

Critical Reflection to Identify Gaps between Espoused Theory and Theory-in-Use

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Critical reflection (CR) is a process by which one may identify the assumptions governing one's actions, question them, and develop alternative behaviors. This article presents two cases that demonstrate the use of CR to raise social workers' awareness of gaps between what Schon and Argyris term social workers' "espoused theories" and the "theories-in-use" that actually guide social workers' practice and to help them to develop more effective models of practice based on the understanding they gain. With this, the cases also show that CR can be a painful, even wrenching, process, in which practitioners confront previously unacknowledged qualities or tendencies in themselves that can evoke strong feelings.

KEY WORDS: *critical reflection; decision making; dilemmas; practitioners*

Social work is a profession strongly anchored in Western humanistic values. These values emphasize the worth, autonomy, and right to self-determination of the clients (Banks, 1995, 2004; Clark, 2006; Pierson, 2002; Reamer, 2006). Social work education devotes considerable energy to socializing professionals in these values. National and international codes of ethics articulate and reinforce them (Hugman, 2008). Yet it is widely recognized that personal values, preferences, attitudes, and beliefs, which may or may not differ from the professional values, affect social workers' practice and decisions (Higgs & Titchen, 2001; Park, 2005; Yan, 2008). Scholars have repeatedly expressed concern that the intrusion of these personal elements into social work practice may lead to bias and errors in judgment and decisions that impair the effectiveness of interventions (Arad-Davidzon & Benbenishty, 2008; Gambrell, 2005). In consequence, writers have emphasized the need for social workers to be aware of the values they bring to their work and the ways these values influence it (Baldwin, 2004; Yan & Wong, 2005).

The call for awareness rests in the understanding that people are often unaware of the values that underlie and guide their behaviors. This understanding was elaborated by Argyris and Schon (1974) in their concept of two theories. The authors maintained that people's deliberated actions are not happenstance, but guided by the

theories of action they hold. The authors named and discussed two types of theory: espoused theory and theory-in-use. *Espoused theory* refers to the worldview and values that people believe guide their behaviors. *Theory-in-use* refers to the worldview and values reflected in the behaviors that actually drive their actions. As the authors pointed out, few people are aware of their theories-in-use or that these are not always the same as the theories they espouse. One example they gave is of a business consultant whose espoused theory was cooperative problem solving with his clients. A recording of an encounter with a client, however, revealed him promoting his own point of view and dismissing the client's, suggesting that his theory-in-use was promoting his own ideas. Argyris and Schon (1974) further pointed out that if people are unaware of the theories-in-use that drive their actions, they cannot effectively manage their behaviors, which may, as a result, have unintended—and undesired—consequences.

Social workers who find that their strategies are ineffective or result in undesirable outcomes often change their strategies; Argyris (1974) pointed out that most people do the same but argued that changes that are restricted to strategies and do not include the values that drive them are rarely effective. According to Argyris (1974), the most effective way of making informed decisions is to examine and change one's governing values.

To this end, learning is required. One must learn what values and beliefs actually guide one's actions (theories-in-use) and how they differ from the values one espouses (espoused theories). Such learning may be accomplished in various ways. Among them are professional supervision and detailed self-documentation and analysis of one's actions. Another way is through critical reflection (CR) (Fook & Gardner, 2007). This article demonstrates, through the presentation of two cases, the use of CR to raise social workers' awareness of their theories-in-use and to help them to formulate more effective intervention strategies based on what they learned from their reflection.

CR AND CRITICAL INCIDENTS

CR is a process by which one may identify the assumptions governing one's actions, question them, and develop alternative ways of acting (Cranton, 1996). It creates new understandings by making conscious the values and assumptions behind one's actions (Brookfield, 1995; Ecclestone, 1996; Mackintosh, 1998). As discussed in this article, it can be used as a way of identifying the disparities between a professional's theories-in-use and espoused theories. Over the past two decades, CR has been increasingly promoted across the helping professions as a way of fostering active exploration of practice issues and improved practice skills (Gould & Baldwin, 2004; Redmond, 2004; White, Fook, & Gardner, 2006), particularly given the degree of uncertainty and complexity of social work interventions (Taylor & White, 2000). Fook and Askeland's (2006) analysis of evaluation data from CR workshops suggested that the process encourages awareness of hidden assumptions; recognition of how one's thinking may be restrictive and thus limit one's options for practice; and, in consequence, changed professional practice and identity.

CR training for students and professionals is often based on analysis of a "critical incident" (Fook & Gardner, 2007; Francis, 1997). The critical incident (CI) technique was first introduced as a research tool by Flanagan (1954), who valued it as a systematic way of collecting and codifying human activity. In the process of CR used here, people are asked to bring an experience that they view as significant to them. In the first stage of the process, the assumptions and values that drive

a person's actions, feelings, and thinking are identified. Often at this stage, the gaps between the person's espoused theory and theory-in-use emerge. The second stage is devoted to reconstruction—that is, the exploration of alternative behaviors that are congruent with the person's preferred values and assumptions. This might entail changing the espoused theory to fit the theory-in-use, or vice versa.

Although CR can be done alone or in pairs (for example, in supervision), it is recommended as a group process. A group has the advantages of creating a sense of shared experiences and learning, providing a variety of inputs and perspectives, and allowing people to learn from their similar and different experiences and reactions. The one caveat is that it is essential that the group provide a supportive environment in which participants feel able to be honest about feelings, beliefs, assumptions, and actions they may find embarrassing or regret.

THE COURSE AND ASSIGNMENT

The cases described here derive from a classroom assignment in CR for social workers enrolled in the MSW program at a social work school in Israel. In keeping with the program's admission requirements, all the students were licensed social workers with at least two years of field experience.

The course in CR was mandatory in the first year of the two-year MSW program. It was designed to enable the participants to do their jobs more effectively under the difficult conditions that characterize social work practice by helping them to better understand how they operate and the assumptions, values, and beliefs that guide their professional conduct.

CIs from Practice

At the beginning of the course, the students were asked to describe in writing a *CI* (Fook & Gardner, 2007), defined as any incident or event in their practice that was meaningful to them. The students were told that the incident need not be an emergency or crisis, but could be an ordinary, everyday event that was meaningful to them and that they would like to better understand. The incident, they were told, could be meaningful for any number of reasons—for example, that it was a turning point in their practice, helped

them understand something new, frustrated or upset them, and so on. The only limitations were that the incident be one that the students believed they could learn from and that they felt comfortable sharing with the class.

The instructions on writing up the incident were that the account should include the following: a brief, focused, and factual account of the event itself; a brief description of the context and background of the event; an account of the writer's own behaviors, feelings, and thoughts; and an explanation of why the event was meaningful to the writer. Each student submitted one CI. Of the approximately 200 events that were submitted, about two-thirds involved conflicts with clients or their families; the other third involved conflicts with colleagues or the agency. Almost all of them were highly upsetting to the writer.

The first four sessions of the course were devoted to the presentation of the theory and practice of CR, including reflective practice, reflexivity, and critical social theory as well as the concepts espoused theory and theory-in-use. The students were then divided into small groups, and each group selected for analysis a CI written by one of its members.

Over the semester, the selected events were analyzed in both the small-group format and by the class as a whole. In addition to being encouraged to explore the events from multiple perspectives (for example, power, gender, latent motives), the participants were instructed to identify the values and assumptions underlying their actions (theory-in-use) and how well these accorded with their espoused theories.

Toward the end of the course, each small group was required to present a paper demonstrating the understandings group members' had gained. The instructions were as follows:

- Identify the assumptions, values, and beliefs (for example, espoused theory) that guided the actions of the writer of the incident analyzed, in comparison with the theory that is reflected in the writer's behavior in the event (for example, theory-in-use).
- Identify the action strategies the writer used in the incident.
- Evaluate the effectiveness of the strategies in attaining the desired aims.

- Based on the understanding obtained from the analysis, propose a new model of practice that uses more effective action strategies.

THE CASES

The two cases presented here are based on the earlier described assignment. They were chosen out of 60 CRs obtained from six classes over a three-year period. They were chosen for their fullness, clarity, and depth of analysis and for the difference in the central problem that emerged in each. The wide gap found between espoused theory and theory-in-use in both cases, however, is typical of all the analyzed incidents.

Before preparing the cases for this article, Riki Savaya obtained the two students' permission to use their CIs and the written analyses for the article. The first draft of the manuscript was given to the students for feedback. Both reported that the processes described accurately reflected their experience. Neither offered any objections. Rather, they emphasized what they had learned through the CR and the professional growth that ensued from it. To maintain their privacy, pseudonyms were used and identifying information omitted or changed.

Each case consists of a brief description of the CI, an account of the espoused theory and theory-in-use identified through the CR on the CI, and the alternative model of intervention the students developed. Each also includes what the student whose CI was analyzed said she learned from the process.

Case 1

The Event. Maya was employed as a social worker at a residential facility for children at risk. As part of her duties, she participated in discussions on parents' requests to take their children home. Her described incident concerned a mother whose four children—ages seven, nine, 11, and 12—were in the facility for the third year. Maya was the case manager. The mother had been twice divorced from the children's father. Over the years, she had frequently changed her partners, place of residence, and employment. At the time of the incident, she was living with both the children's father and her new husband. Her request was to take her two youngest children—who, she felt, needed her most—home.

Seven professionals participated in the formal discussion on the request, five employees of the residential facility and the other two from the municipal social welfare bureau. During the discussion, the mother cried bitterly and begged the social workers to return at least her youngest son. She promised to take good care of him and to compensate him for all the years she was not with him. Although the professionals had tears in their eyes, they informed her that they would not recommend returning her children and that they expected her to understand their decision and to relay it to her children.

Although Maya believed there were good grounds for returning the youngest child home, she tried to persuade the mother that the boy's best interests would be served by his remaining in the facility. She left the meeting highly upset by her behavior. She believed that the decision had actually been made before the meeting; that she had joined the others in imposing their views on the mother; and that they had all behaved in a patronizing, elitist manner. Especially upsetting was that this was not the first time she had found herself torn between a parent and her colleagues. The discussion made her feel that even though social work is a profession that holds understanding, empathy, and tolerance as core values, it treats its clients in a dismissive, patronizing, and arrogant way.

CR on the Incident. Espoused theory: Beginning the CR, Maya presented a list of her espoused values. These values pertained to the client, the agency, the decision-making process, and the social worker's role in society. With respect to the client, her espoused values were client centeredness, advocacy, and nonjudgmental partnership. As she put it:

- The needs of the client should be placed above the needs of the worker and the agency.
- The social worker's task is to protect the interests of the client, to help clients obtain their rights, and to ensure their voices are heard.
- Belief in the clients' abilities and respect for the client as she or he is.
- Partnership and avoidance of paternalism and judgmentalism.

Vis-à-vis the agency, the espoused values she named were "nonconformist thinking and adherence to personal and professional values" and "standing up for one's principles and expressing one's views to one's colleagues and agency."

Regarding the decision-making process, Maya stated that she believed that she should "adopt a systemic approach, viewing the clients within the entire context in which they live," "use evidence-based knowledge rather than intuition," and "treat mothers and fathers equally." She saw herself as a social worker who would make her decisions professionally, on the basis of her professional judgment.

With respect to the social worker's role in society, Maya wrote that she believed that the social worker should be "an agent of change."

Theory-in-use: Analyzing the incident, Maya and her group identified a theory-in-use that was the opposite in every respect of her espoused theory. Its basic components were conformity and self-protection. As the group came to understand, Maya's orientation and loyalty were to the organization, not the client, and her behavior conformist. She refrained from expressing her opinion where it was contrary to that of her colleagues and exhibited none of the assertiveness that she espoused as a value.

They realized that by keeping silent, Maya failed to protect her client's interests, did not help her client to make her voice heard, and did not partner with her client. Through her silence and passivity, Maya took part in the organizational process that deprived the mother of a genuine forum for her request, that sidelined the mother's emotions, and that treated the mother judgmentally and paternalistically. Through the same silence and passivity, Maya brought neither a systemic perspective nor evidence-based knowledge to bear on the case. She, in fact, forfeited any input into the decision-making process and any possibility of being an agent of change.

In addition to observing the aforementioned disparities between Maya's espoused values and theory-in-use, the group identified the unequal power relations between the mother and the social workers. They highlighted the fact that the decision had already been taken before the meeting with the mother and suggested that the ease with which it was taken against the mother's will reflected the prevailing, albeit unstated,

conception that out-of-home placement is the best solution for children at risk. They pointed out that the mother arrived at the meeting as a lone woman, without the father, and had to face a group of women, mothers like herself, who were presumably successful, where she could be viewed as having failed. Both factors, they pointed out, disempowered the mother.

Maya came to understand not only the disparities in her two theories, but also that the conformity that was at the heart of her theory-in-use stemmed from the great difficulty she experienced in expressing her opinions when they differed from those of the majority of her colleagues.

Alternative Model of Practice. The alternative model of practice that Maya and the group developed was created to help social workers who, like Maya, find it difficult to voice and stand up for their views when they are in a minority. Its aim was to enable such social workers to make an impact on the decisions taken in their places of work despite their apprehensions. Because the difficulty these social workers' experience is most acute during formal discussion of a decision, the model concentrates on the phases that precede and follow such discussion.

The prediscussion phase consists of preparation within the service and preparation with the client. Preparation within the service entails four activities:

1. Initiating a brainstorming session among the service staff, without external participants, to discuss their views and propose a variety of possible responses. Such a session may allow free expression of ideas, as no outsiders are present to inhibit discussion, no decision must be made, and brainstorming encourages uninhibited thinking.
2. Consulting with the service head or supervisor to reduce the unknowns that crop up at the formal discussion and, if possible, to coordinate positions.
3. Forming a coalition, by identifying potential supporters and opponents and trying to mobilize the supporters to persuade the opponents.
4. Writing a memo to colleagues presenting service staff's own position before the formal discussion.

Preparation with the client entails two activities:

1. Preparing the client for the upcoming discussion by sketching the possible scenarios and by having him or her role-play his or her responses to undesired scenarios.
2. Helping the client to write a letter to the discussants presenting his or her position. Such a letter enables a client to articulate his or her position before the formal discussion in a calm, unthreatening atmosphere. It may also prepare the client to voice and support his or her position during the discussion. This is especially recommended for clients who may be intimidated and lose their voice in a formal forum or who may be so overcome by their feelings they have an outburst of anger that makes them seem out of control and alienates the discussants.

The prediscussion preparations have a number of benefits for the social worker. They may reduce the uncertainty that awaits the social worker who comes into the formal meeting without knowing his or her colleagues' positions. They may enable the social worker to better meet their objections and to present his or her own views in an organized, controlled way. The preparations may reduce the social worker's anxiety about expressing a minority view and better enable him or her to suggest temporary solutions that will satisfy both parties. For example, in this case, the group suggested that the children could be allowed home one night a week, which would meet the mother's request in part while enabling the professional staff to observe the mother's parental competence and consider a longer term return.

The postdiscussion phase consists of three activities:

1. Debriefing the client, especially where a decision is unfavorable, to help him or her to take in the decision and to express his or her thoughts and feelings about the process and outcomes.
2. Bringing the client's thoughts and feelings to the staff.
3. If the social worker disagrees with the decision, writing a memo to the discussants summarizing the discussion and stating his

or her own and the client's thoughts and feelings on the matter. Such a memo can be used as background material for a staff discussion, and may also influence the next decision on the client.

Case 2

The Event. Irit was employed as a social worker in a school for students with serious cognitive impairment. The event concerned a former student with whom Irit had had an excellent relationship for five years and who was still under her care after she graduated. When the girl, at age 18, found herself pregnant and uncertain who the father was, she asked Irit for help with terminating the pregnancy.

Irit was eager to assist. As Irit presented it, the girl came from a dysfunctional home, which provided no model of good parenting or any likelihood of help in raising the child. The girl's father had been an alcoholic and violent and died when she was five. Her mother was preoccupied and barely took care of her own children. Her older brother was a criminal, and her younger brother had severe emotional and behavioral problems. The girl herself suffered from emotional and functioning problems. As Irit saw it, she was not capable of raising a child. Irit's view was supported by the agency, which similarly regarded the termination of the pregnancy as the desired outcome of the intervention.

On the day of the incident, Irit was supposed to accompany the girl to the local hospital to discuss the abortion with the committee in charge of authorizing it. The girl came to her office and informed her that she didn't feel like meeting the committee and had made plans to go shopping with a friend instead. She had already missed two previous appointments. If she missed this one, her pregnancy would be too advanced to terminate.

Faced with the girl's refusal, Irit felt enormous emotional pressure: "I felt that everything was falling apart. It was clear to me that the girl was incapable of being a mother at this point in her life, if ever. I felt a strong moral obligation to prevent the birth of a baby that would be born to a terrible life, like she and her brothers had."

Thus driven, Irit made repeated efforts to convince the girl to keep the appointment. She pointed out the tremendous responsibility of

raising a child and told her that she would not be able to continue sleeping till noon, as she did, or hanging out with her friends all hours of the night. She told the girl that she would have to work to support the child; asked her where she and the child would live; and emphasized that she did not know who the father was, that she would have no one to help her, and that she would ruin her life. As the girl rejected one argument after the other with the simple statement that she did not feel like appearing before the committee, Irit became increasingly angry. Finally, she threatened to report the girl to the welfare services so that they could monitor her behavior and even take the baby from her. The girl became enraged; called Irit and all other social workers "whores" who pretended to help but did not; and stormed out of the room, slamming the door.

CR on the Incident. Espoused values: Irit's espoused values, as she related them to the group, were highly idealistic. She said that she had chosen to be a social worker for ideological reasons connected with her humanistic worldview and out of a desire to contribute to reducing social gaps and helping everyone, whoever they were, to actualize their rights, which, for her, included the rights to respect and to equal opportunity, and the rights of every woman to be a mother and of every child to unconditional love. She said that, moved by the social consciousness and activism on which she had been raised, she worked tirelessly to help her clients attain those rights.

At the same time, Irit also declared an additional espoused value: excellence in motherhood. To be a mother, Irit believed, one had to have maturity, responsibility, and unconditional giving as well as a measure of emotional support and financial security. When these were absent, she believed, there was no parental competence, and an abortion was a legitimate and proper act.

Theory-in-use: The group identified a theory-in-use featuring three values. The first was the same excellence in motherhood that Irit openly espoused. Irit recognized her emphasis on excellence as a personal value on which she had been raised. But her beliefs about who was and who wasn't competent to be a mother, and her conviction that her troubled adolescent client was not, were essentially shared by the agency, which encouraged her to pursue the abortion. The

second value was success, another personal value that Irit attributed to her upbringing. Irit was driven by the need to succeed, which, in this case, she defined as helping her client to terminate her pregnancy. She directed all her efforts to that end, and when it became clear that the client would not have an abortion, she felt that she had failed. The third value was paternalism. Irit was convinced that she knew what was best for the girl and how to lead her to improve her life. She was so intent on "success" and so convinced that an abortion was right for her client that she allowed the client no space to express the ambivalence and anxieties that the prospect of an abortion could have been expected to evoke.

In the course of the reflection, Irit came to realize both the contradiction within her espoused values and the disparities between her espoused values and those that actually guided her actions. She realized that her strongly held conviction that only those who met certain standards were competent to be mothers conflicted with her declared belief that every woman had the right to be a mother. She realized that her paternalism did not accord with her declared belief that clients were able and entitled to make their own decisions and lead their own lives. She realized that she did not act with humanism toward her young client, but was judgmental and unempathic.

She also came to realize two other outcomes of her theory-in-use. One was that, with her beliefs about excellence in motherhood, she saw in her mind's eye only the presumed fate of the unborn child and not the ambivalence and fear of the pregnant girl. In effect, she related to the child, rather than the girl, as her client. The other was that her need for success was such that when the girl would not have an abortion, she felt utterly helpless and enraged.

Irit described the CR as a difficult experience that shed light on dark corners within herself—her driving need for success, her judgmentalness, and her paternalism and lack of empathy—which she had chosen not to look at until then. In particular, she emphasized that the process made her aware of how much her behavior, in many areas of her life, was driven by the need to succeed and how enraged she became when success eluded her.

It was much more difficult for this group than the previous one to devise an alternative model of

practice. They expressed skepticism that social workers on their own can be aware of the values and emotions that drive them. The enormous emotional demands of the work, the burnout that many of them experience, and the absence of organizational support and adequate supervision to help them cope with the heavy emotional burden attendant on the difficult work leave little room for social workers to look into themselves and monitor their conduct. They also pointed out that the paternalism that characterized Irit's approach is endemic in the profession.

In the end, to meet the requirements of the exercise, they offered two suggestions aimed at facilitating more empathic, more containing, and less one-sided and coercive intervention. The first was regular supervision that would enable social workers to express and examine their values and emotions and to deal with the many dimensions of complex cases. The second was an "intersubjective model" of practice, characterized by reciprocity and partnership between worker and client and by the worker's listening to what the client is saying at a deeper level. By definition, this model would emphasize not only the exploration of a range of possible outcomes, but also the process by which an outcome is decided.

However, both alternatives would have been challenging to achieve in the current context in Israel. Quality supervision may not be available: It is not in a worker's power to bring it into an agency, and social workers' low salaries cannot be expected to cover private supervision. However, the experience in the group might have encouraged the development of peer supervision or workers meeting in pairs for mutual CR (Fook & Gardner, 2007). The intersubjective model implies the group's recognition of the importance of affirming the values of the profession and the desire to move toward them. However, it embodies the same espoused values that Irit, like many workers, have trouble acting on in the first place. It may be that work needs to be done at an agency level to achieve such change.

DISCUSSION

The cases presented in this article demonstrate the potential of CR to raise workers' awareness of the gap between their espoused theories and their theories-in-use and, on the basis of their newly gained awareness, to develop alternative strategies

and approaches. As Argyris and Schon (1974) pointed out, this awareness is important because of the undesired consequences that may ensue from acting on a theory-in-use of which one is unaware. The strong feelings of failure, helplessness, and frustration that the social workers in both cases experienced as a result of their actions, driven by their underlying theories-in-use, are testimony to the validity of Argyris and Schon's claims, as are the distress, anger, and helplessness of their clients. The ability of CR to foster the recognition of these underlying tensions and the development of alternative strategies is obviously important to the promotion of more effective practice.

That said, neither of these aims of CR is easy to attain. The present cases show that CR can be a painful, wrenching process in which practitioners confront previously unacknowledged qualities or tendencies in themselves (for example, conformity, paternalism) that they regard as undesirable and that can evoke strong feelings of guilt, shame, and inadequacy. Not all people who engage in CR are capable of coping with the process. Not all are open to looking into themselves, ready to hear what others observe about their behavior, or willing and able to acknowledge and confront what they view as undesirable qualities in themselves. These obstacles are especially likely to arise in a class setting, where participation is mandatory, but they can arise in voluntary settings as well. In both cases presented here, the social workers had the maturity and emotional security to confront their theories-in-use and the gap between those and their espoused theories. They also had the benefit of sympathetic and supportive groups. Both these conditions—emotional maturity and security on the part of the person doing the reflection and supportiveness of the group—are essential to the process.

These conditions do not always prevail. In our experience of teaching this subject, we have had students and professionals who clammed up, rejected all observations that they regarded as negative, fortified themselves in their espoused theories, and spent their energies defending their conduct, even though it brought neither them nor their clients satisfactory results. We have also seen groups who were unsympathetic and judgmental. A vicious circle can develop in which a practitioner's defensiveness spurs a group to be

judgmental or a group's lack of sympathy brings out the practitioner's defensiveness, and each can then reinforce and intensify the other's unproductive behavior. This suggests the need for careful modeling of the process; ideally, there would be sufficient staffing to be able to provide skilled and experienced facilitation for groups learning the process.

Even when the necessary conditions do prevail and enable identification of the gaps between the two theories, it may still be extremely difficult to develop a workable alternative. Although in both groups presented earlier, the CR raised awareness of the gaps, only one group was able to formulate a workable alternative model of practice. It cannot be ruled out that this difference stemmed from a difference in the intellectual capacity and creative thinking of the two groups. The more likely reason, we suggest, is the problem the alternative model had to address.

Coincidentally, the two CIs both involved a similar issue: the complex, emotionally charged, and extremely high-stakes dilemma in social work practice of the good of the parent versus the good of the child. The cases differed, however, in how the practitioners experienced this dilemma and, thus, in what was required of the alternative model of practice.

In the first case, the worker believed in the mother's parental capacity, whereas her colleagues did not. There was thus no conflict in her mind between the good of the mother and the good of the child. Her problem was that her theory-in-use—which prioritized the value of conformity—had kept her from adequately coping with her colleagues' opposing views. The alternative model the group developed was designed to enable her to act on her espoused theory, on the basis of the values of the profession, despite her tendency to conformity. It did this by providing strategies to help her assert herself in face of her colleagues' opposing opinions, which her conformity had made difficult.

In the second case, in which the worker did not believe that her teenage client would be able to care for her child-to-be, two different types of gaps emerged. One was between the worker's espoused client centeredness (for example, the right of clients to respect, equal opportunity, and motherhood) and her implicit values of success and paternalism, which drove her to behave in a judgmental, unempathic manner. This is the type

of gap that CR was designed to uncover and address. The other type was between two espoused values: client centeredness and what the worker termed "excellence in motherhood," which can also be conceptualized as the rights or well-being of the child. The two types of gaps are fundamentally different.

Without saying so explicitly, Argyris and Schon (1974) strongly implied that espoused values or theories are preferable to the implicit values or theories of which we are often unaware—that the espoused values are the right values and the implicit values the wrong ones. The alternative model of practice that is supposed to be developed from the CR is meant to replace, circumvent, or mitigate the influence of the inferior implicit values. The clash of two espoused values, in contrast, is a clash of equal goods. One cannot honestly assert that the right of a troubled teenage client to actualize her desire for motherhood is to be preferred to the right of the child-to-be to unconditional love and competent parenting. Such a clash poses a moral and ethical dilemma, which may not be in the power of an alternative model of practice to resolve.

The models of practice the group proposed in the second case focused solely on enabling the practitioner to meet the client's needs by removing or controlling what they saw as the impediments to practice within the practitioner: her belief in excellence, her need for success, and her resulting paternalism. At a later date, after she had been able to absorb and internalize what she had learned about herself in the CR process, the practitioner was able to apply the understandings she had attained. As she informed us when we asked her permission to publish her case, she continued to work on herself. She consciously chose to keep in check the value she places on excellence and success and to carefully monitor her behavior toward her clients for signs of paternalism. At no point in the process, however, did the group address the morality of the issue. They prioritized the needs of the client not only over the practitioner's personal values, but also over the rights of the unborn child and the obligation of social workers to protect the weak and the helpless. The difficulty that the group had in formulating an alternative model of practice on the basis of CR suggests that the inward-looking direction of CR needs

to be balanced or accompanied by an outward-looking perspective as well.

In this connection, we would like to note the observations of Clark (2006) that the social work code sometimes places social workers in a position where they feel compelled to act in ways at odds not only with their personal values, but with "the regular perceptions of reasonable people" (Gibson, 2003, p. 23). Social work, Clark (2006) argued,

is about helping people in particular personal and social and cultural circumstance[s] ... not an exercise in the articulation of rights and duties in the abstract. Social workers and their agencies cannot in practice escape setting standards of the good or adequate life, even if they wished to do so. (p. 79)

Failure to fulfill the proper moral expectations, Clark (2006) added, "amounts to derelict or unethical practice" (p. 80).

The two cases presented earlier illustrate the potential of CR along with some of the difficulties. How representative they are of the process remains to be determined through further research. That said, they point to the ability and importance of CR in raising practitioners' awareness of what in themselves may undermine the effectiveness of their work.

We thus strongly recommend that CR become an ongoing part of the supervision and support that agencies provide for their practitioners: with a safe place for social workers to look into themselves, a skilled and sensitive group facilitator, and emotional support during and after the reflection to help practitioners deal with the difficulty of the process. In view of the lag that can occur between the attainment of awareness and the development of an alternative model of practice, time should be allowed for workers to integrate their learning before they implement it in their practice. It may also help to space the two stages (Fook & Gardner, 2007). Moreover, it should be noted that the emphasis the practitioner in the second case placed on excellence is what made the underlying moral conflict in the situation so strong for her. Thus, any alternative model of practice that is developed to deal with cases involving a genuine moral dilemma—whose resolution has

fateful consequences for all concerned, not only the client—must acknowledge this dilemma and not make it solely the practitioner's personal problem to solve. **SW**

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