, 2001; Carroll, 1994; Fox, 1997; Fox & Lawless, 2011). This has the potential to impact women’s engagement in mass political activities (e.g., attend political meetings, engage in interest group activities, and participate in social movements) and to seek appointed or elected political positions (Atkeson, 2003; Bennett & Bennett, 1989; Burns, Schlozman, & Verba, 2001; Lawless & Fox, 2010; Verba, Burns, & Schlozman, 1997).

Findings

**Conceptualization of political participation.** Almost every participant in this study stated that voting was their first memory of engaging in politics. Participants were asked to think of other instances, besides voting, where they engaged in politics. Chapter Three described the various political and civic behaviors participants reported engaging in over their lifetime. These data and the participants’ conceptualization of political participation help frame the findings below and in Chapter Five.

Over the course of the study, multiple participants questioned whether clinical social workers “should” engage in political participation, or instead should be “encouraged” to do so. One African American participant stated:
The operative word you're using, ‘should.’ I attempt to refrain from such ways of thinking and discussing matters. I would encourage, and when I train, have conversations with clinicians, it's certainly on the table and part of...what we talk about, especially social work interns who are in class. …They're having to make sense of the core competencies and work it into their professional identity that's unfolding...so it's on the table.

When participants were asked to explain why they contested the use of the word “should,” many explained that clinical social workers “do the best [they] can at [their] job” within their normal work day. The participants with less practice experience frequently stated that they do not have “time in [their work] day” or they “only get paid for...an hour session [to see] a client,” and do not have time to incorporate political participation into their practice. More senior clinical social workers reflected on their supervisory sessions and observed that newer social workers were not aware of their social work responsibility to educate their clients on the political process. Clinical social workers with varying levels of practice experience also identified multiple barriers to engaging their clients in politics, such as the managed-care environment, community mental health agency policies, and agency administrators. The role of participants’ professional socialization and identity in facilitating and hindering personal and professional political engagement will be discussed in greater detail in Chapter Five.

During the first third of each interview, the participants were asked to formulate a definition for political participation. The overwhelming majority of participants struggled and began discussing the importance of: power, educating others, being a voice for their clients or a loved one, engaging in community organizations and groups to bring about change, and advocating. Without prompting, most of the participants began discussing the nuances of the words politics or political and participation aloud. This exercise seemed to focus the participants’ thoughts and resulted in them expanding their prior conceptualization to include: awareness, laws, government, campaigning and running for office, political parties, testifying
before a legislative committee, rallying or protesting for or against an issue or law, elected
official, and public servant. Many participants viewed the concept of political participation as
“taking it to another level, a higher level,” which they understood as being an “umbrella” term
for different types of civic and political engagement.

Five White participants, three females and two males, identified political participation as
an exclusively political act, which involved engaging with elected or appointed officials who
serve on a government body, which aligns with Verba et al.’s (1995) definition. The three
female participants had run for elected office and frequently engage in electoral politics; and all
five participants stated they were qualified and knowledgeable to run for political office.
Conversely, nearly two-thirds of the participants could not separate civil and political acts, and
viewed the concepts as interconnected. Participants shared examples of engaging in civic acts
(e.g., volunteering for an HIV/AIDS program) and then describing how their engagement served
as a bridge to a political experience (e.g., the HIV/AIDS program asking their volunteers to
contact their state senator because the State House of Representatives eliminated their funding).

Utilizing the four typologies—civic specialist, electoral specialist, dual activists, and the
disengaged—formulated by Jenkins et al. (2003), the participants were categorized based on
their proposed conceptualizations of political participation, which were further clarified based on
their understanding of other concepts (e.g., advocacy, awareness, educate) they routinely
discussed. Only one participant was included in the disengaged typology. This White female
participant adamantly and repeatedly stated she was not involved in her community, politics,
professional groups, and associations. When asked to define political participation, she stated,
“politics is not something I am...involved in [and]...it's not really been a big interest [of
mine]....” When considering the other typologies, nearly two-thirds of participants qualified for
the dual activists category, and explained political participation with civic and political terminology. Overall, most participants struggled to clearly articulate a concise definition of political participation and when civic and political engagement clearly diverged. The three sub-categories used to frame all of the dual activists’ definitions were: power, voice, and community.

**Power.** Power is at the core of politics and engagement in civic activities. With power, a person, group, or community can influence policies and laws and those who create them. Participants often mentioned the importance of power in their definitions of political participation. One participant in his mid-30s described the importance of power:

Well...I'll start by thinking about political, and when I think about political I think about power, who has power and who doesn't, and how is that power enacted. And so political participation is getting involved in issues around how power is distributed and how it's used in general. I would be thinking about, how do I get involved with how resources are allocated by governments or by, in the case of insurance companies, that's one of them, in the case of building awareness or people being connected....Where is their power being utilized and...how people get involved with influencing that power or having an effect on that power.

Another participant described the importance of gaining power in her community:

Political participation would be...going out in the community and participating in things you would like to see changed. Whether it be higher pay, more supplies [for schools], more employees…filling in the demands that we have [at my place of employment], [and] just trying to make change in a positive way. Getting people that have the power in the community...behind you, supporting you and helping you with your goal[s].

**Voice.** Participants used the concept of voice as “serving as…someone’s voice” and “being…the voice.” One participant viewed political participation as:

It's speaking up in whatever you're able to do. It's giving a voice to real experiences, to the people who can make decisions, or becoming one of the people who can make decisions that [are] going to affect policy changes to better everybody's conditions.
Another participant agreed:

For me, I think just being involved in the community, outreach and sharing information, and being sort of the voice to the politicians, if you will. Being the one that's talking about what the grassroots issues are and using some of your own experiences to be your backbone. You've had this experience and this is what you see—you've been in this many schools, you've worked with this many families. Keeping certain issues at the forefront for people.

A woman in her 60s viewed political participation in terms of being the voice for those who have no power:

You are speaking on behalf of your clients in trying to effect change or reach a goal. Maybe providing a voice to augment theirs or to replace theirs. To accomplish a goal that you think is important, appropriate, needed, right, [and] just.

Community. Community was the most common of the three phrases to be repeated amongst the 23 participants. A Haitian man described his understanding of political participation:

[Engaging] in things that are bigger than themselves…and something that impacts their community. I don't think it's unethical not to [participate in politics]. I don't think [many] people become social workers just to impact themselves with a fat pocketbook. I would think there would be some level of [engagement]…It doesn't have to mean working on a political campaign, but some level of political participation or participation in the greater community…[and] it doesn't necessarily have to be political. I guess, engaging in the political process in terms of helping folks get elected, participating in groups or organizations that are pushing a certain agenda or cause, [and] voting.

A woman in her 40s with two children viewed political participation as being “more involved” and requiring someone to “be very active” and “engaged,” in activities such as rallying and protesting. When contemplating a definition of political participation, this participant viewed a clear overlap between civic and political engagement. To help contextualize her definition, she told a story about organizing supportive community members and groups for a housing development proposal:
I spent three hours at City Hall last night because there's a housing development proposal that's been submitted for a building permit. There's huge opposition from the community, but there's a large number of units slated to be affordable housing. This group I'm involved with, we've made a huge coalition where we gathered a bunch of other like-minded organizations across the city that we thought would be in support. We got to speak at the microphone last night and organized this whole thing. We're there with buttons on and to me that's both advocacy and political participation. Here we are to advocate for something we believe strongly in, and we're participating in a meeting of city officials and speaking for what we believe in.

**Gender Socialization**

In the social work literature on political participation to date, no scholars have investigated the gender differences among clinical social workers’ engagement in the political process. However, in this study the participants’ gender seemed to influence their understanding of and engagement in political participation. For example, women seemed to be impacted by five sub-categories: *identity as a woman; the impact of their family on their political participation; marriage or partnership with men; and having children and/or grandchildren.* Of note, female participants discussed their identity as women, children, and family when discussing political participation. Yet men did not discuss these sub-categories. This gendered difference seems to explicate the dimensions that impact women’s lived experiences in the political sphere and the factors that impact their political efficacy.

**Identity as a woman.** While asking the participants about their personal and professional identities, the overwhelming majority of the female participants, without being prompted, personally identified based on their gender. These identities included being: *women, feminists, mothers, grandmothers, wives, and spouses*; and they discussed how these identities interplayed with their political participation. Unlike the female participants, not one of the male clinical social workers mentioned their gender in any context of their interviews unless they were asked about it directly.
One of the first participants interviewed was born in Puerto Rico and moved to the continental United States later in life. She eventually married and works as a school social worker. When discussing her about political participation, she frequently came back to her identity:

I am a Puerto Rican woman who is a social worker. Then from there are many other [identities]. I am a foster mom, I am a…godmother to many, [and] I am…a parent to a few. Those [identities] are secondary. But my primary identity is that I am a Puerto Rican woman and I am a social worker. See everything through those lenses.

The participants often spoke about their gender as a strength. Frequently, they would discuss how being a woman made them very good employees at their agencies and as clinical social workers. Another participant worked as an oncological social worker her entire career and viewed herself as a “pioneer in [her] field.” She explained how as a woman and clinical social worker employed in the medical field, her colleagues and the administration did not view her position as a valuable component of the treatment team. The participant highlighted their assumptions that she “should just be happy with what [social workers] get,” and that she was “just going to roll over and give in” when she was challenged by a doctor or nurse. She further reflected on her identity as a woman:

I know my position as a white woman. Because I'm white, I already have some doors open that may not be open [for those who are a different race]. Because I'm a woman, it seemed to be a traditional social work position. However, I like being a strong woman, an independent thinker, a critical thinker, [and] tenacious.

Her identity as a “strong woman” helped her combat the injustices she encountered at work. From her viewpoint, these experiences enabled her to develop a “strength of character,” which she viewed as her greatest asset. These types of inequity have impacted other participants and some have elected to devote their lives to helping women.
One participant worked for many years in a clinical setting, but decided she wanted to have a greater influence on the low-income individuals and families she worked with in her rural community mental health practice. She decided to run for elected office. While going door-to-door to introduce herself to voters, this participant encountered many people who needed social services. As a social worker and a woman, she wanted to help these people long before an election:

[I brought] Medicaid application[s] and [pamphlets for] some area…social service agencies because I would run into people that needed help in some way. I did that in both the primary and the general [election]. There was this one woman I saw in the primary and I guess her husband was somewhere else, but I knocked on her door and she had been really depressed. I had given her some referrals during the primary and months later when I went back during the general to talk to someone else in her house, the difference was remarkable. She called [the] agency, she'd been actually getting help, was on medication, and she was excited to see me.

The participant is a world record holder for a very popular online video game and it became known during the campaign. Her political opponent began running negative advertising based on what the community thought was socially unacceptable behavior for a woman:

First of all, I think part of it was because I'm a woman [and] women don't play video games. Gamers are supposed to be weird or something. Playing video games, particularly [massively multiplayer online games]…was just being tone deaf about how many people have a hobby like mine.

On Election Day, the participant narrowly lost her political campaign and returned to clinical practice. However, she remained engaged in local and state politics and actively worked on social issues that affect a great number of her clients, such as those eligible for Medicaid.

Impacted by the many experiences she had throughout her life personally and professionally, another participant spoke about how she identified as a “strong feminist, liberal, mother and wife. Oh, grandmother, mother, wife.” Over the course of the participant’s career, she began to believe the best way for her to bring about broader change was through the political
process. This led her to work in a macro setting as an advocate, organizer, and a politically engaged social worker. When she explained how her identities influenced her work, she became more serious during the interview. From her vantage point, she did not want to be perceived as weak for being a woman or social worker. She viewed her versatility and strength as her greatest assets:

I guess the versatility because you can see all sides of a problem and you can see the impact….I guess versatility; I've never really thought about this. But maybe being strong, because you cannot be weak and be involved in electoral politics. And by weak I don't mean physically or mentally weak—you have to have a thick skin, you have to be tenacious and not give up, you have to be strong. You have to have a strong constitution. When people think of social workers they think of typical, soft, nice, caring, compassionate, bleeding heart who just wants to help people—a nun, right? And I am none of those things, but I'm a social worker.

After reflecting, the participant explained how her different identities impacted her career as a social worker employed in the macro sphere:

I have devoted my career to mostly helping women. I mean, I have male clients now, but they're…honorary women. They're good on women's issues, they're usually men of color, they're usually gay men of color. I feel like I've devoted my whole career to helping women and children.

When asked why she thought electing women and social workers to office was important, she said she “wants the person elected to already get it, [to] share the…[social work] values, to understand…how public infrastructure and government impact private lives and communities.”

A participant who worked in a community mental health agency also identified as a feminist and described what being a woman meant to her. Interestingly, she acknowledged a conflict she experienced as a mother and woman who is impacted by greater society:

Based on my biology and my physical structure I'm in a position…of becoming pregnant, …carrying a child, and having a child …is both a great privilege and power[ful]…It’s [also] a potential prison, entrapment, [and] social control.
**Family of origin.** Most of the women interviewed discussed how their beliefs, values, and ethics were influenced by their families. Participants who came from civically and politically engaged families eventually participated in activities to help impact their communities and the broader society. Like the participant above, another woman also identified as a feminist; however, her identity was greatly influenced by her mother: “My mother was an…early feminist and was really involved in the women's movement…. It means that…being female I'm a second class citizen based on, that's inherent I think, being a feminist….”

A participant working in private practice and consulting with a substance abuse agency discussed her lineage of socially and politically active family members. She described her family with pleasure and pride:

Both of my parents were very politically and socially active people…Even predating that, my grandfather wrote a book about the first African-American Merchant Marine captain of a Merchant Marine ship. Harriet Beecher Stowe is a part of my family lineage. My father's side of the family was very politically active, socially active…Even in the process of doing my master's thesis, actually, I found that one of my great aunts on my father's side had worked in [a city]…trying to champion rights of clients that were [institutionalized] and whose rights were not being protected—human rights weren't being protected.

Her family history was the catalyst for her being socially aware and curious about how people relate to each other. On multiple occasions, this participant discussed trying to understand and develop opinions on how people who are different (e.g., gender, race, ethnicity) are allowed to be disadvantaged economically or marginalized. She reflected, “it's one thing to have strong feelings about social issues, [but] it's another thing to take action and take risks to speak out.”

Another participant grew up in a very politically active home and had socially conscious and engaged family members. Her grandfather was a state representative, which she acknowledged had a direct impact on her father. After her grandfather died, her parents moved
to where “no Democrat had been elected.” She related a story about her parents’ political involvement and the impact her parents had on her:

It took seven years for [my parents] to turn the tide and they did. [M]y father was the town council president. I watched that, I lived that, and I think that made a huge impression on me and made it sort of possible in my little girl brain that I could do that. …He always—there was never a question that because I was a girl I couldn't and my brothers could. That didn't exist in my household; I could do anything.

Throughout much of the conversation, this participant often spoke about her father and rarely mentioned her mother. She was asked to describe her parents’ relationship and marriage, and how her mother impacted who she is today. The participant paused and kept looking at her kitchen ceiling. After sitting quietly for what seemed like several minutes, she sought to clarify her parents’ relationship:

No, no he dragged her along [to participate in politics]. Again, my father never knew where the laundry room was, never cooked a meal, never did a dish, never ironed a shirt—[my mother] did all that and took care of six kids so she had her hands full. But I also remember, you know lots of women in the house folding their laundry at the table, folding and stuffing envelopes for the campaign. She did her part for sure.

**Husband or male partner.** Similar to the experiences of other participants, men and women have assumed gendered roles inside and outside of the home. During the interviews, multiple female participants stated they would “ask [their] husband” whenever they had a concern or question about politics, current events, and/or civically oriented topics. After asking one participant to explain how politics or political participation impacts the work she does with physically and sexual abused children, she quickly minimized her competence and her impact on political systems. She then outlined why her husband was more knowledgeable on the topics:

My husband really is involved in a lot of that stuff. He keeps up on a lot of the news. All of my political talk at home is him talking at me about things. But as far as any sort of funding for what we do from the government, I always feel like there could be more.
The participant further explained the influence of her husband’s opinion:

He's very strong-minded, strong-willed, and so I tend to listen. He loves to watch CNN. And every once in a while, I'll kind of comment on stuff that's going on, but I wouldn't go so far as to say that his opinion influences me in any way….He just talks and I just listen. Because it's not—again, it's not a very big interest of mine. It's something he's more up on and learning about. Versus me, I guess.

One participant has been out of college for two years. She recently married and has an 18-month old son. The participant repeatedly told me she could not lend her voice to a conversation she had with her husband on politics. Like other participants, she also viewed herself as unknowledgeable and did not have enough information to have an opinion. When she was asked why she so readily asked her husband about politics, she responded with the following:

I'll ask him questions, what does this mean? Or, what does that mean? Or, what are they negotiating in Congress? Because I might not even know. Then I have him explain to me, this is what this [bill] means, or this is what that [political issue is about]. This is why the Iranian deal is happening or this. I think a lack of knowledge really. Nine times out of 10 he's explaining to me what I'm watching on CNN, if it's in a political [context]….If it's…world events, news or things that are happening, I don't need him to explain that, but politics I do.

Similar to the other participants, she then began to talk about her lack of knowledge and capabilities to discuss political and civic issues with her husband:

Because of my lack of knowledge, I can't really engage…[my husband] in [political related] conversations. It's more I'm asking and he's providing information. I think sometimes it's probably frustrating for him because those conversations aren't happening and he's super intelligent….This is the first time that…I have] ever really…[thought about this topic] and…how disengaged I am from the whole process.

Further clarification was required to better understand the participants’ answers and comments about their husbands. An important dimension in the lives of these women was the lack of importance and low priority they held for politics, current events, and civic oriented activities. When these participants were asked what items ranked highest on their priority lists, they responded with “their families”: “my family will always be the most important priority in
my life,” said one. When follow-up questions were asked to nuance their responses, one participant stated that, “my children are first and then the remaining members of my family come somewhere after. My children are always most important to me.” Events involving the participants’ paid work and community involvement appeared at different places on their individual priority lists. The participants’ most frequent community involvement was directly connected to their children’s activities. When questioned about how their husbands viewed their wife’s role within the family, one participant responded concisely and captured the overall consensus: “[their wife] is responsible for nurturing and caring for the family.” Although the participants did not view their husbands’ role as one of nurturing for the family, they did expect them to split home and family responsibilities. Thus the participants believed their husbands cared for their families deeply, but it was understood and demonstrated differently. Many believed their husbands viewed their role as being able to financially support their families because they earned higher annual salaries. This allowed these men to pay for the majority of the “family’s expenses,” to have money “to take family vacations together,” and to give their children “a jump on life” by providing them with the opportunities to be successful, such as an excellent education. All spoke of their husbands’ interests in being engaged with attending their children’s events and being present for important school functions. Yet the women clearly stated they did not believe their husbands “understood all that was required” and the “time commitment” required to care for their children.

**Children and grandchildren.** Many of the women in this study shared a story or an explanation of their limited availability to engage in politics due to their work and family time commitments with their children or grandchildren. One recently retired participant had three grown children who each had families of their own. Her eldest daughter was struggling to care
for her own teenage daughter and the participant agreed to help care for her granddaughter.

When the participant described her own political participation, she said it was “almost impossible to handle anything else because my daughter and granddaughter need me.” When she discussed how often she engaged in political participation, she said she was “focused on being a grandma.” She further stated, “I love having my grandchildren at my house…it helps my kids while they work and it allows me to be in [my grandchildren’s] lives.”

Another participant frequently reflected on her life as a mother and now as a grandmother. She discussed the enormous amount of time it took to raise her children:

Everyone says [having children is] the greatest thing [they] ever did. I'm not sure it’s the greatest thing I ever did—it's the hardest thing I ever did. My heart breaks for women now who are trying to juggle work, school, babies and diapers. Then I look back and say I did all of that: I worked full time, went to graduate school, had a baby, and then had [a second] baby….

The participant reflected fondly on the relationship she had with her parents, and gave credit to them and her husband for the support she received to accomplish her goals. During that time, she had to move political engagement to the bottom of her priority list and focus on her young daughter and critically ill son. Although she is actively engaged politically today, she still faces the struggle of being present in her family’s life. She described frequent video calls with her children and grandchildren and how she tries to arrange her life to be a great mother and grandmother. The participant smiled, and became soft spoken when she described her children’s relationship with their grandparents:

My parents lived three miles away and their house was utopia for my children and my children were very close to them. I didn't have grandparents and my husband really only had a grandmother and she was wonderful, we have great, fond memories of her. I'm trying to be a very patient [and] engaged on an almost daily basis.
Now that she is a grandmother, she views her grandchildren as the most important part of her life:

Oh my god, grandmother is like the highlight of my life. It's the best thing ever. [My grandson is] three, he owns [my home]. We are all working for [my grandson]. I try everyday...to build this home and our yard to be a place of utopia for my grandchildren so they never want to leave.

At the beginning of 2015, one participant traveled to Israel with her Jewish husband and his parents. She does not identify with a religion and did not want to adopt her husband’s religion in order to marry. Although his parents initially were upset, they eventually accepted her decision. The participant explained that she had never engaged in political or civic activities. She rarely had interest in such issues, and even less now that she was a mother. While in Israel her family, including her son, was on a bus tour, listening to the tour guide:

I remember sitting [on the] tour bus with the guide, who was Israeli, and my in-laws and my husband, who are all Jewish, and listening to these conversations and...[realizing] I…don't have anything to contribute to this because I don't...follow [Israeli news and events]. I think it made me feel kind of disconnected from [my husband and in-laws] in a way. I said to myself, I need to come back and start watching CNN and get more involved…. It's important…as a mom to be able to pass that [knowledge] along to my child who is going to grow up in this country. [Becoming more educated and aware of political world events] is definitely something I need to do more of because I'm a parent. [I]…immediately want to go…turn CNN [radio] on in my car on the way home [from this interview] and [become] more educated.

The participant further explained her role as a mom and wife, and why her experience in Israel made such an impact:

I have a child who is going to be growing up in a [rapidly] changing and sometimes fueled world. There's a lot of [violence and hatred] going on [in the world]. I think that the question…how often [did] your family [discuss civic and political engagement when you were a child?]—never. They were very conservative [and] very Republican…. None [of my family members] talked about that stuff. It makes me think…[that could be a reason why] I have never really been interested [in politics].

During both of this participant’s interviews, she repeatedly stated her lack of interest in politics, professed being unqualified to have a political opinion, and expressed feeling incompetent to
engage in the political process. From the perspective of the social work and political science literature, this participant would be viewed as experiencing low levels of political efficacy.

**Political efficacy**

Political efficacy has often been found to increase the political engagement of social workers (Ritter, 2008; Swank, 2012). Hamilton and Fauri (2001) found that political efficacy strongly determined the political engagement of participants. For this study, political efficacy seemed to be influenced by three sub-categories: distrust of the political system, perceived responsiveness of government, and self-image of the participants as knowledgeable and qualified to impact the political systems. Each of these sub-categories seemed to be influenced by the participant’s gender. Building on these sub-categories, this study suggests that gender socialization directly impacts the political engagement of clinical social workers.

**Distrust of political system.** The clinical social workers who participated in this study expressed feeling cynical about and distrustful of the political system, and shared their opinions on why it does not work for them. The common elements that emerged were feelings of not being heard, distrust of politicians, and that their involvement in the political system was a waste of their time and effort. One female participant noted:

I feel very cynical about the effect…of my voice in a political forum. I feel like voting has so little effect. And I don't trust...what is being said is actually accurate and what the [politicians] motivations are. Recently, I was reading about a bill, I don't even know what bill it is, that's going through [Congress] to partition off the national parks to the states so that they can...make decisions on what to do with the national parks. Of course the states [are] going to be motivated... because...then a state official is going to think, hell, we've had trouble balancing our budget and we can use the [national parks] money....Yes, they're going to say...let's vote for this because we're going to get some money that we don't have. We're going to be able to drill for oil in this national park, sell a portion of it off, or whatever those decisions are that would be money motivated. Animals are food motivated [and] people are money motivated....But that's not in the best interest of our environmental needs [or] the satisfaction of our population....I think that the cynicism or skeptic[ism that has developed] in me is a little disconcerting.
The participant then described how her cynicism and skepticism impacted her political participation:

It probably does stop me from being more involved or more active, because [I] feel like ‘ah, what's the use.’ I'm probably an outlier, but the more I feel [cynical or skeptical], sometimes it makes me [think], ‘well, they're going to hear from me.’ Because I [don’t] think [politicians] want to hear [our opinions].

A Puerto Rican participant explained how residents of Puerto Rico view politics and how Puerto Ricans living in the continental United States view politics. She also highlighted the idea of “a lack of trust” that Puerto Ricans feel toward the political system:

In Puerto Rico, people are more politically inclined because they feel if they fight hard enough, there will be change they can actually see. They believe in [the Puerto Rican] system a little bit more than the [American federal government] who has historically fucked them over (excuse my French). It's just such a small island. It's like voting…in the state [elections] versus [federal elections]…[Puerto Ricans] might vote for [a political candidate] on a federal level, [however]…Puerto Ricans [can only vote in presidential primaries] and can't vote [in the general election] for President. [This creates a] lack of trust between the United States and the Puerto Rican people…Most of it is that [Puerto Ricans] trust their people more than White [politicians from the continental United States].

A middle aged participant from Maine further emphasized the issue of the lack of trust in elected officials:

Believing you can actually make change and…[then witnessing] how our governor just chopped, chopped, chopped up services for the mentally disabled and handicapped. He stood on stage and said, ‘I know cutting these services are going to hurt the Mainers who need them the most,’ and he still cut [the] services. That [experience] made me take a step back and say, ‘I can't do this anymore.’

Participants who differed from these views were those who had a positive interaction with politicians. One such participant is an African American man who lives in a city in Massachusetts. While the participant was in college, he became friends with “the wrong crowd” and “was in party mode. It was either [college] or Captain Morgan, and I chose to go sailing.” During his “turbulent times and some crazy times,” the participant made bad choices and “ended
up doing 5 years [in] prison for trafficking narcotics.” It was at that time he decided to make a change in his life. He was invited by a friend who worked with former prisoners to present his story at a public event and describe how he managed to not re-enter the criminal justice system. The forum was held by a sheriff who was a social worker. The participant described his experience with the sheriff:

[The sheriff] heard me give my testimony and asked me to give him a call. I got involved in programs…he instituted [in the community and at the jail], and it's…been a great road. I mean, to be an example to individuals that…are incarcerated [and] to let them know you can turn your life around, that you can get out and not go back. To answer [the] question, yes [the sheriff] was definitely a significant part of…changing my life.

However, although he has had a positive relationship with the sheriff and working for a program sponsored by the sheriff’s department, he is still “enraged” by the broader social and political system:

The political system in place is not enforced. Let me just say that [our] laws are geared specifically to [harsher penalties for] crimes committed by African Americans and Latinos. The judicial system is not fair! The lives of minorities are not seen as [important] and [this is evidenced by]...the Civil Rights Movement and slavery. The stuff that we hear about now because of technology…has been going on for a long time….Anytime you have a group of people, I don't care what race they are, that are impoverished, you're going to have…violence and …those types of [unjust laws], especially when they're marginalized.

Part of the participant’s anger stemmed from the senseless death of his teenage nephew. Prior to the participant engaging in a second interview, his nephew was shot by his nephew’s best friend because “he was crushing on his girl.” During the second interview, the participant became emotional and asked for a break. Upon his return, he elucidated on why he became upset and his feelings of sorrow for the murder of his nephew and his anger for the shooting deaths of black men by police officers. He described watching media coverage of the Black Lives Movement as constantly reminding him that “black lives don’t matter.”
When you see incidents like what happened to my nephew…the thought process is…it definitely doesn't matter to someone else who has authority…I'm not well with the political situation and I think that's one of the main…reasons for this second annual march in Washington...10, justice or else. [The senseless killing of African Americans] just has to stop. The contributions of African Americans to this nation is broad and to treat us like this, it's a travesty.

**Responsiveness.** Participants in this study repeatedly described how they found the political system and government unresponsive to the needs of their clients and their own families. On multiple occasions, participants described their frustration with current social programs and those unable to receive services. One middle aged female participant began to fidget and became very angry:

> Our political system is designed to represent the people and I don't believe that's what happens. I think that is because corporations and financial institutions have influence over...elected officials…I mean they're influenced by money. While an individual may be elected—and that's a broad speak, because there are some politicians who I don't believe operate that way…because they publicly challenged [unlimited corporate money in politics]. But I think that at any given moment in time a very small percentage of elected officials are actually in office [and] maintaining integrity. The further that [politicians] progress in [the political] system, probably of no fault of their own, that becomes their world.

Only one male participant discussed his family during the entire study, and it was significantly different from the way in which the women explained their political participation. This participant discussed how government is not responsive and how it affected his own family’s financial outlook:

> As a father…I don't feel that...our government [is] very sensitive to the needs of parents. [For example,] in regards to…[paternity] leave, fathers [are not provided the same benefits as women] and help with affordable, quality, childcare. My wife and I combined make a fair amount of money, and…both of us were raised in families with limited means. I wonder how others have done it because things aren't designed to support families to flourish. I think in that way our government has failed. I think there should be more support for people to be able to spend time with their kids, to help pay for kid's child care, and help people find and pay for quality education. We're fortunate where we can pay for some things that other people can't, so I think in that way the government has failed tremendously.
On only a few occasions, participants spoke in favor of government and politicians, and described how the political system was actually responsive to their needs. Of note, these participants reported household incomes of over $160,000 per year. One such female, middle aged, married participant who ran her own private practice discussed how the Affordable Care Act supports her family’s health needs:

Obamacare. My husband and I are both self-employed and for the first time in...I would say in 10 years, probably 12 years, we actually are paying—we pay a lot of money for our health insurance because we make a pretty decent amount of money and we still get a little bit of a tax break but it's good quality insurance. It's not spending $1,000 for a $5,000 deductible and copays… I can go to the emergency room, I can get my breast examination, [and] my husband can get a colonoscopy. But even beyond that, if I'm not voting, one of the things that [my friend] and I've talked about over and over again is…exit polling. [Politicians] know...that I vote...they know my age...my demographic [information], and they know [if they want my vote] they need to take care of people [like my family]. [Knowing that]...really motivates me to vote and it motivates me to get other people to vote.

**Knowledgeable and qualified.** Many of the quotes from female participants in this chapter demonstrate their belief that they lack adequate knowledge to participate in the political process. This following highlights different descriptions to help the reader form a more holistic view of these participants’ beliefs. The male participants not only believe they are sufficiently knowledgeable to participate in the political process, but that they are also qualified to run for political office. Whenever male participants were asked about their qualifications, they quickly responded with an affirmative answer and would explain why they are qualified. As one noted:

I think I'm qualified to run for elected office, yes. I've never thought [about] it, but, yea. I certainly understand state government as a state worker. I think there's a larger issue around...budgets or...management—those are the things I think about in terms of elected office. We trust people to manage public good and I think I'm good at having an opinion on what public good might look like. I don't know that I'd be good at managing it. At the same time, I think I would be qualified to and I think I could play a role somewhere in just advancing [public policy that helps our clients].
This sentiment was different from most female participants. They usually tried to rationalize why they were not qualified for politics. As one female participant in her late 20’s described:

I guess it's just a topic where I [feel]…naïve. I just never…jumped into…or learned more about [politics]. I guess I never literally felt like I had a ball in the game…as far as [politics] was concerned. I just kind of listened to everybody and just kind of stayed back, for fear of saying something incorrect or offensive.

Another participant described her lack of participation in politics:

This is going to sound really awful but…I [don't have an]…education about politics and I’m [not aware] of what's going on [in our country or internationally]…I lack the education or…the knowledge surrounding politics to really get involved or speak to it. Often I see these kind of [political] conversations…on Facebook….I have an opinion about it and I have something to say about it, but it's almost like I don't want to because…I feel like I don't sometimes meet the criteria to have a dog in the fight, which is I guess my own issue to work on.

There were only three female participants who believed they were knowledgeable and qualified to run for elected office. In each case, these participants had previously run for or served as an elected official. One of these women, an administrator of a non-profit, described how she became frustrated with the decisions her local town board was making and with hearing from her family, friends, and clients about the consequence of the board's decisions.

I decided I'm tired of just hearing all this, I'm going to go do something and I decided to run. [The local board] needed to be different and I thought I had the skills to help make it different. I wasn't [going to be] someone who sat on the sidelines quiet anymore and I was someone who can think fairly clearly and could look at [issues with a] different perspective….[The other elected members] weren't looking at [the issues before the board] in a social work way. I'm listening to their debates and…I'm thinking, you're just not hearing each other [and] you're not working together. My role on the [local board] became [that of] a…social worker mediator…where I would… find this common ground so we could move forward.

**Discussion**

Two of the three research objectives addressed in this chapter were to understand clinical social workers’ unique conceptualizations of political participation, and the factors influencing their political participation. The findings do offer a more robust understanding of the political
participation of clinical social workers, and allow social work scholars the opportunity to research ways to develop new practice and teaching methods to encourage greater integration of political and clinical practice. This chapter also supports the existing literature that a gender gap exists between male and female clinical social workers’ political participation.

Almost 100 years ago, the ratification of the Nineteenth Amendment secured the right for women to vote in the United States (U.S. Const. amend. XIX). However, women of color, particularly African American women, had to contend with poll taxes, Jim Crow laws, and White nationalist groups such as the Klu Klux Klan. It was not until the 1964 passage of the Twenty-Fourth Amendment prohibiting poll taxes (U.S. Const. amend. XXIV) and the Voting Rights Act of 1965 that African American men and women could freely vote in elections. Over the last 50 years, clinical social workers in general and participants of this study in particular have witnessed the growth in professional opportunities and a greater role in the public sphere for women. This also applies to the increasing presence of women at elite levels of politics, such as Nancy Pelosi being elected the first speaker of the House of Representatives and Hillary Clinton winning the first major political party's nomination for president.

Women have been entering professional careers at a growing rate (e.g., almost half of law and medical students are women) and women have surpassed men in college graduation rates. The participants in this study are also professionals who are required to have a Master’s degree and a state-issued license to offer mental health services. Nonetheless, male and female clinical social workers participate in politics differently—both in terms of form and actual level of activity. Since gaining the right to vote, women have met or exceeded the rate of men among some political engagement activities, such as voting. As discussed in Chapter Three, women participate more readily in forms of political engagement requiring less time, energy, and
resources, and less frequently in activities requiring a more public presence (e.g., campaigning, testifying before a legislative committee, joining a political organization) (Burns, Scholzman, & Verba, 2001).

The social work research on political participation and political efficacy has not empirically captured the effects of gender socialization on political engagement. Over the course of this study, gender socialization evolved into an overarching theme for this study. Clinical social workers were asked to conceptualize and define political participation, however, they struggled with understanding when civic engagement turned into political engagement. On many occasions, the participants described their civic engagement and it appeared to serve as a bridge to various forms of political engagement as delineated by the literature. Many women conceptualized ‘politics’ as having a negative connotation. Female participants seemed to discuss ‘advocacy’ more freely than political participation and used the terms interchangeably when offering examples from their private and professional lives. On many occasions, I asked the participants to explain the difference between advocacy and political participation; however, they could not.

Five White participants, three women and two men, formulated a description of political participation that was similar to Verba et al.’s (1995) definition. These participants clearly stated that all political activity should focus on elected or appointed officials, and they did not believe civic engagement could be a political act. Upon more in-depth consideration of the definition Verba et al. (1995) formulated, the authors’ created a resource-based model to understand the general public's political participation and those with greater access to resources, time, energy, and money will engage in politics at higher levels. This model is also the basis for Verba et al.’s definition of political participation, however, it seems to place the onus on the individual—in this
case women—to gain more resources, to earn more money, and find more time, and does not factor in the systematic factors preventing women as a group from achieving equality with men under the law. Of note, women have made significant gains in earning potential, education, wealth, and other resources, yet the gender gap persists.

As discussed in the literature review, and is supported by this study's findings, most of the female clinical social workers viewed themselves as politically unqualified and unknowledgeable, and possessed low levels of political ambition and political confidence to engage in politics. The finding that many women reported asking their husbands to explain politics and policy decisions to them was unexpected. In the context of the gender socialization literature from political science, this finding is consistent with assumptions emanating from this research, however, after a diligent search of the literature, there is no study that explicitly states this phenomenon in these terms and in the participants’ own voices.

After further discussion, the female participants described the challenges of their work-life balance given their status as graduate educated professionals and traditional roles as a wife and mother. These women explained that when they returned home from work, their primary concern was the care for their children and all other considerations for their time was less of a priority. The women also explained that the majority of their time outside of work was dedicated to more traditional private sphere-related activates, such as driving their children to various activities and household tasks. After discussing the reality of their lived experiences, the female participants’ limited time would impact anyone’s engagement in politics.

Further complicating the female participants’ political participation was their low levels of political efficacy—distrust in political structures and belief that government is unresponsive to their needs. Many of the participants felt that government was present in their lives, but only
when something was required of them, such as when they had to take their social work license exam. The exception to this were participants with household incomes greater than $160,000 per year, who found government both responsive and able to meet their personal needs (e.g., the ability to receive high-quality health insurance through the Affordable Care Act). All the participants in this study were asked to discuss their process to become a social worker and how they integrated political participation into their practice. In Chapter Five, professional socialization and professional identity will be discussed to peel back the multiple layers impacting clinical social workers' political participation.
CHAPTER 5: PROFESSIONAL SOCIALIZATION

*I encourage my students to hold on to their professional core. While they must represent their agencies, they must not become their agencies. Representing rather than becoming one’s agency is what differentiates a professional from a bureaucrat. When they become their agency, they become agents of social control.* (Gitterman, 2014, n.p.)

This chapter outlines findings regarding how participants were socialized into the profession of social work and their conceptualization of a social work identity. As described in Chapter Two, data from the first and second interviews were analyzed using a robust methodology to answer research questions. Professional socialization was comprised of three separate elements: *pre-socialization, formal socialization, and practice after professional socialization.* These elements, explicated below, helped the participants develop their professional identity, which evolves over one's career. Thematic analysis revealed key sub-categories which describe processes for the development of the participants’ identity. Further, these sub-categories illustrate the influence of each primary component in incorporating political participation into their clinical practice and personal lives.

**Literature Review**

The social work profession has experienced a growing divide between its mission, values and ethics, and neoliberal structures, such as insurance companies. Persistent reductions in state and federal funding force more social workers into managed care systems, which threatens the profession’s historical focus on social justice (Carpenter & Platt, 1997). This commitment to serving oppressed and marginalized groups is what makes social work distinct from psychiatry, psychology, and counseling. However, the profession is being “industrialized,” and social workers are seeing more of their professional decision making co-opted by public and private funders (Carpenter & Platt, 1997). These changes require greater productivity of social work
practitioners, a dramatic increase in paperwork, make difficult meeting treatment goals, and raise significant ethical conflicts, which directly affect the quality of the services offered (Motenko et al., 1995).

Professional socialization has been a consistent and essential component of social work education, which is embodied in the Educational and Policy Accreditation Standards (EPAS) of the Council of Social Work Education. The EPAS outline the requirements which all social work programs, at both the Baccalaureate and Master’s level, must abide by in order to receive CSWE accreditation. The EPAS are updated regularly and in June 2015, CSWE released the newest version of the competencies. When comparing the 2008 and 2015 EPAS, the 2008 version seemed to merge professional identity with competencies relating to professional behaviors and the manner in which social workers engage as professionals in practice (CSWE, 2008). The 2015 EPAS do not emphasize professional identity, but focus on professional behaviors all social workers should engage in, such as professional conduct, demonstrating a professional demeanor, ethical decision-making and conduct in practice, and demonstrating self-awareness during practice (CSWE, 2015). It is important to note that professional socialization is conceptualized as a progression (Shuval, 1975), beginning before enrollment in a social work program, continuing during formal education, and afterwards throughout professional practice. Social work education is only a piece of the formal socialization process and a holistic view can help understand the formation of clinical social workers’ professional identity (Barretti, 2004a, 2004b; Judah, 1976; Merdinger, 1982; Miller, 2010, 2013; Pardeck & Callister, 1991).

Abbott (1988) defines professional socialization as a “process by which individuals are shaped or molded to assimilate and reflect the value dimensions of a given profession” (p. 31). This definition integrates well with Miller’s (2010, 2013) longitudinal model of professional
socialization, which consists of three phases: pre-socialization, formal socialization, and practice after formal socialization. Pre-socialization is understood as taking place before beginning social work education. In this phase, a person has developed their attitudes, motivations, and values over their lifetime, based on their life experiences and relationships. This is what social work students bring with them to formal social work education. The formal socialization phase includes social work education in the classroom and field placements. Finally, practice after formal socialization includes a social worker's entire career after successfully completing his/her social work education. Miller (2010) contends that this framework is a stage-based process. She acknowledges “the outcome of the professional socialization process is understood as a career-long evolving relationship to three dimensions: professional values, professional attitude, and professional identity” (Miller, 2013, p. 370).

The concept of socialization has been well-studied in other professions (e.g., medicine, nursing, and law), and much of the social work literature focuses on students (Barretti, 2004a, 2004b; Miller, 2008, 2010, 2013). A paucity of research focuses on social work practitioners (Carpenter & Platt, 1997) and those in late career or who are retired (Loavenbruck, 1976; Lovett & King-Frode, 2010). The literature on the professional socialization of social workers typically engages longitudinal research methodologies to study changes in students prior to, during, and post social work education (Valutis, Rubin, & Bell, 2012; Weiss, Gal, & Cnaan, 2004). Contradictory findings make it challenging to understand clearly the socialization that takes place during social work education. Many factors may influence social work students individually, resulting in a lack of predictable patterns, including differing foci of social work programs, field education placements, values, and motivations to study social work (Barretti, 2004b; Miller, 2008, 2010). Interestingly, Carpenter and Platt (1997) contend that clinical social
workers are frequently placed in situations where bureaucratic demands and managed care policies are in contradiction to the social work profession’s Code of Ethics. Thus, these social workers may be caught between their job descriptions, expectations and livelihood, and their professional mandate.

Adams, Hean, Sturgis, and Clark (2006) describe professional identity as the “attitudes, values, knowledge, beliefs and skills” that are common among a profession, which are related to the “role” individuals must share collectively (p. 56). Similar to the literature on professional socialization, much research has addressed professional identity in nursing and medicine, while social work scholars have neglected to address this topic among practitioners (Lewis, 2004; Whitaker, 2008). Yet, there is an emphasis in social work education on impacting students’ professional socialization (Barretti, 2004a, 2004b; Miller, 2008, 2010, 2013; Weiss, Gal, & Cnaan, 2004) and a continuous debate about how to define the profession after Flexner’s (1915) negation of social work as a profession (Gibelman, 1999).

Findings

Professional Socialization

Clinical social workers go through multiple phases of professional socialization before they can work with clients. However, as individuals, these practitioners also bring prior experiences with them before deciding to become a social worker and enrolling in a school of social work. Once they have completed their formal social work training, they take their new skills and professional indoctrination and use it in practice with clients. Over the course of their career, they develop a social work identity based on their education and practice experiences. The participants in this study often discussed the importance of mentors and their influence at various stages of professional socialization. Participants also described their journeys to social
work practice and how political participation did/did not fit into their professional socialization and professional identity.

**Pre-socialization.** Throughout the interviews, participants outlined the reasons they became a social worker and the practice experiences they received prior to enrolling in a social work program. Most participants in this study reported entering the profession to “help people,” “wanting to understand how people operate,” to be a “psychotherapist,” and to work in some form of “one-on-one treatment.” A small subset of participants expressed an interest in engaging in social or political action or some form of community involvement. The two sub-categories used to understand the pre-socialization stage were: *reason for becoming a social worker,* and *work experience prior to social work education.*

**Reason for becoming a social worker.** One female participant discussed growing up in Los Angeles where she “lived in a community that was quite privileged.” She discussed the norms of her family and her desire to become “a psychotherapist since [she] was a child”:

> Going to psychotherapy with my family and as a child [in] the culture I come from, everyone had a therapist and it was kind of part of your support system development. I felt I could do a much better job than the family therapist we had and knew at that moment that I wanted to in some way…become a psychotherapist….

Several participants discussed experiences or aspects of their lives as being an impetus for becoming a social worker. Some discussed a mentally ill parent, experience with domestic violence or substance abuse. One female participant identified her struggle with addiction as her call to the social work profession:
At 19 years old I went into my first treatment center [and] I ultimately did not attain continuous sobriety until I was 29. I had several sustained remissions for two years at a time and then I'd relapse. And then a year at a time and then — you know…At about 26 is when I started graduate school…. [Actually,] it was 2008 when I started graduate school, so I was 27. That's why I chose my concentration with [a] substance abuse [focus]. I've always known that I wanted to help people, [and] always felt that when I was being helped I had more of a connection with people that really [understood and experienced] where I was coming from. I even find now in my career…there connection you can build, …you can say, ‘hey, I've been in your shoes.’ I think… it provides hope to people.

A few participants used a religious or spiritual reference when discussing their motivations for becoming a social worker. An African American participant shared such an example:

[Being a minister] very much impacted [my decision to become a social worker] because as a minister I provided spiritual counseling to people…through being a clergy…there counseling foundation was there and so I think that…opened a door and then from there [I began] working in the field of recovery…I called it a calling [and] I used a spiritual term…this is what I enjoy doing [and] it's not tedious mentally, you know what I mean. God will help me.

A White female participant discussed an early career experience as an elementary school teacher with children who “had lice, [exposure] to domestic violence, parents in jail, [and] a multitude of [other] issues.” She then began speaking about her faith and her active participation in her church. She frequently attended religious services, was active in church committees, and frequently participated in church events. Eventually, she started to volunteer part-time at a church run social service program because her faith and experiences with her students “led [her] to want to do more” for the families of her students. She found such spiritual and personal satisfaction from her work in the church run program, that she left her teaching position to become the assistant director. She stated: “[The position] just changed [my] whole course. I decided to go back to school and get [an] MSW on top of [my] MA in education and go a different course.”
A Latina participant discussed growing up with a Catholic father and an Episcopal mother. She recalled a fond early memory of attending Catholic Mass with her extended family (e.g., cousins, uncles, aunts) and how important it was for her to be present every Sunday. She considered her decision to become a social worker and work with children as her “gift [from God].” She acknowledges that she doesn’t believe everything written in the Bible, but views herself as very “faithful and spiritual.” She discussed at length her prayers to a “higher power” for the temperament to be an “excellent social worker,” and that she allows “[e] the spirit and God to guide [her] and nurture [her].”

As mentioned, a small proportion of participants discussed community involvement or political engagement as reasons for becoming a social worker. A participant who works as a school social worker in an inner city school shared:

I would say…from an early age…I had [a] more intrinsic feeling of wanting to…always [be] involved in some type of community needs. [Either] identifying community needs or…for instance I would do…coat drives at my school. I'd be the one to initiate [projects to give to those] who needed a helping hand. I sort of always had this intrinsic need to want to support people.

A White male participant acknowledged always being “kind of oriented to the political side of social work and helping side of human services.” Like most of the participants he was influenced by his practice mentors who were social workers, but his experience working with urban homeless youth also impacted his decision to enter social work school.

**Work experience prior to social work education.** All of the participants discussed work experiences that helped introduce them to the profession of social work or led them to a social work career. Multiple participants described working for a child welfare agency without a social work degree; some worked in homeless shelters, and several worked in group homes for those with a mental illness or disability.
One such female participant recollected her first experience working in a group home with women diagnosed with schizophrenia.

I loved it and that was it. I…worked there for several years and in the process of working there decided to apply for my Master's in social work and went to social work school. I came out, I don't know how old I was, but…went to social work school after working there for about three or four years.

Another participant discussed how her experience in a non-profit led to other opportunities:

Just the more I did it, the more I wanted to do…The more issues I saw, the more I got involved. Just starting with the fuel bank, I wrote all the policies [and] got the fuel bank going, which put me in contact with local legislators and…[a fuel assistance program]. Because it's a state-wide program, we started distributing Operation Fuel funds from my fuel bank as well as all the private funds. [The program] put me in touch with the business community as I looked for better deals for [my clients]…Then I expanded the food—we did a share food program…I expanded into adopted families for Christmas and back-to-school-clothes for kids, and I started a multitude of programs during that time. It just put me more in touch with upper levels of decision making and I wanted to get more involved in that.

Through these experiences in different programs, the participant had interactions with clients who needed therapeutic assistance and realized she could not help them without a graduate social work degree:

I also wanted to get into the clinical work because [I did] a lot of this ‘on-the-spur counseling’ without training. I had one client…who would come in every couple months—now I know she was schizophrenic—she'd come in and tell me about the aliens who would take her away, break her, and bring her back on a regular basis. And I wanted to do more exploration….I also had a lot of [clients who experienced] domestic violence. And as a survivor myself, that's the field I went into first when I started becoming clinical.

**Formal socialization.** Participants outlined their years engaged in undergraduate and/or graduate level social work education as an essential aspect of their formal socialization.

Undergraduate social work education is a generalist curriculum to expose students to all the different facets of the social work profession. Students in a graduate program can enter without an undergraduate degree in social work. Most participants had four-year degrees in education,
psychology, sociology, and human service, to name the most common. A small subset (five participants: three White women, one Haitian man, and one Latina) had a four-year degree in social work, and a smaller number (three participants: two White women and one Latina) entered their social work graduate program with advanced standing (meaning they did not have to take the first year of graduate coursework). A requirement of both undergraduate and graduate social work programs is for students to be enrolled in agency field placements. When the participants were asked to discuss their social work programs, most began discussing their field placements; and several of the participants refer to their field placements as internships, which seemed to have the greatest impact on their subsequent professional practice setting. In this section four sub-categories will be explicated: undergraduate social work education and graduate social work education, followed by switched focus, and concluding with field placements which seemed to hold the most significance for each participant.

**Undergraduate social work education.** For the five participants with an undergraduate degree in social work, there were several facets that became the focus of their discussion: values, responsibility, academic rigor, and micro and macro experiences. A male participant discussed his social work program as doing “a good job just going over the history of social work and social work values.” He also highlighted that the school tried to “tailor our experiences there to what [the students] interests,” but really stressed the “basic values and core responsibilities of social work.” Another participant discussed similar topics around social work values and ethics, but also stated the program’s “expectations were extremely high.” She recounted that the program and professors had:

expectations of the program as far as your ability to write and communicate. I think the professors [at the school of social work] are extremely engaged with their students. I think they have very high expectations and they're not going to settle for less, as they shouldn't.
As a result, she felt prepared for graduate school and “understood what was expected of [her] as a professional social worker.” She explained the curriculum:

I think it was generalist [and]…I really feel like it had a nice balance of emphasizing micro and macro. Every class you…incorporated some…I'm trying to think, …I…remember very clearly [the] very micro assignments regarding a case, a biopsychosocial assessment. I also remember policy classes…doing mock testimonies, and I remember doing community projects—you know grassroots in the neighborhood. I felt like I got a very genuine, solid generalist background. [The social work program]…prepared [me] to figure out…[my] comfort level and [the] direction [I’m] going to go…[in the profession], but also I felt prepared to go into the field at maybe any level.

Similar to other participants, one participant fondly remembered macro experiential exercises used in her undergraduate program:

I felt very drawn at the time to group work. The moment that really stood out to me [and] where I knew that [social work] was what I'm supposed to do was…my senior or junior year. I went to this event called Lobby Day in [a city in the western United States] and basically [my class] just learned about the lobbying process. We participated in rallies. It was really interesting to get some insight on the macro piece and how the micro informs the macro. There was a moment where I was at the rally and everyone had their picket signs and I became so overwhelmed with emotion to the point of tears. I thought, ‘what the heck?’ I called my mom and [social work] just felt right…I felt like I could learn a lot about myself, especially in my [social work] bachelor's program.

**Graduate social work education.** Participants who entered graduate school as advanced standing students frequently discussed the absence of any course content outside of their focus area, such as children and families. Although they understood the purpose of receiving advanced standing into a graduate program, they acknowledged not receiving “an understanding of how to do macro practice in a micro setting.” When the participants who completed their Master’s degrees in two or three years were asked if they could remember receiving any content which incorporated politics or political engagement, most struggled to answer. Multiple participants went to graduate social work programs that focused only on clinical social work. When one female participant was asked about her course content, she replied:
I didn't feel—there certainly was strong opinionated discourse on social issues, and issues of discrimination, in particular issues of racial discrimination. Even one of our projects that we had, I don't know if it still exists now, [was on racism], and that was very present. I would say that as a topic of political discourse, absolutely. But discussion of political involvement, voting, I wouldn't say there was a lot I was exposed to in my education related to that.

A male participant who attended a micro focused program remembered taking multiple clinical courses. He recalled taking “advanced clinical practice curriculum” and electives in “suicidality and child and adolescent clinical experience.” However, he could only recall “one class that was required as part of the curriculum on macro systems and political participation involvement.” He spoke highly about the professor and the content on social movements.

The only participants who had multiple politically-oriented courses were those in a generalist graduate program or social work programs that focused on group work, community organizing, and administration. One participant remembered how she was required to take courses which covered the importance of politics and policy, and how such content was often integrated in some of her micro-oriented classes. One class that was particularly memorable for her was on “human rights and needs, and [the class] talked more about the bigger social action issues and taking part in them.” She also believed that “a lot of [her] thoughts around political participation came out of studying the Code of Ethics.” This “combination of [a human right's] class and whatever class we really focused on that Code of Ethics [helped solidify her]…wanting to be into politics [and] as a social worker.”
Another participant went to a school of social work that had specialization tracks and focused on children and families. When she was asked to describe the course content, she said:

I really only know [a Massachusetts school of social work]...I get to know people from other programs [and] there [are] some [social work programs] that are so clinical that I feel [they are missing macro content]. Like Smith...or [New York University]. I think there are some programs that just don't touch any [macro content]. But at [my school], in particular...I got a pretty good foundation in — I learned so much more about social work programs...and Franklin Roosevelt...[My social work program] didn't so much teach me how to be an advocate...I mean I learned how to be an advocate in social work school, but it got me the basic foundation that helped me....

**Switched focus.** Three participants said their interest was in a macro practice specialty, such as administration, community organizing, and policy, but they switched foci because they did not believe they could find a macro oriented job after graduation. One participant described her focus on administration and desire to lead programs. However, she “thought before [a social worker could] lead a program or get into the program, [a social worker] really ha[s] to spend time in the trenches and hone [their] skills...” After completing her Master’s degree, she went back to school to learn the clinical skills she required because of difficulty finding employment. She viewed her training in both areas as critical. She stated that “once [a social worker] earn[s their] Master's degree and then get[s]...experience in the trenches, that's what really builds [their] skill set.” Another participant agreed. After returning from studying abroad, she decided “when [she] got back [to the United States], most of the jobs were in clinical [practice] so [she] switched [her] concentration and took [macro] electives and [was a] community organiz[er] in a health clinic setting.” She went on to describe her thoughts on the micro and macro split:

I don't like it [and] I think people need both. I think...you're a better clinician if you understand policy and are interested in it. I think you're a better policy maker if you understand clinical methods. That’s the education I wanted and that's what I got. The whole time I've been practicing...I'm always thinking of policy things [while]...I'm working individually with people. How do I make...programs work better for this person, not just this person but everyone...? How do people move through systems? By understanding policy, that helps you design programs [that work] better for real people.
Field placements. Participants often discussed their field placements when describing their social work programs. Their field experiences seemed to have the greatest impact on their future practice setting, and many were hired at a prior field placement after graduation. Most used their field experiences to help them determine the practice setting in which they enjoyed working. No participant recounted ever being placed in a politically oriented setting or discussed the importance of political engagement in practice. One person recounted being in a criminal justice based field placement in her undergraduate program and the placement exposed her to the treatment of prisoners:

I realized through an internship at the juvenile court that the criminal justice [system] doesn't always help people. There was a clinical social worker who worked in the court and I talked to her a lot. I realized that going for an MSW was helping people, opposed to a criminal justice route that keeps people in detention, holding center…doesn't really look at why they became criminal, and what brought them to these places at the court.

Prior to enrolling in a social work program, a Connecticut participant always thought she wanted to be a school social worker. Her first field placement during her graduate education was in a school and she described her experience:

I did a clinical school track—I thought I wanted to be a school social worker…I quickly learned I couldn't handle the politics in the school. I wouldn't be able to sit back and not say what I was thinking and feeling [based on my union’s expectations].

Most participants identified the importance of taking the academic content from their coursework and applying it in their field placements.

One participant who went to school in New York stated:

When I did the internship, I did it at a private psychiatric hospital. I really got into all th[at]…I was reading about—I actually was able to see it first hand and we worked with people with psychiatric disabilities.
A female participant from Massachusetts recalled her field placement. Her social work program explored what populations the students wanted to work with and then required them to pick settings where they had limited practice experience:

I had a varied experience...at th[e] time [of deciding my field placement]. [The social work program allowed us]...to be part of teams in which population we worked with. I did work with kids...forensic [interviewing]...the elderly, and I worked in outpatient [treatment]. I had that kind of—that was my clinical experience. I got hired in...continuing care that worked with people who were more chronically mentally ill and I like [that setting]...much better.

**Practice after formal socialization.** The participants in this study shared examples of the challenges clinical social workers experienced in practice which dissuaded them from encouraging and educating their clients on the political process and the participants’ own political engagement in their personal lives. Participants were placed into the following sub-categories: *early career clinical social worker* and *senior clinical social worker*. *Early career clinical social worker* were participants who graduated with their MSW less than 10 years ago and/or self-identified as a “new” clinical social worker. The *senior clinical social worker* sub-category included participants graduating 10 or more years after completing their MSW and/or self-identified as a “clinical supervisor,” “clinical director,” or “program manager.” Most of the participants discussed the importance of *mentors* and recalled how vital they were throughout their socialization into the profession. The participants came from a variety of practice settings and the data required further analysis to understand the nuanced differences and their impact on the participants. When the participants were sorted based on the same or similar practice settings, four distinct sub-categories were identified: *government funded programs* which are comprised of multi-specialty non-profit agencies primarily receiving public revenue; *for profit programs* owned by private corporations; *private practice* in which the clinical social worker was the sole provider of therapeutic services; and *community mental health agencies* which were
non-profit agencies providing only mental health services, whose revenue relied on a mix of public and private third-party managed care reimbursement. The common elements that emerged as challenges to political engagement across the various examples included time management, insurance companies, confidence, agencies, and the clinical social worker’s age.

**Early career clinical social worker.** A participant who had just celebrated being out of graduate school for two years reflected on her lack of political engagement in her personal life, but also professionally with her clients. She discussed the importance of understanding addiction, reducing stigma, and ensuring all people have access to treatment. Yet she did not feel she had the required skills or knowledge to change social policy and laws. When asked to describe how her supervisor and co-workers perceived her, she said:

I think that my supervisor would…say I'm too hard on myself and I don't have enough confidence…I'll have a thought or I'll speak up about something, but you can tell there's a hesitance and I'm not really completely trusting my instincts. I think my colleagues would probably say I'm…organized but can get overwhelmed. I try to not—I don't let the client see that side of me. I think [the client] may see all the things I mentioned previously, but then with those flaws…come out just by being human….I've always [been told by my supervisors and colleagues] that I don't trust my instincts enough, and that I should have more confidence in my skills and my ability.

**Senior clinical social worker.** A participant who supervises and hires new clinical social workers discussed the changes she has observed in her community program. At one time, the program was completely funded by the municipal government.

Now the clinicians charge clients a sliding scale fee for receiving services or bill health insurance companies.

Sometimes…I think it's because of the way…programs are managed….For example, in our outpatient clinic [all clinicians] used to be salary to do outpatient counseling work. Now they're offering fee for service. You only get paid for that one hour you're seeing a client and all of the other phone calls are not reimbursed. There's less of an incentive for [the clinicians] to do any of that [additional] work…and not an incentive to do [it] because they're not paid for it….
She further reflected on why newer clinical social workers do not see the importance of educating their clients about the political process:

Never mind the bigger picture, they have no room in their jobs to go to a community meeting to…present a case. I think some of it is…the payer system, insurance, and state contracts, and all that dwindling, and companies having to make decisions to whittle things down. That's definitely, I think, probably the major reason. Over time, people don't know that's how things were done anymore. Newer clinicians…[being hired] nowadays have no idea that [community and political engagement were] even ever part of the job. So it's changed the entire culture. It's not even, this is how it should be. They just don't even—it's just not in their lens at all.

Another participant who also supervised new clinicians felt that time management was a challenge. She noted that clinical supervisors don’t even engage in political participation or help their clients understand the importance.

A lot of times—I don't think…they feel as empowered as I feel. Because a lot of times they'll see—some of [the new clinicians I supervise are] Facebook friends…and I just talk about what I've been doing. They're like, wow, that's awesome you do that. It's sort of like you over there. You do that, I'm not doing that. They don't see it as really part of their [professional responsibility] — maybe they're not confident. A lot of the people I see are newer…and younger social workers, and haven't really gotten their sea legs on [to understand] what being a social worker is all about. And never mind…this political thing….They're also just in a different phase of their life where they're not as aware. Not to stereotype [and] not everybody is like that, but just some particular people who have worked for me, where they are right now. A lot of other [clinicians] are in very different places in their life and they just have other priorities. [Political participation] is just not one of theirs.

**Mentor.** Throughout the participants’ professional socialization, mentors played an important role at various points. Some mentors helped participants in their undergraduate programs to be successful in school; several had mentors who inspired them to strive for better opportunities such as enrolling in MSW programs; and others had mentors who supported and guided them in practice as colleagues and supervisors. When a male Haitian participant was asked who inspired him to enter into social work, he fondly recalled his high school football coach:
I played [football] in high school for four years and our high school coach was a father figure for a lot of us. He pushed the importance of more than just the sport….He pushed the importance of…social responsibility…of our grades…how we presented ourselves, and we had to do more than just play the sport to stay on the team. He didn't push any of us into helping professions…but…[his values] certainly rubbed off on many of us.

A female participant from Connecticut described the structure of the human service program she attended as being “identical to a [bachelor’s degree] in social work.” She fondly recalled a professor she credits for “really inspiring” her. She stated that “going back to that first question about why [she] became a social worker…[Her professor] had a big part in helping [her] realize that [social work] was [her] trajectory. He was just a…smart…no ego, [and] great professor.”

When asked to describe why he was so impactful, she stated:

[He was] very passionate…smart and [he] valued me. He listened to what I had to say, and not just me. He valued so many other students, too. He took the time to hear you. It wasn't like, ‘hear me talk.’ I liked that because I didn't really experience that too much. It was more like, ‘I know it all. I'm a superhero.’ A lot of professors [in my undergraduate program had] big egos.

Another participant was inspired by her Puerto Rican professor:

The first professor I've ever had in my entire life was a Puerto Rican female and [it] meant the world to me because that meant if she could be a professor, so could I. When I do good for myself, I do good for everyone else that's like me. Just like what [the professor] has done for me, I can do for someone else.

Finally, a participant who practiced for over 30 years described the mentors who helped her navigate different obstacles throughout her career. She described one mentor’s practice advice:

My mentors were a circle of individuals who taught me more in the game, and took me under their wings. It made sense to me, what they were offering for a theoretical view. [One] mentor, in the environment of community mental health…[helped me see the increase] in the numbers of clients [a clinician was expected to see and the time allowed to spend with them] became less important….My mentor then discussed with me, knowing [I enjoyed]…trauma focused work, the capacity of high numbers in quality work are very challenging [and]…then directed [me] to begin clinical supervision…. From clinical supervision [she encouraged me] to become an administrator of a clinic.
**Practice setting: Government funded programs.** Unlike the participants with less years of practice experience, several more experienced clinicians found opportunities to integrate political participation into their practice when they worked in programs that were government funded and not fee for service. One participant worked in a prison with women and described a group session:

I always encourage the women to become involved in the[ir] communities when they get home. [During]… the round table discussions, instead of saying, ‘if you don't like the way you're treated here, don't come back’, I say ‘if you don't like the way you're treated here, make sure that when you go home you tell people [to] get…involved and let people know about this place.’ I had a…an older white woman, first time incarcerated, sitting in my office with eyes like deer in headlights. She was like ‘I, I, I did not even know that this place existe[d] and I said, ‘well, everybody needs to know that this place exists. So when you go home, you tell everybody that this place exists, who's here and what happens.’ So I think…that's part of my job….

Many senior clinicians discussed how they pushed boundaries at their agencies in order to encourage staff and clients to engage in the political process. The participant quoted above stated there was “a very fine line” she had to walk when encouraging the women to speak up for themselves while in prison. She shared a story to explain how she empowered women to use their voice to advocate for their needs:

I don't know how I [still] have my job. [The prison]…ran out of room [for incarcerated women] and they had a large group…sleeping on the floor in the gym. To be honest with you, I don't even know how it all [happened] because I would never tell the women—this is why the warden didn't like me—…to do anything that would get them in trouble…while they were [incarcerated]. I must have said something about, ‘well, you have the right to voice [your] opinion and you know you can write to your counselor.’ …The warden was touring the gym and there was…a hundred women in this big, open space and a bunch of them started yelling at the warden, saying ‘she said…you couldn't house us here!’…I had to calmly reassure [the warden] that is not what I said…[and] that I would never encourage or incite a riot….I think when I encouraged the women to speak up for themselves, they sort of took it in that way.
Another participant who supervised clinical social workers often sent email reminders to her staff asking them to advocate to their elected officials around issues important to the agency and its clients. However, her supervisor was not supportive:

[My boss] was a huge barrier. She…wasn't a social worker, she was [a]…Licensed Alcohol and Drug Counselor, and understood how [the agency was] impacted by everything that…[happened in] the state, but didn't want to do anything strong about it. …I've been involved in organizing legislative breakfasts in [my town] for twenty-something years….Ever since I was at the first…social service agency I ever worked at, and I continued to [host legislative breakfast] and be involved in [the program]. She wouldn't—she never participated.

**Practice setting: For-profit programs.** One senior clinical social worker disclosed a challenging experience she had working at a drug and alcohol treatment center, which was recently acquired by a hedge fund. She characterized the “takeover” of the treatment center as having “the life...squeezed out of [the agency].” However, the participant was dismayed by the outward impression that the organization had “all these lovely values.” The participant eventually “left because [she] was the clinical director and basically [she] was being asked to do things that were unethical.” She continued:

I was being offered financial incentives to stay and operate within that system. Literally, I was offered a retention bonus incrementally, every three months, getting larger and larger sums of money to stay. I was being asked to recommend teenagers stay for longer periods of time in residential treatment, despite a true need to be there….When I see…I know what it's like to work for a company that's owned by [private hedge fund], and I can only attribute it to…they're a profit-making organization. That's what that was about, [the organization] want[ed] to make more profit [and] tell the parents [that] the[ir] kid needs to stay longer.

Holding true to the social work profession’s Code of Ethics, and her personal morals and values, she decided to leave:

I'm going to leave and they say ‘stay.’ [The organization’s management told me if I] happen to stay for a year, you're going to have an extra hundred thousand dollars in your pocket. I said, ‘no, thank you very much.’ I don't—in a larger scale that was— I mean…that would have been a lot of money for me to take.
She then reflected and compared it to her understanding of the political system:

Think about that on a larger scale…political people are exposed to [that] all the time and are…being incentivized all the time…. [Politicians are asked to] make decisions that potentially contradict their values, or…the values of their constituents, and often is painted in a box that still looks the same on the outside…. What was going on…inside wasn't the same, even though it looked the same on the outside….

**Practice setting: Private practice.** Several of the participants discussed the difficulty of fee for service work with insurance companies. One male participant working in Massachusetts spent a great deal of time discussing the challenges he was experiencing in order to meet his ethical obligation to the profession and succeed as a small business:

I also care for people outside of the traditional sphere. I do home visits…see people at off hours, and in emergency situations in which case that's not billable through insurances. I find that something I pay a lot of attention to is what goes through insurance and what doesn't. I get paid double when I don't use insurance or when I'm out of network…. That's something… I'm always thinking about…the value of my time and…other people's time, and how things are paid for. Unfortunately…a big part of my practice is trying to figure out how I can both make a living…[and] care for people.

The participant was considering no longer accepting health insurance because it would eliminate the “middle-man with the insurance company,” allowing him to make more money per hour, and run his practice as he saw fit. He described having a greater sense of freedom to empower his clients and to help them advocate for themselves in appropriate situations. At the same time, he noted that the client’s presenting problem was of paramount concern, and educating or encouraging his clients to participate in politics was not a pressing need.

The participant discussed a new concierge business venture he was undertaking with families in need of clinicians to assist relatives who were in psychological distress. Instead of the family member entering inpatient treatment at a hospital or a psychiatric hospital, the family hired a clinician to provide one-on-one treatment in the privacy of their home.
He explained:

Yes, so I do that outside of my practice here and my rate is actually closer to three times what insurance would pay for an individual session, so it's actually the converse…I make myself available pretty much 24/7. My hope is to keep people out of the hospital, because I find that hospitalizations can be a greater trauma…I can do the psych eval and be able to help the person first without having to do a psychiatric hospitalization, I do so and that's been great.

**Practice setting: Community mental health agencies.** One participant was a clinician at a community mental health agency, and a single mother raising a son. She described the culture at the agency as, "[they] will have [their] clinicians do as much as they can possibly do and [they] will try to not give them any more money." She described her current life and work situation as:

I haven't had an increase in pay in three years and…my health insurance costs have gone up. I carry insurance for my ex-husband and my son and myself. I'm actually making about $900 less this year than I did last year. In order for me to make a living, I do so many extra [therapeutic sessions]—we have a minimum of required sessions we do a week and then over [the minimum] we get paid for [each] individual session. Everyone that works [at the community mental health agency] works…about 50 hours a week, no question. You have to work extra too because…I work to compensate for the health insurance and then to make a little money over [and above]. But we're paid [35%] less than similar agencies in the state….

She noted that several years ago her colleagues voted to unionize. At the time of the interview, the union was picketing outside the agency. When asked if she had been picketing, she stated:

[I don’t] have the noon hour available to be out there [picketing]. I was scheduling [picketing] in for a while and that was causing me some real stress. [I was]…having to move things around for so many clients that I see. [The additional stress] was really not great for them and I know it wasn't good for me.

She explained that she only discussed politics with her group of transgender clients because she was helping to empower them to advocate for their rights. When the local newspaper published a story about the participant’s union’s contract negotiations with the community mental health agency, these clients were very engaged:
Most clients...expressed no interest in politics or human rights really ever except for my transgender clients...[They] were really fired up, ‘oh that's great! I'll stand out there with you,’ ‘what would we do without the [community mental health agency]?’ and ‘what would we do without you?’

**Professional identity.** Participants in this study shared many examples of what socialized them to the social work profession and led to their professional identity. As suggested by existing literature, this is an ongoing process that takes place throughout one’s professional career. Participants are constantly changing as they are exposed to situations that cause them to reflect on their professional obligations. For this study, the concepts of *professional identity*, *licensure*, and *ethics* were used to understand the participants many professional identities and their integration of political participation into practice. Throughout the interviews, most participants equated their identity as a social worker with such titles as psychotherapist, therapist, clinician, child and family clinician, counselor, and clinical social worker. One participant said she identified as a licensed clinical social worker because “that license was hard to get…it was a pain in the ass to get.”

Another participant suggested that her license was taken “a little more seriously…rather than just an MSW,” and that her license further differentiates her from others who identify themselves as social workers:

> [When] people think of a social worker, [they] think of somebody taking their kids out of their home….People think a clinical social worker [is] someone who's [at] a higher level—you're not going to call and take my kids out of the house. You don't work for those kinds of people. I think it's changing, but it has been an underlying tone for years, that a social worker takes kids out of the house, but a clinical social worker is doing more work….We're not just taking kids out of the home, we're going to help you try to keep kids in the home.

Other participants considered their possession of a license as “less of a liability” to their agencies.
A participant explained:

If I'm seeking a position and I'm an MSW, but I'm not licensed, then that's a liability for the agency because then the agency has to take responsibility for that worker….If they're licensed, that worker has to take responsibility for themselves. I think there's certainly a distinction between licensed and unlicensed.

Those participants who were senior level clinicians and were politically active identified themselves as social workers and then clarified their role based on the environment. For example, a male participant in private practice felt uncomfortable dissecting his multiple identities. He described how and when he uses different titles:

I don't say ‘oh, I'm a social worker’ and I don't immediately grab on to that. I do grab onto that title when I have to sanction someone or I have to leverage my credentials in order to have power in a situation where other people are making a power play. There are times when I've interfaced with psychiatrists, …with other positions, or psychologists who say, ‘I'm this,’ and I have to jump in. I visited someone in jail recently and I had to say, ‘I'm a social worker. These are my credentials, this is who I am, here's why I'm here.’ Thus, I was able to care for the person I needed to care for. When I need to leverage that identity, I do so, but [not] otherwise.

He added:

At the end of the day, [my credentials] protect me legally and give me legal powers to be able to have a construct of what I'm doing….What really matters is how I am helping to enact change in a human being or in…systems that exist within.

**Ethics.** The participants were asked if it was ethical to integrate political participation into their practice. Most chose to clarify their remarks by stating it was ethical for clinical social workers to engage in political activity in their *personal* lives, but not in their practice.

One female participant stated:

I'll break it down. From an individual perspective, I think it's our civic duty to be politically involved. From a social work perspective, I think it's ethical and we need to be responsible. As a clinical social worker, it's hard for me to ethically push any type of political agenda.
Another participant tried to “talk out” what she understood would be ethical and unethical:

I'm politically active as an individual. I don't think there's any place for that in my practice. But political advocacy, yeah. Increasing awareness, yeah. Advocacy in general, yes. I believe it would be unethical if I was talking with my clients about my political beliefs, that would be unethical….I might talk with them about theirs. I might encourage them to take action on theirs—if that seemed like that would be something that would…I wouldn't tell them to take action. If they were telling me, I am somebody who values being active in relation to my beliefs, then I might be working with them in therapy for what would that look like for you.

When the participants were asked if “nonpartisan political activity” was unethical, most suggested that it violated their professional mandate:

**P:** I don't know what you mean by that ‘nonpartisan.’

**Investigator:** Voting, registering to vote…handing a flyer out, telling the…

**P:** So do you think that I should do that in my practice?

**Investigator:** Do you think that nonpartisan activity violates your ethical code.

**P:** Yes.

A participant who closed their private practice and went to work for a state agency reflected:

Even [nonpartisan political activity]…is a slippery slope to me. I couldn't see myself either here or when I was in private practice reminding someone to vote. Again, that's not part of the relationship that I have with that person. I think as a clinician, you have to be careful to introduce other things that would complicate a relationship or change the dynamics of a relationship. I couldn't see myself suggesting to a parent that they need to go out and vote or anything like that….I guess there could be situations where you could make a parent or a client aware of some law or issue that could be impacting them directly, but they could do with that as they wish. I would encourage somebody ‘hey, you need to contact your local legislator about this’, and it would have to fit into whatever the role that you have with that family. But I would be very…cautious with that.

One participant, a woman who had been exposed to politics and ran successfully for political office, had a different interpretation of the ethics of political participation.

Is it ethical for anyone to participate in politics and receive a paycheck for something they are maybe trying to change? Yes, because politics don't always have to be dramatic. Politics aren't always about getting our way. Politics could be compromise so they could be like anything else. How do we all benefit from something? Now, if it’s extremely abusive or something that really needs change, it's unethical not [emphasis added] to be part of that. Just because I receive a paycheck doesn't mean I'm supposed to close off any parts of my vision and not make mention of something.
A male participant further clarified his answer, which was similar to other participants who experienced some form of political engagement:

It could be ethical [to integrate political engagement into practice], but it can't be slanted. If you want an individual to benefit from being more community active and you encourage political participation, I think that's ethical as long as you don't slant it….I don't think it's ethical to say ‘go to the democratic town committee.’ I don't think it's ethical to say ‘vote for the Republicans.’ I just think it's ethical to say, ‘there's an issue here…what do you think about it? Have you thought about becoming active on this issue?’ I've done similar things in my practice outside of my work [at my agency] and there are other things I do. I think being…in a micro setting, in a clinical setting doing…psychotherapy, a social worker talking to an individual saying ‘be more political, be active’ is a very reasonable thing. [It] is not something that breaches on any ethics. …If… I think it does breach and I think if you try to influence their political thinking, [it is unethical].

**Discussion**

This chapter’s findings helped to contextualize the many reasons clinical social workers entered the social work profession and offers more insight into their political participation. As noted, current social work research seems to focus on formal professionalization—social work education and field placements. Presently, a deficiency of scholarship exists on the professional socialization of clinical social workers during the pre-socialization and practice after formal socialization phases. Further, no social work literature explores the professional socialization process of social workers with a focus on understanding their political identity. Similar to Chapter Four, this chapter suggests that research is needed to develop new practice and teaching methods to further increase clinical social worker’s connection with the profession's social justice and social change mandate. The three research objectives addressed in this chapter are to understand the factors influencing clinical social workers’ political participation and how political participation is integrated into practice. This chapter supports the work of Miller (2008, 2010, 2013), Barretti, (2004a, 2004b) and others and provides a stage-based framework to understand the development of a clinical social worker’s professional identity.
Overall, Miller’s (2008, 2010, 2013) model offered a useful framework to understand the professional socialization of clinical social workers’ political participation. It takes into account the three stages of professional socialization—pre-socialization, formal socialization, and practice after professional socialization—topics which emerged from the discussions with participants related to their journey into the profession. Miller viewed the socialization processes as a lifelong evolution, which would result in the development of a professional identity. However, her research does not articulate the same understanding of professional identity as she does for professional socialization. She does not explore if or how professional identity evolves as the clinical social worker ages, gains additional practice experience, and enhances their social work training. Although this was not a focus of my interviews, senior-level clinicians discussed gaining more confidence and experience, which seemed to result in them more strongly identifying as a social worker as opposed to a clinical social worker, therapist, or clinician. It was these social workers who seemed to embrace opportunities to integrate political participation into practice, and were able to easily identify ways in which they had done so in the past.

The overwhelming majority of the participants discussed many of the values that are critical to the social work profession, such as service, the dignity and worth of the person, the importance of human relationships, and personal and professional integrity (NASW, 2008). Participants listed similar reasons for entering the profession, which included a desire to help people and to become a clinician. Not surprisingly, most participants reported working for a nonprofit agency, while five White women worked in private practice, and one White woman had recently left a for-profit agency. These results are similar to Miller’s findings (2008), which indicated that social workers favor working in direct practice and for publicly funded agencies.
The participants of color and three White participants (two females and one male) appeared to have more social change-oriented reasons for becoming a social worker during their pre-socialization phase. These individuals stated on several occasions that they entered the social work with a desire to help those with less power, and focused their social work careers toward social justice and social change. The participants of color seemed to use an intersectional lens to discuss their experiences with social injustice and their understanding of political participation. I anticipated that stories of social injustice would be raised by many participants, however, this was not the case, with the exception of this specific group. What I did not expect was the level of candor from some participants. On several occasions people of color would vent their frustration about current events and relate it back to their own lives. For example, one African American participant was interviewed the day of the South Carolina church bombings in 2015. Prior to recording, the participant spoke passionately about his anger and pain concerning this tragic event and its historical significance as an act of terror against African Americans. Not only did it make the interview challenging because it seemed to take most of the interview to gain the participant’s trust, but the participant used the church bombing as a segue to discuss childhood exposure to racism and violence in Baltimore, Maryland. Some of the data on this topic are included in Chapter Four. Interestingly, no participants of color entered social work education with a focus on macro practice.

In the social work literature, formal socialization includes social work education and field placements. All social work programs are accredited at the baccalaureate and masters level by the CSWE. Prior to accreditation or reaccreditation, each social work program must use the EPAS as a framework to create and/or enhance coursework offered to social work students. Almost all of the participants struggled to recall courses that included policy, politics, or
government, with the exception of a class on social welfare policy. The participants described
the course as social policy history and not connecting how policy directly impacts the wellbeing
of vulnerable populations. As anticipated, the only participants who could remember taking
coursework relating to political engagement were those in generalist social work programs or
those with a macro focus. Several reasons for this finding could be: the majority of participants
could not remember the political participation content from their social work coursework; the
content may not have been taught in a manner that helped the participants understand the impact
policy has on their clients’ daily lives; and the participants may have only received a course on
the history of social welfare policy.

An unanticipated finding was that participants who attended a generalist social work
program seemed to have a stronger commitment to social reform. Most of these participants
(four White women, one Latina, and one Haitian man) acknowledged receiving multiple courses
on political participation, the importance of social work values, and interpreting and applying the
Code of Ethics. Most engaged in politics during their personal time, their political participation
scale (see Chapter Two) scores were above the median (signifying high levels of political
participation), and two of these six people ran for elected office. Some of these findings were
supported by Miller’s (2008) work stating that social work values emphasized in social work
classrooms were related to a commitment to social justice.

The clinical social workers who participated in this study came from a variety of practice
settings working with clients as young as five years old, and those in their 70s. Expectedly,
almost all participants suggested it is unethical to integrate partisan or nonpartisan political
participation into practice with clients, supporting Rome, Hoechstetter, and Wolf-Branigin’s
(2010) findings that social workers in clinical practice were opposed to engaging politically with
their clients. Three White female participants who had run for political office were the exception, and found it both ethical and a required component of social work practice. Another interesting finding was the apparent disconnect between participants’ personal and professional political involvement. Many participants from the study seem to lack a critical consciousness or demonstrate a connection between the personal to the political (Gutierrez, 1995).

This is best exemplified by the participant who worked for a community mental health agency and no longer could find the time to protest what she perceived as an unfair contract. Earlier in the interview, the participant stated it was unethical to integrate political participation into practice, except when working with her transgender group. One of the goals of the group was for the participants to march in a pride parade as their “true” self. Consequently, members of her transgender group read in the newspaper about the protest at her agency and offered to picket with her to show solidarity, however she declined their offer, citing time constraints as a factor. She explained that she felt compelled to take on additional cases to make up for higher health insurance and no pay increase. This example represented an opportunity for the participant to demonstrate as a way to both help address her low salary and model self-advocacy and political action to her transgender group, which would have reinforced the empowerment model she utilizes in her group practice. This opportunity is tempered by the conflict inherent in this participant’s own person and environment scenario. She is a single mother and a clinical social worker, experiencing economic stressors as a result of her gender, marital status, professional paygrade, and the managed care reimbursement structure of her work setting. While it may seem that she lacks an understanding of how political and social structures affect her life and the lives of her clients, a case can also be made for her positionality impacting her in a way that is quite similar to her clients. Her primary concern is for her family's immediate well-being, and as such,
she directs her focus to the short-term solution of an increased caseload as opposed to picketing, which would address the structural cause of her financial situation on a more long-term basis.
CHAPTER 6: IMPLICATIONS

“Politics is social work with power” — U.S. Senator Barbara Mikulski, MSW

This study inquired into the phenomena of clinical social workers’ political participation. As explicated in Chapter One, a scarcity of literature exists focusing on social workers’ political participation, particularly among clinical social workers. Presently, no study to the author’s knowledge has implemented a qualitative methodology to explore how clinical social workers conceptualized political participation; the factors that influence their levels of political participation; and how political participation is integrated into social work practice. Social work scholars have thus far only used quantitative methods to measure the political participation of various groups of social workers (Ezell, 1993; Rome & Hoechstetter, 2010; Ostrander, Sandler, Nieman, & Loveland, 2016; Ritter, 2007, 2008; Wolk, 1981). Most studies have utilized varying survey questions and much of the research to date has been descriptive. This chapter elucidates this study’s implications by first presenting a brief rationale for this study. Next, the implications for practice and social work education are discussed. Then, a brief description is given of neoliberalism and its role in influencing social workers’ political participation in practice, and resultant implications for social policy. Finally, the chapter closes with implications for future research and concludes with a brief summary of the study.

Implications for Social Work

Rationale

The NASW Code of Ethics states that social work’s mission “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” (NASW,
Section 6.04 clearly states that social workers should participate in social and political action to help clients receive access to resources that meet their basic human needs (NASW, 2008). This suggests a strong ethical obligation to participate in politics, which all social workers should do in order to improve the lives of our clients. The International Federation of Social Workers’ (IFSW) (2012) proclaims that social workers are agents of change in broader society, and are charged with intervening at the intersection of individuals and the environment to ensure the principles of human rights and social justice. These actions must take place to help lift clients from the margins of society and give them full access to social, economic, and political systems.

**Theory**

The positionality of the participants in this study was crucial to understanding the many intersecting forms of oppression impacting each respondent’s lived experiences. Thus, Mullaly (1997, 2007) helped frame the reciprocal influence of the micro, meso, and macro systems impact on each participant and their many different identities, such as their race, sex, gender, and class. Further, Mullaly utilized critical and radical perspectives—such as Marxism, critical race theory, feminism, and intersectionality—to appraise their individual influences on each system (Carniol, 1995). No study to date has used this theory to frame the political participation of social workers, specifically clinical social workers.

Like the participants of this study, female clinical social workers experience systematic pressure to maintain traditional—cis-gendered—gender norms in the home (e.g., care for the children, maintain the home), which may prevent women from exercising their power through the political process and influencing broader society. Women still earn less money per hour than men, and the disparity tends to grow when age and race (e.g., younger African Americans
experience higher levels of unemployment than their white counterparts, Latino/Hispanic women earn a lower hour wage than white women) are included—as posited by the structural social work theory. In addition, this study evidenced the growing neoliberal influences on clinical social workers and their agencies to become more efficient, rely on third-party billing, and the use of more standardized and manualized treatment methods. Neoliberalism's influences have resulted in the de-professionalization, de-skilling, and de-politicization of social work practice (Butler & Pugh, 2004; Harlow, 2003; Harris, 2003) and a loss of the respondents’ social work identity; a result consistent with Moreau’s and Mullaly’s arguments. This neoliberal assault on the politically oriented engagement of clinical social workers is ironic because the profession has historically always been engaged in helping marginalized and oppressed populations through social justice and social reform; however, almost all the participants saw engaging in political participation—non-partisan or partisan—during practice as unethical and relegated it to their personal spheres, if at all. Both major political parties pursued policies which served to depoliticize social work practice (e.g., Reagan's restructuring of the federal tax code, Bush’s re-writing and expanding of Medicare, and the lack of support for a public option to the Affordable Care Act by the Democratic Party) with the Republican Party emphasizing it within their party platform, rhetoric, and more liberally in their proposed legislation (Rogowski, 2010). One example is the Reagan administration’s effort to prevent non-profits from engaging in political advocacy through the issuance of Circular A-122 (48 C.F.R. 31.701 [1984]), although it was not enacted. Further, this study considered the impact that social work education succumbed to furthering neoliberalism and how, if at all, the participants’ formal socialization process to the profession challenged the growing neoliberal systematic influences on clinical practice.
Practice

Participants’ professional socialization and formation of their professional identity seem to demonstrate an underlying disconnect between how to address the client’s mental health problems and the structural problems exacerbating their mental and physical health issues. One of the most prominent and often cited theories in the social work literature is ecological theory (Rotabi, 2007), which aligns with social work’s person-in-environment perspective. This framework serves as a holistic theoretical approach to help understand and organize information about our clients who are engaged in the broader socio-political systems, which intertwine with individuals and communities (Bronfenbrenner, 1979). Throughout the interviews performed for this study, many of the participants seemed to frame their client’s mental health issue as their primary concern, while stating that the broader social, political, and economic issues were not appropriate to address in practice unless the client raises specifically raises the issue. This appears to leave room for a fuller embrace of the person-in-environment perspective because these very socio-political structures constitute the clients’ environment as do their immediate micro and mezzo-level concerns. This presents an opportunity for social workers to more fully engage with their clients to address inequality at the structural level. Clinical social workers can encourage clients to participate in the political process on issues pertaining to them, which would serve to increase the number and level of their voices in policy conversations, thereby decreasing their marginalization.

One way to begin addressing this disconnection with clinical social workers is to create a training program that utilizes Mertz and Hansen’s (2013) structural competency approach. Metzl and Hansen (2013) define structural competency "as the trained ability to discern how a host of issues defined clinically as symptoms, attitudes, or diseases…also represent decisions about such
matters as health care and food delivery systems, zoning laws, urban and rural infrastructures” (p. 128). This approach has five intersecting skill sets: 1) recognizing how economic, physical, and socio-political structures shape clinical interactions (e.g., insurance companies dictating how long and what type of services they will cover); 2) developing clinical language to explain the impact of the social environments on one's health (e.g., the effect of poverty of physical health); 3) understanding the importance of culture for different class and ethnic groups and recognizing how structural inequalities and barriers can manifest themselves as interpersonal communication and institutional practices; 4) understanding that structures, such as laws and policies, that shape health and illness are not immutable and can be altered through structural interventions; and 5) developing structural humility in order to hear and understand the nuances in individual clients' stories (Metzl & Hansen, 2013).

This framework enables clinical social workers to look beyond treatment of intrapsychic distress (e.g., depression, anxiety, bi-polar) and encourages practitioners to include policies, institutions, cities, and neighborhoods in their understanding of what may be impacting their clients (Metzl & Hansen, 2013). The desired outcome would be for the clinical social workers to connect the clients’ personal troubles with the political sphere or a critical consciousness (Gutierrez, 1995). One way to facilitate this outcome is by increasing all social workers’ knowledge and training on political participation. This could be achieved through a partnership between NASW and CSWE to engage with state social work licensing boards to mandate that 25% of practitioners’ continuing education units be allocated to this topic. Such initiatives have been implemented for other topic areas, such as the Connecticut Chapter of NASW’s successful inclusion of two hours of mandated veteran-related training for all licensed social workers.
Education

The EPAS of the Council on Social Work Education outline social work’s important role in political advocacy and political participation. Through social work education, social work students should learn to advocate for effective policies that help lift people out of poverty and remove barriers and oppressive forces. In order to achieve this, CSWE asserts that students should engage in collaborative action within the profession and in tandem with clients to bring about effective policies if those who control the levers of power are not willing to bring about change (CSWE, 2015). In 2013, a report sponsored by ACOSA was critical of social work education’s lack of attention to the importance of macro practice (Rothman, 2013). Social workers who support the findings of this report should strongly advocate for a more defined standard in the EPAS for political content and how it must appear in the curricula. Not only should this standard explicate how the content should appear in social work coursework, but it should state concretely that social work students are required to have a micro and macro based field placement or service learning experiences. For students entering an accredited BSW program and an MSW program with a non-social work undergraduate degree, each student should be required to complete one field experience or service learning placement in a micro and macro setting. Most of the participants in this study only remembered taking a course on the history of social welfare policy, and not being exposed to any other macro oriented content or discussions in their classes or field placements. However, those who had such content in a generalist social work program or a macro-oriented specialty scored higher on the political participation scale (discussed in Chapter Three). As stated in Chapter Five, there may be various reasons why many of this study’s participants have not had macro oriented course content. Regardless of the precipitating factors, it is incumbent upon the social work profession to address
this finding because very few of the clinical social workers in this study demonstrated a critical consciousness regarding the personal and the political, resulting in low engagement in the political sphere.

In order to bring about social reform, it is critical that the academy better integrate the link between individual problems and socio-political structures into undergraduate and graduate level social work curricula. This will serve to further increase the social work profession’s awareness of the importance of political practice for social work students of all practice orientations, and promote its relevance in practice and research based literature and the academy. One way to accomplish this goal is to increase research intertwining micro and macro content, submit to high-impact publications in social work and other interdisciplinary journals (e.g., public health, political science, nursing, education)—both practice and research—and presentations at professional conferences. Another recommendation would be to turn political participation scholarship into policy statements and policy briefs for public distribution, articles for the popular media (e.g., local newspaper, Huffington Post) on the important role social work plays in bringing about social change, and create a podcast on political practice to help further disseminate this work.

**Policy**

Since the 1970’s, neoliberalism has become a prevailing economic ideology among legislators (Simmons, 2014), which has impacted social policy, social service agencies, and social work professionals. Unlike the Keynesian policies of the New Deal, neoliberalism is a contemporary version of laissez-faire economics structured around the betterment of society through the support for a market driven economy. It favors minimal government involvement in the economy, viewing the government’s sole role as being to create policy and pass legislation
that encourages profitable markets (Harvey, 2005; Mullaly, 2007). Neoliberalism has led social service agencies to implement market based ideas, such as fees for services, hiring less skilled staff, highlight the importance of productivity, and a further “commodification of interpersonal relationships” (Abramovitz, 2005, p. 43). Given social work’s function in brokering between systems of all sizes, Abramovitz (2012) cited social workers’ role in a neoliberal environment as often being to mediate between economic production and family well-being and are more frequently working in settings – knowingly or unknowingly – to further the neoliberal agenda.

Non-profit organizations and voluntary associations were instrumental in changing and impacting social policy during three pivotal periods: the Progressive Era, the Great Depression, and the 1960s. During the Progressive Era, coalitions of women’s associations acted as powerful advocates for an issue important to mothers and children, such as a minimum wage for women and mothers’ pensions (Abramovitz, 1996; Skocpol, 1992). The Charity Organization Societies and others viewed such social and legal rights as a threat to their service mission; for example, it threatened their hegemony of scientific philanthropy (Fabricant and Fisher, 2002). The Settlement House movement amassed tremendous influence on local, state, and national levels during the Progressive Era through viewing poverty as structural, engaging and collaborating with the poor, encouraging residents to exercise their citizenship rights, and offering basic education, health, and childcare services (Fabricant & Fisher, 2002; Skocpol, 1992).

Since the 1970’s, neoliberalism has become a prevailing economic framework under which legislators’ function (Simmons, 2014), which has impacted social policy, social service agencies, and social work professionals. Unlike the Keynesian policies of the New Deal, neoliberalism is a contemporary version of laissez-faire economics structured around the betterment of society through the support for a market driven economy. It favors minimal
government involvement in the economy, viewing the government’s sole role as being to create policy and pass legislation that encourages profitable markets (Harvey, 2005; Mullaly, 2007). This change was ushered in by the two terms served by President Ronald Reagan (Hasenfeld & Garrow, 2012). According to Prasad (2006), three major policies institutionalized neoliberalism: the Economic Recovery Tax Act of 1981; the deregulation of business and financial institutions; and the Omnibus Budget Reconciliation Act of 1981, which restricted eligibility for Aid to Families with Dependent Children (AFDC) program benefits and provided block grants to states. These changes increased public service agencies’ and programs’ dependence on government funding (e.g., Medicaid), creating greater competition among social service agencies (Boris et al. 2010). This has resulted in social service agencies implementing market-based ideas, such as fees for services, hiring less skilled staff, highlight the importance of productivity, and a further "commodification of interpersonal relationships" (Abramovitz, 2005, p. 43).

The privatization and devolution of public programs is a central tenet of neoliberalism, which encourages the use of contracts by local, state and federal governments to attract non-profit and for-profit organizations to social services delivery (Hasenfeld & Garrow, 2012). This is evidenced by the increasing reliance on vouchers, managed care and third-party companies—enforcement of performance-based contracts, and less use of direct grants and contracts (Smith, 2006). Presently, agencies serve as intermediaries to clients’ relationship with governmental structures who have become consumers or customers without social rights, which focuses non-profit organizations’ energies on securing contracts and private funding instead of mobilizing grassroots support (Hasenfeld & Garrow, 2012). Non-profit organization administrators’ pursuit of governmental contracts leads them to engage public officials to gain favor to receive additional resources, which diminishes the likelihood of the agency pursuing initiatives needed
for their clients (Eikenberry & Kluver, 2004; Frumkin & Andre-Clark, 2000). In addition, non-profit organizations rely on government funding and third-party companies, which are less inclined to engage in politically organizing tactics that allow marginalized and oppressed populations to engage those in power (Hasenfeld & Garrow, 2012). Given social work’s function in brokering between systems of all sizes, Abramovitz (2012) cited social workers’ role in a neoliberal environment as often being to mediate between the economic structures and family well-being, and are more frequently working in settings—knowingly or unknowingly—which further the neoliberal agenda.

Neoliberal government and agency policies were a constant theme during this study. One female participant discussed how an agency administrator was unsupportive of the clinical director’s encouragement of therapeutic social work staff to engage in political participation as it was not viewed as part of their job, with the implication being that it would detract from staff productivity. Another female participant described her clinical social work contract with a community mental health agency. She stated that the contract required her to maintain a minimum caseload, which ensured the agency received the revenue it required to operate, however, the agency failed to provide its therapeutic staff with any cost of living raises for three years, in spite of increases in health insurance premiums and deductibles over that same period. As a result, clinical social workers were increased their caseloads by five or more additional clients each month to supplement their salaries—a phenomenon that the agency did not seem to mind. A female participant working in urban agency for more than 15 years discussed how the city fully funded her agency when she first started and all social work staff worked as salaried employees, engaged in therapeutic and social change community-based services. However, as city funds were reduced, the agency redirected staff from their social change focus and switched
them to a fee for service based model, which was paid through managed care companies or
directly by clients using a sliding scale fee based on their annual income. The staff are only paid
for each therapeutic hour and not for time spent completing additional requisite paperwork or
community based activity. Finally, a male participant discussed how a managed care company
was implementing a new policy requiring a full audit of patient’s records once all authorized
mental health sessions had been utilized because the managed care company wanted to
“understand why the client still needs to see [him].”

Lawmakers’ and corporations’ continual push for greater efficiencies with a focus on
increased profits, comes at the risk of eroding the social work profession’s mandate and the
betterment of some of the most vulnerable populations. Clinical social workers need to assume a
greater role in the struggle to reverse these trends by engaging in the electoral process and
encouraging their clients to participate in changing the policies that further marginalize and
oppress them. The vulnerable populations clinical social workers serve need to understand how
their elected officials directly impact their everyday lives. Research demonstrates that
approximately 70% of a person’s health is determined by social, environmental, and behavioral
conditions and the remaining 30% is allocated to a person’s genetic code (McGinnis, Williams-
Russo, & Knickman, 2002). The United States must change our mental and physical health
model to focus on prevention, access, and improving healthcare outcomes. Currently, the profit
driven model of the United States healthcare system places more emphasis on maximizing the
return to insurance companies at the expense of the overall health and wellbeing of its patients.

As the findings from this study suggest, clinical social workers do not engage in political
activity for a variety of reasons, such as low political efficacy, gender socialization, and work-
life balance. One training option to help reverse some of these findings, is to replicate or expand
the reach of the Nancy A. Humphreys Institute for Political Social Work’s annual Campaign School, which has been in existence for over 20 years. The training prepares social workers for leadership positions in political campaigns, to run for elected office, and assume leadership positions in politically-oriented organizations. The training enables participants to develop their confidence through a fuller understanding of the electoral system, experiential workshops, and interactions with political social workers who have run for office or worked in leadership positions in a political setting. Following the training, participants were more likely to plan to be politically active in general and have increased intentions to work on campaigns, run for office, and engage with elected officials (Lane, Ostrander, & Rhodes, 2016).

For clinical social workers who are not interested in pursuing political office or working on a campaign, the Campaign School offers them increased knowledge and competence regarding electoral participation, and how to engage their clients in non-partisan political activities, such as registering to vote, identifying resources for clients to increase their own political knowledge and encourage clients to reach out to local, state and federal representatives regarding issues pertinent to them. Essentially, the Campaign School offers an opportunity to legitimize the political practice for clinical social workers as a professional mandate.

**Future Research**

This study highlights several areas where further research should be conducted. Qualitative research could be conducted to better understand how queer, people of color, geographic differences, political ideologies, and other subsets of social workers interpret political participation. Although this study seems to identify new areas of research to explore among social workers, different sub-populations may be influenced differently by broader gender socialization, thus warranting further exploratory qualitative study. One such study could
evaluate how social workers in a therapeutic setting engage with clients who discuss politics, political participation, and political opinions that differ from their own and may conflict with the NASW Code of Ethics. Another could be conducted with multiple focus groups composed of participants from the various professional roles social workers assume. This would help further understand how different facets of the profession understand political participation and if they integrate it into practice. An additional study could be conducted to assess how social workers employed in the political arena developed a political social work professional identity. This knowledge will inform the creation of more effective trainings and upon their evaluation, provide an empirical basis for the integration of related material into social work coursework.

Quantitative research could be conducted on a national random sample of clinical social workers. Presently, no such study exists. Questions that could be addressed are: how do clinical social workers feel about integrating political participation into practice?; where do clinical social workers obtain information on politics?; how much influence does a significant other have on your political knowledge?; how does work-life balance impact clinical social workers’ political participation?; how does the number of years in practice impact clinical social workers’ integration of political engagement into practice?; and how, and to what extent, does the type of practice setting impact clinical social workers’ political participation? The results of such a study would further help address the implications discussed earlier in this chapter on a broader scale. The data could be generalized and provide strong empirical evidence to help impact policies at NASW and CSWE.

Summary

This qualitative study examined the lived experiences of clinical social workers with regard to their political participation, examining how social, political, and economic forces
impacted their levels of political activity. Using a critical phenomenological methodology assisted in understanding how the concept of power influenced the broader societal forces affecting individual’s level of engagement or inclination toward the political process. This study engaged a sample of 23 clinical social workers from four of the six New England states. Through the use of multiple interviews, research notes, member checking at all stages of the study, and a robust analytical method, this study’s findings will assist in filling a void in the social work literature.

Most of the female participants of this study viewed themselves as unqualified and unknowledgeable in the political sphere, and possessing low levels of political ambition and political confidence to engage in political participation. Additionally, many of the female clinical social workers described the challenges of finding a balance between their professional careers and traditional gender-based roles. Understanding the professional socialization of the participants helped to delineate the variables influencing engagement in various forms of political participation. The participants of this study found it unethical to intertwine nonpartisan or partisan political participation into their practice and could not demonstrate how laws and policies impacted them or their clients on a daily basis. If clinical social workers don’t commit to the profession’s mandate for social justice and social change through the use of political means, then those in power will continue to implement policies that primarily and disproportionately benefit economic and social elites.
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U.S. Const. amend. XXIV. Retrieved from https://www.archives.gov/founding-docs/constitution-transcript


APPENDIX A

Verbal Screening Tool

University of Connecticut

Verbal Screening Tool

**Principal Investigator:** Louise Simmons, Ph.D.

**Student Investigator:** Jason Ostrander, MSW

**Study Title:** To Participate or Not to Participate, that is the Question: A Critical Phenomenological Study of Clinical Social Workers and their Political Participation.

1. Do you currently have a Master’s degree in social work? (MUST be YES)
   - □ No
   - □ Yes

2. Do you have two-years post-education clinical practice experience, which is considered “direct practice with individuals, couples, families, and groups with a focus on intra-personal and interpersonal problems” (Harris & White, 2013, n.p.)? (MUST be YES)
   - □ No
   - □ Yes

3. Do you provide direct clinical therapeutic services to clients with intra-personal and/or interpersonal problems? (MUST be YES)
   - □ No
   - □ Yes

3a. If yes, please tell me about your practice.

   Confirmed doing clinical practice.
   - □ No
   - □ Yes
APPENDIX B

Informed Consent Form

Information Sheet for Participation in a Research Study

UNIVERSITY OF CONNECTICUT

Principal Investigator: Louise Simmons, Ph.D.
Student Investigator: Jason Ostrander, MSW
Study Title: To Participate or Not to Participate, that is the Question: A Critical Phenomenological Study of Clinical Social Workers and their Political Participation.

Introduction

You are invited to participate in this interview because you currently have a Master’s degree in Social Work, have two years post education clinical practice experience, and provide direct clinical therapeutic services to clients. The Student Investigator is a doctoral candidate at the University of Connecticut, and is conducting this interview as part of his dissertation.

Why is this study being done?
The purpose of this research study is to explore how clinical social workers’ perceive political participation, better understand their work with clients, and explore their experiences at schools of social work.

What are the study procedures? What will I be asked to do?
If you agree to take part in this study, you will be asked to participate in an interview. The interview will take place at a time and location of mutual agreement. Each interview will last approximately 60-90 minutes. At the completion of the interview you will be asked to complete a demographic survey. The survey should not take more than 10 minutes to complete. A second interview may be requested if further exploration and explanation is required.

What are the risks or inconveniences of the study?
We believe that the risks presented to you by these interviews are minimal. The Student Investigator will focus on a range of topics, but may discuss previous experiences involving social or emotional conflict. You may choose not to answer any of the questions. A referral list of agencies that may be helpful to you will be provided, upon request. The only inconvenience is the amount of time the interviews take. Your words will be quoted directly when the findings are published and your quotes will not be tied to identifiable information. In order to protect your identity, all identifying information will be removed from all documents and you will be assigned a unique identifier. Having the demographic survey completed on an iPad further eliminates a paper trail connecting you to the study. We will do our best to protect the confidentiality of the information we gather from you but we cannot guarantee 100% confidentiality.

UCONN IRB

Page 1 of 3
What are the benefits of the study?
You may not benefit directly from participating in these interviews. It will be beneficial to the Student Investigator because it will help the interviewer complete his dissertation and may aid him in future research. This research could also benefit the social work profession and how schools of social work teach new professionals.

Will I receive payment for participation? Are there costs to participate?
There are no costs to you. For your time you will receive a $10 gift card to Dunkin Donuts or Starbucks.

How will my personal information be protected?
With your permission, the interviews will be audiotaped to obtain complete and accurate information. The Student Investigator will transcribe the tapes and all identifying information will be removed; you will be assigned a unique identifier for the study. Only the PI and Student Investigator will have access to the transcripts. The recordings will be destroyed after they have been transcribed. At the conclusion of the interview, you will be asked to complete a demographic survey, which will be administered on an iPad and your responses will be kept in a secure survey database. All electronic files (e.g., database, survey responses, etc.) containing identifiable information will be password protected. Any computer hosting such files will also have password protection to prevent access by unauthorized users. Data that will be shared with others will be coded as described above to help protect your identity. At the conclusion of this study, we will publish our findings. Information will be presented in summary format and you will not be identified in any publications or presentations. Once all the interviews have been analyzed, the key linking the participants to the numeric code will be destroyed. The de-identified interview transcriptions will be kept indefinitely.

You should also know that the UConn Institutional Review Board (IRB) and Research Compliance Services may inspect study records as part of its auditing program, but these reviews will only focus on the researchers and not on your responses or involvement. The IRB is a group of people who review research studies to protect the rights and welfare of research participants.

What happens if I am injured or sick because I took part in the study?
In the event you become sick or injured during the course of the research study, immediately notify the principal investigator or a member of the research team. If you require medical care for such sickness or injury, your care will be billed to you or to your insurance company in the same manner as your other medical needs are addressed.

If, however, you believe that your illness or injury directly resulted from the research procedures of this study, you may be eligible to file a claim with the State of Connecticut Office of Claims Commissioner. For a description of this process, contact Research Compliance Services at the University of Connecticut at 860-486-8802.
Can I stop being in the study and what are my rights?

You do not have to be in this study if you do not want to. If you agree to be in the study, but later change your mind, you may drop out at any time. There are no penalties or consequences of any kind if you decide that you do not want to participate.

Whom do I contact if I have questions about the study?

Take as long as you like before you make a decision. We will be happy to answer any question you have about this study. If you have further questions about this project or if you have a research-related problem, you may contact the principal investigator, Louise Simmons, PhD, 860-570-9181 or the Student Investigator, Jason Ostrander, 413-297-5559. If you have any questions concerning your rights as a research subject, you may contact the University of Connecticut Institutional Review Board (IRB) at 860-486-8802.
Thank you for agreeing to participate in this study. I’d like to ask you a few questions in order to learn more about you. I want to remind you that all information that you share is stored by participant ID number only, not by name, and that all data is kept confidential. I am the only person who will have a record of your ID number and this record will be kept in a locked storage cabinet and destroyed at the end of the study. If you have any questions about this survey, please do not hesitate to ask.

Section I: Your Background
Please answer the following questions about you. Please mark an X in ONE box, unless otherwise asked.

1.) How old are you? *(Please write your age on the line provided.)*

________ (Age in years)

2.) What is your gender? *(Please choose one).*

☐ Male
☐ Female
☐ Transgender
☐ Other: *Please specify:* ________________________________

3.) Are you Spanish/Hispanic or Latino?

☐ No
☐ Yes

4.) What is your race / ethnicity? *(Please choose all that apply).*

☐ Black or African American
☐ White
☐ Asian or Pacific Islander
☐ Bi or Multi-Racial
☐ American Indian or Alaska Native
☐ Some other race: _______________________________________

4a.) If you selected Bi or Multi-Racial, please tell me how you identify yourself: ___
5.) Do you consider yourself to be:

- [ ] Heterosexual or straight
- [ ] Gay or lesbian
- [ ] Bisexual
- [ ] Other: Please specify: _______________________________

6.) In what state do you reside?

- [ ] Massachusetts
- [ ] Maine
- [ ] Rhode Island
- [ ] New Hampshire
- [ ] Connecticut
- [ ] Vermont
- [ ] Other: _______________________________

7.) How would you describe the community in which you live?

- [ ] Urban/large city
- [ ] Urban/small city
- [ ] Suburban
- [ ] Rural

8.) In terms of relationship status are you currently…?

- [ ] Single (never married, not living together)
- [ ] Married (not separated)
- [ ] Living together (not married)
- [ ] Separated
- [ ] Divorced
- [ ] Widowed
- [ ] Other: Please specify: _______________________________

9.) Do you have children?

- [ ] No
- [ ] Yes

9a.) If YES, how many children currently reside in your home?

Please specify: _______
10.) Besides your children, are you the primary care giver for someone other than yourself?

☐ No
☐ Yes

11.) How much is your yearly household income?

☐ Less than $34,999
☐ $35,000 to $39,999
☐ $40,000 to $49,999
☐ $50,000 to $59,999
☐ $60,000 to $79,999
☐ $80,000 to $99,999
☐ $100,000 to $119,999
☐ $120,000 to $139,999
☐ $140,000 to $159,999
☐ $160,000 or more
☐ Don’t know

12.) Are you affiliated with a religion?

☐ No
☐ Yes

12a.) If YES, what is your religious affiliation?

☐ Evangelical Protestant
☐ Orthodox
☐ Muslim
☐ Mainline Protestant
☐ Jehovah’s Witness
☐ Buddhist
☐ Historically Black Churches
☐ Jewish
☐ Hindu
☐ Catholic
☐ Other Christian
☐ LDS/Mormon
☐ Other: Please specify: ____________________________
13.) In an average month, how many times do you attend religious services?

- [ ] 0
- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5
- [ ] 6
- [ ] Other: Please specify: ________________________

14.) When you were growing up, how often did your parent(s), guardian(s), or caregiver(s) discuss politics in your home?

- [ ] Never
- [ ] Rarely
- [ ] Sometimes
- [ ] Frequently
- [ ] Always

Section II: Political Participation

Please answer some questions about your interest in politics and public affairs, as well as your participation in a wide range of political activities. Mark an X in ONE box for each question, unless stated differently.

15.) Are you registered to vote?

- [ ] Yes
- [ ] No

15a.) If YES, with what political party are you registered?

- [ ] Republican
- [ ] Democrat
- [ ] Other: please specify: ________________________________
- [ ] Not registered with any party

15b.) On a scale from 1-5, how strongly do you identify with your political party?

- [ ] 1- not strongly
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5- very strongly
16.) On a scale from 0 (I NEVER participate in politics) to 5 (I ALWAYS participate in politics), how frequently do you participate in politics?

- 0 Never
- 1
- 2 Sometimes
- 3
- 4
- 5 Always

17.) How frequently do you participate in each of the following activities?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>I vote on Election Day.</td>
<td></td>
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<tr>
<td>I encourage others to vote on Election Day.</td>
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<tr>
<td>I share my political opinions with others.</td>
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<tr>
<td>I actively campaign for candidates of my choice.</td>
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<td>I read, listen to, or watch the news.</td>
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<tr>
<td>I know who represents me in Congress.</td>
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<tr>
<td>I follow the progress of legislation that interests me.</td>
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<tr>
<td>I discuss current policy issues with others.</td>
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<tr>
<td>I keep track of how my legislators vote on issues that interest me.</td>
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<tr>
<td>I participate in political rallies, marches, etc.</td>
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<tr>
<td>I voice my opinion on policy issues to media markets (radio, newspapers, TV, etc.)</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>I take an active role in relation to issues that affect my clients.</td>
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</tr>
<tr>
<td>I take an active role in relation to issues that affect me personally.</td>
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</tbody>
</table>
APPENDIX D

Semi-Structured Questions

1. Why did you become a social worker?

2. What type of practice do you have?

3. Where did you go to school for your Master’s degree in social work? What were the major components of your social work education?

4. What do you think are the most important aspects of your (personal or professional) identity(ies)?

5. How do you identify yourself in professional situations?

6. How would you define political participation?

7. Do you think it is ethical for social workers to participate in politics?

8. Do you integrate political participation into your practice?

9. In what ways do you think social workers can participate in politics?

10. Are you qualified and knowledgeable to run for political office? If yes, how? If no, why not?

11. Can you tell me about the first time you participated in politics?

12. Do you think the political system/government is responsive to your needs? If yes, how? If not, why not?

13. Do you think you can impact or change the political system? If yes, how?

14. Have you experienced any barriers to participating in politics?