

Ethical Aspects of Work of Knowledge Workers in Social Services

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Abstract—Knowledge workers in social services represent specific group of knowledge workers. As other knowledge workers, they possess and work with high portion of tacit knowledge, and they are difficult to manage. Up to this, they work in responsible positions, on shifts, under the stress. Important aspect of their work is ethics. The article creates a theoretical and methodical background for future research on ethical aspects of work of knowledge workers in social services in Slovak and Czech Republics. This research starts in fall 2013.

Keywords—knowledge; knowledge work; ethics; ethics of care; ethical behaviour.

I. INTRODUCTION

Knowledge workers represent growing group of employees. Major tool and resource of knowledge worker is his knowledge. Knowledge is due to its tacit dimension of intangible character. As such it is invisible and cannot be separated from its owner. Intangibility of tacit knowledge complicates management of knowledge workers. When using their knowledge for work, they use it deeply in their brain. Manager cannot intervene into this process as he does not see the process. Even knowledge worker may not be aware of what they do, how they do it and why they do it in certain way. Long term and short term result of work of knowledge worker may differ.

Knowledge workers in social services represent specific group of knowledge workers. Social services as understood in the Slovak and Czech Republics (central Europe) cover very sensitive areas of public services as homes for elderly people, children's homes, social services administration, prisons, homes for people with special mental and health requirements. Knowledge workers who work in such organizations differ not only in their specialization but also in the level of official professional education. Some of them are university graduates (physicians, managers, some of nurses), some achieved secondary education (nurses, nutrition assistances), and many are without professional education in the field (or passed only basic courses). Profession in the social work cannot be done without proper knowledge, especially the tacit dimension. This qualifies majority of people working in the social services to the group of knowledge workers.

Ethics and ethical behavior is an important aspect of work of knowledge workers in social services. Ethical problems and unethical behaviors are always sensitively understood by all groups of involved stakeholders; direct clients, the society,

families, public administration and are given a strong publicity. The article provides the theoretical and methodical background of the research on ethical aspects of work of knowledge workers in social services that starts in Slovak and Czech Republics in fall 2013.

II. KNOWLEDGE WORKERS AND KNOWLEDGE WORK

A. Knowledge Workers

The literature on knowledge workers offers three basic approaches to this term [1]; conceptual approaches, data (industry) driven approaches, and job content approaches. Conceptual approaches explain the term knowledge worker from the point of view of employees' importance for an organization, and his style of work with knowledge [2], J. Vinson [3], G.S. Lowe [4], T. Davenport [5], C. Reboul [6] can be named as authors who suppose this approach. Data driven approaches see knowledge workers as all those who work in particular organizations or in particular sectors or institutions. Representatives of this approach are for example K. E. Sveiby [7], M. Alvesson [8]. Job content approaches see knowledge workers as people who do a certain type of job. This approach can be identified in the works of A. Toffler [9], R. Reich [10], A. Kidd [11], G. E. Nomikos [12].

They are many specifics common to knowledge workers of all different groups and professions. As J. Vinson [3] summarizes it – knowledge worker is a person who uses his brain more than his hands in his job and whose ability to learn is critical to what he does, even if he works with his hands. Said in different words – knowledge worker works with knowledge. Knowledge consists of two basic dimensions, explicit and tacit one. Explicit knowledge is easy to formalize, e.g. to rewrite by some code – the language, formula, notes, picture. Tacit knowledge is highly personal, linked to the activity and partly or fully subconscious. It is dubious if we can separate it from its human owner [13]. Due to its tacit dimension, knowledge as a whole is of intangible character which complicates knowledge work and management of knowledge workers.

B. Knowledge Work

The intangible character of knowledge leads to specifics of knowledge work. As it happens in the heads of knowledge workers where it cannot be observed and controlled, it is not linear. Brain cannot be ordered to work and crucial ideas may

not be invented during working hours. The results of knowledge work may differ from the short and long term perspective, which causes problems with standards, measurement and evaluation of knowledge workers. Knowledge work usually requires and is done by knowledge workers with a good education, practical training or experience in a certain field. They often know about their work much more than their managers and can and often want to do their decisions independently.

C. *Knowledge Workers in Social Services*

People who work in social services represent specific group of knowledge workers. They are not a homogenous group even if they work in the same type of organization (homes for elderly people, children’s homes, social services administration, prisons, and homes for people with special mental and health requirements). Many of them possess highly specialized knowledge in different fields. Some of them have high degree of formal university education (physicians, managers, social workers, some of nurses), some achieved secondary education (nurses, nutrition assistances), many are without professional education in the field but passed some courses, some are without formal education. They work on highly monitored and responsible positions, on shifts, under the stress. On top of this, the sector of social services suffers with low salaries and low social recognition in our countries.

III. ETHICS, ETHICAL BEHAVIOUR, ETHICS OF CARE

A. *Ethics*

The field of ethics raises two basic questions – what one ought to do why one should do what one ought to do. [14] Answering the first question, we define what ethics is and what is not, what are ethical standards for individual societies, professions, individuals. The second question concerns the motivation to behave ethically. The word ethics is generated from Greek ethos which means character a custom or a normal state of human being. Generally said, ethics can be defined as the rules of conduct recognized in respect to a particular class of human actions or a particular group, culture, etc. [15] We also talk about applied ethics, e.g. ethics of different professions and life situations and ethics of an individual [15]. E.g. ethics reflects standpoints and values of societies or individuals that created it or support it.

Normative ethics refers to well-founded ethical standards of right and wrong that prescribe what humans ought to do, usually in terms of rights, obligations, benefits to society, fairness, or specific virtues. Ethical standards also include those that enjoin virtues of honesty, compassion, and loyalty. And, ethical standards include standards relating to rights, such as the right to life, the right to freedom from injury, and the right to privacy. Such standards are adequate standards of ethics because they are supported by consistent and well-founded reasons [16].

Ethical standards in our region are based on Christian ethics. The distinctive of Christianity is that it deals with principles (i.e., the "law" of love) as the foundation of individual commands. Though the operation of love is further defined in

Christian writings (namely the Bible), even here there can be areas of disagreement in the actual outworkings. Christian and other ethical standards in our region build together the feeling of "oughtness", feeling of what produces the best for society [14].

B. *Ethical Behaviour*

The second questions raise by disputes on ethics is why should one do what one ought [14]. The reason, why people follow or not follow ethical rules depend on various internal and external factors – personality, personal values, situation. Kohlberg gives six stages of ethical behavior based on reasons [17]:

TABLE I. REASONS FOR ETHICAL BEHAVIOUR

Stage		Reason for Ethical Behaviour
Preconventional	1	Obedience to authority
	2	Nice behavior in exchange for future favors
Conventional	3	Live up to others' expectations
	4	Follow rules to maintain social order
Postconventional	5	Adhere to social contract when it is valid
	6	Personal moral system based on abstract principles

[17]

Motivation to follow given ethical standards also depends on deep personal intrinsic motivators. Above all available motivation concepts, two seem to fit the topic of ethical aspects of work of knowledge workers in social services. The first is the concept of Enneagram. Though the literature speculates about its origin this complex concept of evaluation of human personality provides powerful description of nine personality types, including advantages and limits they bring to their holders. Enneagram also discusses important intrinsic motivators of individual types [18]. The concept is dynamic, helps to work with knowledge workers on individual basis but it is too complicated to be explained in few words.

Second concept is D. McClelland’s 3 – need theory. McClelland works with three basic groups of human needs – affiliation, power and achievement. The individual behaves and gets motivated based on his personal group of motivation. The leading motivator also supports or inhibits ethical behavior of individual in certain situations [19].

C. *Ethics of Care*

Ethics of care is the field developed as a response to our rational world that understands care as a set of rules, norms and principles and devaluates its human side. The ethics of care assumes relationships which are bound by mutual interdependence, and its practice involves the values of attentiveness, responsiveness, competence, and responsibility, negotiation and mutual recognition [20].

Tronto [21] writes that an important way of rethinking the nature of ‘professionalism’ in social work, is offered by engaging with debates associated with the ethics of care. This

is an important development as clearly the notion of care lies at the heart of social work. More broadly the ethics of care recognize that 'care work' is usually devalued as a social activity or practice, and is also devalued conceptually through its assumed connection with privacy, with emotion and with the 'needy'. Because our society treats public accomplishment, rationality, and autonomy as worthy qualities, care is devalued as it embodies their opposites [21].

This marginalization and devaluing of care is in part due to the dominance of Universalist conception of ethics which attempts to construct a totality of rules, norms and principles which are to be equally applicable to everyone, and which should be recognizable and acceptable to every rational thinking person. Neutrality, impartiality, rationality, abstraction and objectivity are seen as the most important requirements; morality is seen to entail the finding and respecting of rules [22].

The ethics of care has a radically different view of human nature and thus a very different view of the objectives of moral deliberation. In contrast to an atomistic view of human nature, the ethics of care posits the image of a 'relational self', a moral agent who is embedded in concrete relationships with others and who acquires a moral identity through interactive patterns of behavior, perceptions and interpretations [23].

J. Tronto [24] defines four ethical elements of care, attentiveness, responsibility, competence and responsiveness:

- Attentiveness is recognition of others' needs in order to respond to them. It is a crucial requirement in social services. The question which arises is the distinction between ignorance and inattentiveness.
- Responsibility is inevitable part of care. In order to care, we take it upon ourselves. The problem associated with this second ethical element of responsibility is the question of obligation. Obligation is often if not already tied to pre-established societal and cultural norms and roles. Tronto makes the effort to differentiate the terms "responsibility" and "obligation" with regards to the ethic of care. Responsibility is ambiguous, whereas obligation refers to situations where action or reaction is due, such as the case of a legal contract.
- Competence is necessary to provide any care. One cannot simply acknowledge the need to care, accept the responsibility, but do not follow through with enough adequacy - as such action would result in the need of care not being met. E.g. the one who provides care must have necessary knowledge and must be able to use it.
- Responsiveness means the "responsiveness of the care receiver to the care". By Tronto responsiveness signals are an important moral problem within care: by its nature, care is concerned with conditions of vulnerability and inequality. She further argues responsiveness does not equal reciprocity. Rather, it is another method to understand vulnerability and inequality by understanding what has been expressed

by those in the vulnerable position, as opposed to re-imagining oneself in a similar situation [24].

IV. THE RESEARCH

The group of researchers from the Slovak and Czech Republic starts the research on ethical aspects of work of knowledge workers in social services. The objective of the research is to identify and describe the ethical dimension of work and management of knowledge workers in social services. The research is supposed to bring new knowledge to the field of work and management of knowledge workers in social services. As standards of ethical behavior in social service in our countries are a bit fuzzy at the moment, the research is supposed to identify at least the most important of them. The research will also result in practical recommendation to organizations working in this field.

The research will be done by questionnaires and structured interviews. Questionnaires will include both questions based on the Likert scale and open question that will give our respondents chance to share their ideas with us. In our opinion, ethical aspects of work in social services must be researched from three dimensions; the dimension of the client (his family), the dimension of organization providing social service, and the dimension of the knowledge worker who works for such organization. Understanding of what is ethic and what is ethical may differ in individual dimensions. That is why we decided to address all three involved dimensions by our research [18].

V. CONCLUSIONS AND EXPECTATIONS

They are few reasons, why we decided for this research. First, topic of knowledge workers is still full of white areas. Basic researches in how knowledge workers work with knowledge, how they can be motivated or demotivated have been made but it is still very interesting and challenging topic. Second reason is the sensitivity of chosen sector. Social services represent the field where highly qualified knowledge workers work in physically and mentally demanding environment. Their work means long shifts, low salaries, low social recognition, lot of misunderstanding, conflicts with clients, etc. On the top of this they must and are supposed to behave ethically. But there are no ethical standards and guidelines for many of these professions. Based on results of the research we would like to identify the basic ethical standards and develop the model of ethical behavior of the knowledge worker in the social services.

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