

# Guidelines for Ethical Practice 2005





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## **Acknowledgements**

The Canadian Association of Social Workers (CASW) acknowledges with thanks the National Association of Social Workers (NASW) for permission to use sections of the copyrighted NASW 1999 *Code of Ethics* in the development of the CASW 2005 *Code of Ethics* and *Guidelines for Ethical Practice*.

The CASW also acknowledges that other codes of ethics and resources were used in the development of this *Code* and *Guidelines for Ethical Practice*, in particular, the *Code of Ethics* of the Australian Association of Social Workers (AASW). These resources can be found in the “Reference” section of each document.

## **Guidelines for Ethical Practice**

These guidelines serve as a companion document to the *CASW Code of Ethics* and provide guidance on ethical practice by applying values and principles in the *Code* to common areas of social work practice. While detailed, these guidelines for ethical practice are not intended to be exhaustive, or entirely prescriptive, but rather are intended to provide social workers with greater clarity on how to interpret and apply the ethical values and principles in the *Code*.

The extent to which each guideline is enforceable is a matter of professional judgement. Social workers are encouraged to consult their relevant provincial/territorial regulatory body or professional association for more specific guidance with respect to the application of these ethical guidelines in their own jurisdiction.

## **Core Social Work Values and Principles**

Social workers uphold the following core values of the profession as outlined below. For a more detailed description of these values and principles please see the *CASW Code of Ethics* (2005). While all of these values and principles inform social work practice, to facilitate practical application a cross-reference is provided below between values from the *Code* and values from sections in the *Guidelines to Ethical Practice*. The reader is cautioned that this is not an exhaustive cross-reference and is meant only to enhance reader familiarity. The reader may also use the “Index” at the back of this document to help locate relevant sections of the *Guidelines to Ethical Practice*.

### ***Value 1: Respect for Inherent Dignity and Worth of Persons***

See Section 1, “Ethical Responsibilities to Clients.” See also Sections 5.3 and 6.

### ***Value 2: Pursuit of Social Justice***

See Section 8, “Ethical Responsibilities to Society.” See also, Sections 1.4, 1.6, 4.1.3 and 4.2.

### ***Value 3: Service to Humanity***

See Section 2, “Ethical Responsibilities in Professional Relationships.” See also Sections 3.3, 5.2, 6.4 and 8.



#### ***Value 4: Integrity of Professional Practice***

See Section 2, “Ethical Responsibilities in Professional Relationships;” Section 3, “Ethical Responsibilities to Colleagues;” Section 4, “Ethical Responsibilities to the Workplace;” and Section 5, “Ethical Responsibilities in Private Practice.” See also Sections 1.1 and 7.4.

#### ***Value 5: Confidentiality in Professional Practice***

See Section 1.5, 1.4, 6.3 and 7.3.2.

#### ***Value 6: Competence in Professional Practice***

See Section 6, “Ethical Responsibilities in Research” and Section 7, “Ethical Responsibilities to the Profession.” See also Sections 3.2.1, 3.2.3, 3.4.1, 3.5.1, 3.5.2 and 8.2.5.

### ***1.0 Ethical Responsibilities to Clients***

#### **1.1 Priority of Clients’ Interests**

- 1.1.1** Social workers maintain the best interests of clients as a priority, with due regard to the respective interests of others.
- 1.1.2** Social workers do not discriminate against any person on the basis of age, abilities, ethnic background, gender, language, marital status, national ancestry, political affiliation, race, religion, sexual orientation or socio-economic status.
- 1.1.3** Social workers collaborate with other professionals and service providers in the interests of clients with the client’s knowledge and consent. Social workers recognize the right of client determination in this regard and include clients (or legally mandated client representatives when clients are not capable of giving consent) in such consultations.
- 1.1.4** Social workers limit their involvement in the personal affairs of clients to matters related to service being provided.
- 1.1.5** In exceptional circumstances, the priority of clients' interests may be outweighed by the interests of others, or by legal requirements and conditions. In such situations clients are made aware of the obligations the social worker faces with respect to the interests of others (see section 1.5), unless such disclosure could result in harm to others.

**1.1.6** Social workers seek to safeguard the rights and interests of clients who have limited or impaired decision-making capacity when acting on their behalf, and/or when collaborating with others who are acting for the client (see section 1.3).

## **1.2 Demonstrate Cultural Awareness and Sensitivity**

**1.2.1** Social workers strive to understand culture and its function in human behaviour and society, recognizing the strengths that exist in all cultures.

**1.2.2** Social workers acknowledge the diversity within and among individuals, communities and cultures.

**1.2.3** Social workers acknowledge and respect the impact that their own heritage, values, beliefs and preferences can have on their practice and on clients whose background and values may be different from their own.

**1.2.4** Social workers seek a working knowledge and understanding of clients' racial and cultural affiliations, identities, values, beliefs and customs.

**1.2.5** Where possible, social workers provide or secure social work services in the language chosen by the client. If using an interpreter, when possible, social workers preferentially secure an independent and qualified professional interpreter.

## **1.3 Promote Client Self-Determination and Informed Consent**

**1.3.1** Social workers promote the self-determination and autonomy of clients, actively encouraging them to make informed decisions on their own behalf.

**1.3.2** Social workers evaluate a client's capacity to give informed consent as early in the relationship as possible.

**1.3.3** Social workers who have children as clients determine the child's capacity to consent and explain to the child (where appropriate), and to the child's parents/guardians (where appropriate) the nature of the social worker's relationship to the child and others involved in the child's care (see section 1.5.5 regarding confidentiality).

**1.3.4** Social workers, at the earliest opportunity, discuss with clients their rights and responsibilities and provide them with honest and accurate information regarding the following:

- the nature of the social work service being offered;
- the recording of information and who will have access to such information;
- the purpose, nature, extent and known implications of the options open to them;
- the potential risks and benefits of proposed social work interventions;
- their right to obtain a second opinion or to refuse or cease service (recognizing the limitations that apply when working with involuntary clients);
- the client's right to view professional records and to seek avenues of complaint; and
- the limitations on professional confidentiality (see section 1.5 regarding confidentiality).

**1.3.5** Social workers provide services to clients only on valid informed consent or when required to by legislation or court-ordered (see section 1.4 regarding involuntary clients).

**1.3.6** Social workers obtain clients' informed consent before audio taping or video taping clients or permitting observation of services to clients by a third party.

#### **1.4 Responsibilities to Involuntary Clients and Clients Not Capable of Consent**

**1.4.1** Social workers recognize that in some cases their ability to promote self-determination is limited because clients may not be capable of making their own decisions, are involuntary or because clients' actions pose a serious threat to themselves or others.

**1.4.2** Social workers endeavour to minimize the use of compulsion. Any action that violates or diminishes the civil or legal rights of clients is taken only after careful evaluation of the situation (see section 1.6 regarding protection of vulnerable members of society).

**1.4.3** When a social worker is court-ordered or agrees to conduct a legally-mandated assessment, the social worker's primary obligation is to the judge or designate. The social worker, however, continues to have professional obligations toward the person being

assessed with respect to dignity, openness regarding limits to confidentiality and professional competence.

- 1.4.4** In all cases where clients' right to self-determination is limited by duty of care (e.g., client intent to self-harm), the law (e.g., child abuse), or court order, social workers assist clients to negotiate and attain as much self-determination as possible. In particular, involuntary clients are made aware of any limitations that apply to their right to refuse services and are advised how information will be shared with other parties.
- 1.4.5** Social workers, wherever possible or warranted, notify clients regarding decisions made about them, except where there is evidence that this information may bring about, or exacerbate, serious harm to individuals or the public.
- 1.4.6** In instances when clients lack the capacity to provide informed consent, social workers protect clients' interests by advocating that their interests are represented by an appropriate third party, such as a substitute decision-maker.

## **1.5 Protect Privacy and Confidentiality**

Social workers respect clients' right to privacy. Social workers do not solicit private information from clients unless it is required to provide services or to conduct social work research. Once information is shared or observed in a professional context, standards of confidentiality apply. Social workers protect clients' identity and only disclose confidential information to other parties (including family members) with the informed consent of clients or the clients' legally authorized representatives, or when required by law or court order. This obligation continues indefinitely after the social worker has ceased contact with the client. The general expectation that social workers will keep information confidential does not apply when disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client or others (see section 1.6 regarding protection of vulnerable members of society). In all instances, social workers disclose the least amount of confidential information necessary to achieve the desired purpose.

- 1.5.1** Social workers discuss with clients the nature of confidentiality and limitations of clients' right to confidentiality at the earliest opportunity in their relationship. Social workers review with clients when disclosure of confidential information may be legally or ethically required. Further discussion of confidentiality may be needed throughout the course of the relationship.
- 1.5.2** Social workers ascertain and take into account the manner in which individual clients wish confidentiality to apply within their cultural context.
- 1.5.3** Social workers inform clients, to the extent possible, about the disclosure of confidential information and its potential consequences before the disclosure is made. This applies in all circumstances of disclosure, except when, in the professional judgement of the social worker, sharing this information with the client may bring about, or exacerbate, serious harm to individuals or the public.
- 1.5.4** When social workers provide services to families, couples, or groups, social workers seek agreement among the parties involved concerning each individual's right to confidentiality and the obligation to preserve the confidentiality of information shared by others. Social workers inform participants in family, couples, or group counselling that social workers cannot guarantee that all participants will honour such agreements.
- 1.5.5** When social workers provide services to children, they outline for the child and the child's parents (where appropriate) their practices with respect to confidentiality and children. Social workers may wish to reserve the right to disclose some information provided by a young child to parents when such disclosure is in the best interest of the child. This should be declared prior to the first session with a child (see section 1.3.3. regarding consent and capacity).
- 1.5.6** Social workers take care to not discuss confidential information in public or semi-public areas such as hallways, waiting rooms, elevators, and restaurants.
- 1.5.7** Social workers take precautions to ensure and maintain the confidentiality of information transmitted to other parties through the use of computers, electronic mail, facsimile machines, telephone answering machines and other electronic technology. Social workers inform clients of the limits to confidentiality that may apply to these forms of communication.

- 1.5.8** Social workers protect the confidentiality of clients' written and electronic records. Social workers take reasonable steps to ensure that clients' records are stored in a secure location and that clients' records are not available to others who are not authorized to have access (see section 1.6 regarding protection of vulnerable members of society).
- 1.5.9** Social workers do not disclose identifying information when discussing clients for teaching or training purposes, unless the client has consented to such disclosure.
- 1.5.10** Social workers do not disclose identifying information when discussing clients with consultants unless the client has provided informed consent or if there is a compelling need for such disclosure. If the agency practices and policies involve routine consultations with a supervisor or professional team, social workers make clients aware of these practices as a limitation to confidentiality.
- 1.5.11** Social workers protect the confidentiality of deceased clients consistent with the preceding responsibilities.
- 1.5.12** Social workers take reasonable precautions to protect client confidentiality in the event of the social worker's termination of practice, incapacity, or death.
- 1.5.13** Social workers take appropriate steps to address a breach of confidentiality should it occur, with due care to the values and principles of the *Code*, the standards of their employer and relevant regulatory body.

## **1.6 Protection of Vulnerable Members of Society**

(See sections 1.3 on informed consent; 1.5 on confidentiality.)

- 1.6.1** Social workers who have reason to believe a child is being harmed and is in need of protection are obligated, consistent with their provincial/territorial legislation, to report their concerns to the proper authorities.
- 1.6.2** Social workers who have reason to believe that a client intends to harm another person are obligated to inform both the person who may be at risk (if possible) as well as the police.
- 1.6.3** Social workers who have reason to believe that a client intends to harm him/herself are expected to exercise professional judgement regarding their need to take action consistent with their

provincial/territorial legislation, standards of practice and workplace policies. Social workers may in this instance take action to prevent client self-harm without the informed consent of the client. In deciding whether to break confidentiality, social workers are guided by the imminence of self-harm, the presence of a mental health condition and prevailing professional standards and practices.

- 1.6.4** Social workers who have reason to believe that an adult client is being abused take action consistent with their provincial/territorial legislation. Only a minority of jurisdictions in Canada have mandatory reporting of abuse of adults.

## **1.7 Maintenance and Handling of Client Records**

Social workers maintain one written record of professional interventions and opinions, with due care to the obligations and standards of their employer and relevant regulatory body. Social workers document information impartially and accurately and with an appreciation that the record may be revealed to clients or disclosed during court proceedings. Social workers are encouraged to take care to

- report only essential and relevant details
- refrain from using emotive or derogatory language
- acknowledge the basis of professional opinions
- protect clients' privacy and that of others involved.

- 1.7.1** Social workers do not state a professional opinion unless it can be supported by their own assessment or by the documented assessment of another professional.

- 1.7.2** Where records are shared across professions or agencies, information is recorded only to the degree that it addresses clients' needs and meets the requirements of an employer or professional standards of practice.

- 1.7.3** Before using clients' records for any purpose beyond professional services, for example education, social workers obtain the informed consent of clients.

- 1.7.4** In some circumstances, access to client records may be officially authorized or required by statute. Where consent of clients is not required, social workers attempt to notify clients that such access has been granted, if such notification does not involve a risk to others.

- 1.7.5 Social workers ensure that clients have reasonable access to official social work records concerning them. However, if there are compelling professional, ethical or legal reasons for refusing access, social workers advise clients of their right to request a review of the decision through organizational or legal channels, e.g., *Access to Information Act* (1983).
- 1.7.6 Social workers take due care to protect the confidences of others when providing clients with access to records. This may involve masking third party information in the record.
- 1.7.7 If clients are not satisfied with their records, social workers advise them regarding complaint mechanisms.
- 1.7.8 Social workers protect clients' records, store them securely and retain them for any required statutory period.
- 1.7.9 Social workers transfer or dispose of clients' records in a manner that protects clients' confidentiality and is consistent with provincial/territorial statutes governing records and social work regulation. Social workers also ensure that mechanical or electronic records are properly transferred or disposed of.

## **1.8 Practices for Termination or Interruption of Services**

- 1.8.1 Social workers renegotiate or terminate professional services when these services are no longer required or no longer meet the needs of clients.
- 1.8.2 Social workers respect the right of voluntary clients to discontinue service, engage another practitioner or seek a second opinion.
- 1.8.3 Whether the decision to renegotiate or terminate is that of the client or the social worker, social workers (where appropriate) initiate a discussion with the client to appreciate, and if possible, address any difficulties or misunderstandings that may have occurred. If the client desires other professional services, the social worker may assist in referral.
- 1.8.4 Social workers discuss client's needs, options and preferences before continuing or discontinuing services, or offering to seek transfer or referral.
- 1.8.5 Social workers at the earliest opportunity inform clients of any factor, condition or pressure that affects their ability to practice adequately and competently.



- 1.8.6** When obliged to interrupt or terminate a professional relationship, social workers advise clients regarding the discontinuation of service and if possible, ensure their referral to another professional.

## ***2.0 Ethical Responsibilities in Professional Relationships***

It is the responsibility of the social worker to establish the tenor of their professional relationship with clients and others, and to ensure that the relationship serves the needs of clients, and others to whom there is a professional duty, over the needs of the social worker. In establishing a professional relationship the social worker takes into account relevant contextual issues, such as age, culture and gender of the client, and ensures the dignity, individuality and rights of the person and vulnerable members of society are protected.

### **2.1 Appropriate Professional Boundaries**

- 2.1.1** Social workers maintain appropriate professional boundaries throughout the course of the professional relationship and after the professional relationship.

### **2.2 No Exploitation for Personal or Professional Gain**

- 2.2.1** Social workers do not exploit professional relationships for personal benefit, gain or gratification.
- 2.2.2** Social workers do not take unfair advantage of any professional relationship or exploit others to further their personal, religious, political or business interests.

### **2.3 Declare Conflicts of Interest**

Social workers avoid conflicts of interest that interfere with the exercise of professional discretion and impartial judgement. Social workers inform clients when a real or potential conflict of interest arises, and take reasonable steps to resolve the issue in a manner that makes the clients' interests primary. In some cases, protecting clients' interests may require termination of the professional relationship with proper referral of the client to another professional.

- 2.3.1** When social workers provide services to two or more people who have a relationship with each other (e.g., couples, family members), social workers clarify with all parties which individuals

will be considered clients and the nature of the professional relationship with other involved parties.

**2.3.2** Social workers who anticipate a conflict of interest among the individuals receiving services, or who anticipate having to perform a difficult role, clarify with clients their role and responsibilities. (For example, when a social worker is asked to testify in a child custody dispute or divorce proceedings involving clients).

**2.3.3** Social workers consider carefully the potential for professional conflicts of interest where close personal relationships exist or where social, business or sexual relationships with colleagues are contemplated or exist.

## **2.4 Dual and Multiple Relationships**

Dual or multiple relationships occur when social workers relate to clients in more than one relationship, whether professional, social or business. Dual or multiple relationships can occur simultaneously or consecutively. While having contact with clients in different life situations is not inherently harmful, it is the responsibility of the social worker to evaluate the nature of the various contacts to determine whether the social worker is in a position of power and/or authority that may unduly and/or negatively affect the decisions and actions of their client. (See section 3.2.3 regarding supervisees, and section 3.3.9 regarding students.)

**2.4.1** Social workers take care to evaluate the nature of dual or multiple relationships to ensure that the needs and welfare of their clients are protected.

## **2.5 Avoid Physical Contact with Clients**

**2.5.1** Social workers avoid engaging in physical contact with clients when there is a possibility of harm to the client as a result of the contact. Social workers who engage in appropriate physical contact with clients are responsible for setting clear, appropriate and culturally sensitive boundaries to govern such physical contact.

## **2.6 No Romantic or Sexual Relationships with Clients**

**2.6.1** Social workers do not engage in romantic relationships, sexual activities or sexual contact with clients, even if such contact is sought by clients.

**2.6.2** Social workers who have provided psychotherapy or in-depth counselling do not engage in romantic relationships, sexual activities or sexual contact with former clients. It is the responsibility of the social worker to evaluate the nature of the professional relationship they had with a client and to determine whether the social worker is in a position of power and/or authority that may unduly and/or negatively affect the decisions and actions of their former client.

**2.6.3** Social workers do not engage in a romantic relationship, sexual activities or sexual contact with social work students whom they are supervising or teaching. (See Section 3.5 Responsibilities to Students.)

## **2.7 No Sexual Harassment**

Sexual harassment refers to unwelcome sexual comments or lewd statements, unwelcome sexual advances, unwelcome requests for sexual favours or other unwelcome conduct of a sexual nature in circumstances where a reasonable person could anticipate that the person harassed would be offended, humiliated or intimidated.

**2.7.1** Social workers do not sexually harass any person.

## **3.0 *Ethical Responsibilities to Colleagues***

### **3.1 Respect**

Social workers relate to both social work colleagues and colleagues from other disciplines with respect, integrity and courtesy and seek to understand differences in viewpoints and practice.

### **3.2 Collaboration and Consultation**

When collaborating with other professionals, social workers utilize the expertise of other disciplines for the benefit of their clients. Social workers participate in and contribute to decisions that affect the well-being of clients by drawing on the knowledge, values and experiences of the social work profession.

- 3.2.1** Social workers co-operate with other disciplines to promote and expand ideas, knowledge, theory and skills, experience and opportunities that improve professional expertise and service provision.
- 3.2.2** Social workers seek the advice and counsel of colleagues whenever such consultation is in the best interests of clients.
- 3.2.3** Social workers keep themselves informed about colleagues' areas of expertise and competencies. Social workers only consult colleagues who have, in the judgement of the social worker, knowledge, expertise and competence related to the subject of the consultation.
- 3.2.4** Social workers take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed.
- 3.2.5** Social workers honestly acknowledge the work and the contributions made by others.

### **3.3 Management of Disputes**

Social workers remain open to constructive comment on their practice or behaviour. Social workers base criticism of colleagues' practice or behaviour on defensible arguments and concern, and deal with differences in ways that uphold the principles of the *Code of Ethics*, the *Guidelines for Ethical Practice* and the honour of the social work profession.

- 3.3.1** Social workers who have ethical concerns about the actions of a colleague attempt to resolve the disagreement through appropriate channels established by their organization. If the disagreement cannot be resolved, social workers pursue other avenues to address their concerns consistent with client well-being, ethical principles and obligations outlined by their regulatory body.

### **3.4 Responsibilities in Supervision and Consultation**

In addition to the general provisions of the *Code*, social workers in supervisory or consultation roles are guided by the following specific ethical responsibilities.

- 3.4.1** Social workers who have the necessary knowledge and skill to supervise or consult do so only within their areas of knowledge and competence.

- 3.4.2** Social workers do not engage in any dual or multiple relationships with supervisees when there is a risk of exploitation of, or potential harm to the supervisee. If questioned, it is the responsibility of the supervisor to demonstrate that any dual or multiple relationship is not exploitative or harmful to the supervisee. (See section 2.4 regarding dual and multiple relationships.)
- 3.4.3** Social workers evaluate supervisees' performance in a manner that is fair and respectful and consistent with the expectations of the place of employment.

### **3.5 Responsibilities to Students**

In addition to the general provisions of the *Code*, social worker educators and field instructors who supervise students are guided by the following specific ethical responsibilities.

- 3.5.1** Social workers provide instruction only within their areas of knowledge and competence.
- 3.5.2** Social workers endeavour to provide instruction based on the most current information and knowledge available in the profession.
- 3.5.3** Social workers foster in social work students' knowledge and understanding of the social work profession, the *Code of Ethics* and other appropriate sources of ethical practices.
- 3.5.4** Social workers instruct students to inform clients of their student status.
- 3.5.5** Social workers inform students of their ethical responsibilities to agencies, supervisors and clients.
- 3.5.6** Social workers adhere to the principles of privacy and confidentiality in the supervisory relationship, acknowledging with students any limitations early in the professional relationship.
- 3.5.7** Social workers recognize that their role in supervising students is intended to be educational and work-focused. In the event that a student requests or requires therapy, the instructor refers the student to another competent practitioner.
- 3.5.8** Social workers evaluate a student's performance in a manner that is fair and respectful and consistent with the expectations of the student's educational institution.

- 3.5.9** Social workers do not engage in any dual or multiple relationships with students in which there is a risk of exploitation or potential harm to the student. Social work educators and field instructors are responsible for setting clear, appropriate and culturally sensitive boundaries. (See section 2.4 regarding dual and multiple relationships.)

## **4.0 *Ethical Responsibilities to the Workplace***

### **4.1 Professional Practice**

- 4.1.1** Social workers acknowledge and strive to carry out the stated aims and objectives of their employing organization, agency or service contractor, consistent with the requirements of ethical practice.
- 4.1.2** Social workers work toward the best possible standards of service provision and are accountable for their practice.
- 4.1.3** Social workers use the organization's resources honestly and only for their intended purpose.
- 4.1.4** Social workers appropriately challenge and work to improve policies, procedures, practices and service provisions that
- are not in the best interests of clients;
  - are inequitable;
  - are in any way oppressive, disempowering or culturally inappropriate; and
  - demonstrate discrimination.
- 4.1.5** When policies or procedures of employing bodies contravene professional standards, social workers endeavour to effect change through consultation using appropriate and established organizational channels.
- 4.1.6** Social workers take all reasonable steps to ensure that employers are aware of their professional ethical obligations and advocate for conditions and policies that reflect ethical professional practices.
- 4.1.7** Social workers take all reasonable steps to uphold their ethical values, principles and responsibilities even though employers' policies or official orders may not be compatible with its provisions.

## **4.2 Labour-Management Disputes**

- 4.2.1** Social workers may engage in organized action, including the formation of and participation in labour unions, to improve services to clients and professional wages and working conditions.
- 4.2.2** The actions of social workers who are involved in labour-management disputes, job actions or labour strikes are guided by the profession's values and principles. Reasonable differences of opinion exist among social workers concerning their primary obligation as professionals during an actual or threatened labour strike or job action. Social workers carefully examine relevant issues and their possible impact on clients before deciding on a course of action.

## **4.3 Responsibilities of Managers**

In addition to the general provisions of the *Code of Ethics and Guidelines for Ethical Practice*, social workers in management or similar administrative positions are guided by the following specific ethical responsibilities.

- 4.3.1** Social workers acquaint organizational administrators with the ethical responsibilities of social workers. Social workers encourage employers to eliminate workplace factors that prohibit or obstruct adherence ethical practice.
- 4.3.2** Social workers strive to promote effective teamwork and communication and an efficient and accountable social work service.
- 4.3.3** Social workers strive to obtain and maintain adequate staff levels and acceptable working conditions.
- 4.3.4** Social workers strive to facilitate access to appropriate professional consultation or supervision for professional social work practice.
- 4.3.5** Social workers strive to facilitate access for staff under their direction to ongoing training and professional education, and advocate for adequate resources to meet staff development needs.
- 4.3.6** Social workers provide or arrange for appropriate debriefing and professional support for staff, especially when they experience difficult or traumatic circumstances.

## **5.0 Ethical Responsibilities in Private Practice**

In addition to the general provisions of the *Code of Ethics* and *Guidelines for Ethical Practice*, social workers in private practice are guided by the following specific ethical responsibilities.

### **5.1 Insurance Requirements**

**5.1.1** Social workers maintain adequate malpractice, defamation and liability insurance.

### **5.2 Avoid and Declare Conflicts of Interest**

(See also section 2.3 regarding conflicts of interest.)

**5.2.1** Social workers do not solicit clients for their private practice from their colleagues or their place of work, unless there is a request for social workers to do so. (For example, in hard to serve areas, employers may need employees who also have a private practice to provide follow-up services).

**5.2.2** Subject to 5.2.1, social workers may accept clients from their workplace when the workplace does not provide a similar service or in accordance with established workplace guidelines regarding such referrals.

### **5.3 Responsible Fee Practices**

**5.3.1** Social workers who enter into a fee for services contract with a client:

- Disclose at the outset of the relationship, the fee schedule for social work services including their expectations and practices with respect to cancellations and unpaid bills.
- Only charge a fee that was disclosed to and agreed upon by the client.
- Charge only for the reasonable hours of client services, research, consultation and administrative work on behalf of a given client.



- Avoid accepting goods or services from clients as payment for professional services. Bartering arrangements, particularly involving services, create the potential for conflicts of interest, exploitation and inappropriate boundaries in social workers' relationships with clients.
- Social workers may participate in bartering when it can be demonstrated that such arrangements are an accepted practice for professionals in the local community, considered to be essential for the provision of services, negotiated without coercion, and entered into for the client's benefit and with the client's informed consent. Social workers who accept goods or services from clients as payment for professional services assume the full burden of demonstrating that this arrangement will not be detrimental to the client and the profession.

**5.3.2** Social workers may charge differential fees for services when such a difference in fee is for the benefit of the client and the fee is not discriminatory.

**5.3.3** Social workers may charge a rate of interest on delinquent accounts as is allowed by law. When such interest is being charged, social workers state the rate of interest on all invoices or bills.

**5.3.4** Social workers may pursue civil remedies to ensure payment for services to a client, where the social worker has advised the client of this possibility at the outset of the contract. (See section 1.5 regarding confidentiality.)

## **6.0 *Ethical Responsibilities in Research***

In addition to the general provisions of the *Code of Ethics* and *Guidelines for Ethical Practice*, social workers engaged in research are guided by the following ethical responsibilities.

### **6.1 Responsible Research Practices**

**6.1.1** Social workers educate themselves, their students and their colleagues about responsible research practices.

**6.1.2** Social workers observe the conventions of ethical scholarly inquiry when engaged in study and research. Social workers utilize only appropriately qualified personnel (or provide adequate training) to carry out research, paying particular attention to qualifications required in conducting specialized techniques.

## **6.2 Minimize Risks**

**6.2.1** Social workers place the interests of research participants above the social worker's personal interests or the interests of the research project.

**6.2.2** Social workers consider carefully the possible consequences for individuals and society before participating in, or engaging in, proposed research and also when publishing research results.

**6.2.3** Social workers submit research proposals to an appropriate independent scientific and ethical review prior to implementation of the research.

**6.2.4** Social workers strive to protect research participants from physical, mental or emotional discomfort, distress, harm or deprivation.

**6.2.5** Social workers take appropriate steps to ensure that research participants have access to appropriate supportive services.

**6.2.6** Social workers ensure that due care has been taken to protect the privacy and dignity of research participants.

## **6.3 Informed Consent, Anonymity and Confidentiality**

Social workers obtain informed consent to take part in research from either participants or their legally authorized representatives. In addition, social workers offer children and others whose ability to provide consent is compromised for any reason, the opportunity to express their assent or objection to research procedures and give their views due regard.

**6.3.1** Social workers ensure that consent is given voluntarily, without coercion or inferred disadvantage for refusal to participate. Participants are informed that they may withdraw from a study at any time without compromising any professional service being offered in the research project or future access to social work services.

- 6.3.2** Social workers ensure confidentiality of research participants' identity and discuss them only in limited circumstances for professional purposes. It is recommended that any identifying information obtained from or about participants during the research process is treated as confidential and the identity of participants separated from data that is stored, for example, through the use of identification numbers for surveys or similar questionnaires, and pseudonyms in transcripts of qualitative interviews.
- 6.3.3** Social workers ensure the anonymity of research participants is maintained in subsequent reports about the research.
- 6.3.4** Social workers store research material securely and for the required period as indicated by relevant research ethics guidelines.

#### **6.4 Avoid Deception**

- 6.4.1** Social workers generally avoid the use of deception in research because of its negative implications for the public trust in the profession.
- 6.4.2** Social workers only design or conduct research that involves deception or waiver of consent, such as certain forms of naturalistic observation and archival research, when third party review of the research has found it to be justified because of its anticipated scientific, educational, or practice value and when equally effective alternative procedures that do not involve deception or waiver of consent are not feasible.

#### **6.5 Accuracy of Report of Research Findings**

- 6.5.1** Social workers report research results accurately and objectively, acknowledging the contributions of others, and respecting copyright law. In research and scholarly endeavours, credit is taken only for work actually performed.
- 6.5.2** Where feasible, social workers inform research participants or their legally authorized representatives of research results that are relevant to them.
- 6.5.3** Where feasible, social workers bring research results that indicate or demonstrate social inequalities or injustices to the attention of the relevant bodies.

## **7.0 Ethical Responsibilities to the Profession**

### **7.1 Maintain and Enhance Reputation of Profession**

- 7.1.1** Social workers promote excellence in the social work profession. They engage in discussion about and constructive criticism of, the profession, its theories, methods and practices.
- 7.1.2** Social workers uphold the dignity and integrity of the profession and inform their practice from a recognized social work knowledge base.
- 7.1.3** Social workers cite an educational degree only after it has been conferred by the educational institution.
- 7.1.4** Social workers do not claim formal social work education in an area of expertise or training solely by attending a lecture, demonstration, conference, workshop or similar teaching presentation.
- 7.1.5** Social workers uphold provincial and territorial regulations for continuing professional education, where such regulations exist.
- 7.1.6** Social workers do not make false, misleading or exaggerated claims of efficacy regarding past or anticipated achievements regarding their professional services.
- 7.1.7** Social workers strive to promote the profession of social work, its processes and outcomes and defend the profession against unjust criticism.
- 7.1.8** Social workers distinguish between actions and statements made as private citizens and actions and statements made as social workers, recognizing that social workers are obligated to ensure that no outside interest brings the profession into disrepute.

### **7.2 Address Unethical Practices of Colleagues**

- 7.2.1** Social workers take appropriate action where a breach of professional practice and professional ethics occur, conducting themselves in a manner that is consistent with the *Code of Ethics* and *Guidelines for Ethical Practice*, and standards of their regulatory body.

- 7.2.2 Social workers who have direct knowledge of a social work colleague's incompetence or impairment in professional practice consult with colleagues about their concerns and when feasible assist colleagues in taking remedial action. Impairment may emanate, for example, from personal problems, psychosocial distress, substance abuse or mental health difficulties.
- 7.2.3 Social workers who believe that a colleague has not taken adequate steps to address their impairment to professional practice take action through appropriate channels established by employers, regulatory bodies, or other professional organizations.
- 7.2.4 Social workers do not intervene in the professional relationship of other social workers and clients unless requested to do so by a client and unless convinced that the best interests and well-being of clients requires such intervention.

**7.3 Support Regulatory Practices (in jurisdictions where social work is regulated)**

- 7.3.1 Social workers co-operate with investigations into matters of complaint against themselves or other social workers and the requirements of any associated disciplinary hearings.
- 7.3.2 Social workers may release confidential information as part of a disciplinary hearing of a social worker when so directed by a tribunal or disciplinary body, taking care to divulge the minimum information required.
- 7.3.3 Social workers report to the relevant professional body, persons who misrepresent their qualifications as a social worker or their eligibility for regulation or membership in a professional association.

## **8.0 Ethical Responsibilities to Society**

Social workers advocate for change in the best interests of clients and for the overall benefit of society, the environment and the global community. In performing their responsibilities to society, social workers frequently must balance individual rights to self-determination with protection of vulnerable members of society from harm. These dual ethical responsibilities are the hallmark of the social work profession and require well-developed and complex professional skills. When social workers' legal obligations require them to break confidentiality and limit client self-determination they do so with the minimum compulsion required by law and/or the circumstances (see Value 1).

### **8.1 Source of Information on Social Needs**

**8.1.1** Social workers identify and interpret the basis and nature of individual, group, community, national and international social problems with the intention of bringing about greater understanding and insight for policy makers and the public.

### **8.2 Participate in Social Action**

**8.2.1** Social workers strive to identify, document and advocate for the prevention and elimination of domination or exploitation of, and discrimination against, any person, group, or class on the basis of age, abilities, ethnic background, gender, language, marital status, national ancestry, political affiliation, race, religion, sexual orientation or socio-economic status.

**8.2.2** Social workers endeavour to engage in social and/or political action that seeks to ensure that all people have fair access to the resources, services and opportunities they require to meet their basic human needs and to develop fully.

**8.2.3** Social workers are aware of the impact of the political arena on practice and strive to advocate for changes in policy and legislation to improve social conditions in order to meet basic human needs and promote social justice.

**8.2.4** Social workers endeavour to expand choice and opportunity for all people, with special regard for vulnerable, disadvantaged, oppressed and exploited people and groups.

**8.2.5** Social workers strive to promote conditions that encourage respect for cultural and social diversity within Canada and globally. Social workers promote policies and practices that demonstrate respect for difference, support the expansion of cultural knowledge and resources, advocate for programs and institutions that demonstrate cultural competence and promote policies that safeguard the rights of and confirm equity and social justice for all people.

**8.3 Encourage Public Participation**

**8.3.1** Social workers strive to facilitate informed participation by the public in shaping social policies and institutions.

**8.4 Assist in Public Emergencies**

**8.4.1** Social workers provide professional services during public emergencies to the greatest extent possible.

**8.5 Advocate for the Environment**

**8.5.1** Social workers endeavour to advocate for a clean and healthy environment and advocate for the development of environmental strategies consistent with social work principles and practices.

## **Glossary**

### ***Capacity***

The ability to understand information relevant to a decision and to appreciate the reasonably foreseeable consequences of choosing to act or not to act. Capacity is specific to each decision and thus a person may be capable of deciding about a place of residence, for example, but not capable with respect to deciding about a treatment. Capacity can change over time (Etchells, Sharpe, Elliot and Singer, 1996).

Recent references in law point to the concept of “a mature minor,” which Rozovsky and Rozovsky (1990) define as “...one with capacity to understand the nature and consequences of medical treatment. Such a person has the power to consent to medical treatment and parental consent is not necessary” (p. 55). They quote the comments by The Honorable Justice Lambert in *Van Mol v. Ashmore*, which help clarify common law with respect to a minor’s capacity to consent. He states:

At common law, without reference to statute law, a young person, still a minor, may give, on his or her own behalf, a fully informed consent to medical treatment if he or she has sufficient maturity, intelligence and capacity of understanding what is involved in making informed choices about the proposed medical treatment...once the capacity to consent has been achieved by the young person reaching sufficient maturity, intelligence and capability of understanding, the discussions about the nature of the treatment, its gravity, the material risks and any special and unusual risks, and the decisions about undergoing treatment, and about the form of the treatment, must all take place with and be made by the young person whose bodily integrity is to be invaded and whose life and health will be affected by the outcome.

### ***Child***

The *Convention on the Rights of the Child* passed by the United Nations in 1959 and ratified by Canada in 1990, define a child as a person under the age of 18 years unless national law recognizes an earlier age of majority (Alberta Law Reform Institute, 1991). The age of majority differs in provinces and territories in



Canada. Under the *Criminal Code of Canada*, the age of consent is held to be over the age of 14 years; age in the context of the criminal code frequently refers to capacity to consent to sexual relations. All jurisdictions in Canada have legislation regarding child protection, which defines the age of a child for the purposes of protection. In Canada, in the absence of provincial or territorial legislation, courts are governed by common law. Social workers are encouraged to maintain current knowledge with respect to legislation on the age of a child, as well as capacity and consent in their jurisdiction.

### ***Client***

A person, family, group of persons, incorporated body, association or community on whose behalf a social worker provides or agrees to provide a service or to whom the social worker is legally obligated to provide a service. Examples of legal obligation to provide service include a legislated responsibility (such as in child welfare) or a valid court order. In the case of a valid court order, the judge/court is the client and the person(s) who is ordered by the court to participate in assessment is recognized as an involuntary client.

### ***Conduct Unbecoming***

Behaviour or conduct that does not meet social work standard of care requirements and is, therefore, subject to discipline. In reaching a decision in *Matthews and Board of Directors of Physiotherapy* (1986) 54 O.R. (2d) 375, Saunders J. makes three important statements regarding standards of practice, and by implication, professional codes of ethics:

1. Standards of practice are inherent characteristics of any profession.
2. Standards of practice may be written or unwritten.
3. Some conduct is clearly regarded as misconduct and need not be written down, whereas other conduct may be the subject of dispute within a profession.

(See “Standard of Practice.”)

### ***Confidentiality***

A professional value that demands that professionally acquired information be kept private and not shared with third parties unless the client provides informed consent or a professional or legal obligation exists to share such information without client informed consent.

### ***Discrimination***

Treating people unfavourably or holding negative or prejudicial attitudes based on discernable differences or stereotypes (AASW, 1999).

### ***Informed Consent***

Voluntary agreement reached by a capable client based on information about foreseeable risks and benefits associated with the agreement (e.g., participation in counselling or agreement to disclose social work report to a third party).

### ***Human Rights***

The rights of an individual that are considered the basis for freedom and justice, and serve to protect people from discrimination and harassment. Social workers may refer to the *Canadian Charter of Rights and Freedoms* enacted as Schedule B to the *Canada Act 1982 (U.K.) 1982, c. 11*, which came into force on April 17, 1982, as well as the *Universal Declaration of Human Rights* (1948) proclaimed by the United Nations General Assembly December 10, 1948.

### ***Malpractice and Negligence***

Behaviour that is included in “conduct unbecoming” and relates to social work practice behaviour within the parameters of the professional relationship that falls below the standard of practice and results in, or aggravation of, injury to a client. It includes behaviour that results in assault, deceit, fraudulent misrepresentations, defamation of character, breach of contract, violation of human rights, malicious prosecution, false imprisonment or criminal conviction.

### ***Self-Determination***

A core social work value that refers to the right to self-direction and freedom of choice without interference from others. Self-determination is codified in practice through mechanisms of informed consent. Social workers may be obligated to limit self-determination when a client lacks capacity or in order to prevent harm (Regehr and Antle, 1997).

### ***Social Worker***

A person who is duly registered to practice social work in a province or territory; or where mandatory registration does not exist, a person with social work education from an institution recognized by the Canadian Association of Schools of Social Work (CASSW) or an institution from outside of Canada that has been approved by the CASW, who is practising social work and who voluntarily agrees to be subject to this *Code of Ethics*. **Note:** Social workers living in Quebec and British Columbia, whose social work education was obtained outside of Canada, follow a separate approval process within their respective provinces.

### ***Standard of Practice***

The standard of care ordinarily expected of a competent social worker. It means that the public is assured that a social worker has the training, the skill and the diligence to provide them with social work services. Social workers are urged to refer to standards of practice that have been set by their provincial or territorial regulatory body or relevant professional association (see “Conduct Unbecoming”).

### ***Voluntary***

“In the context of consent, ‘voluntariness’ refers to a patient’s right to make treatment decisions free of any undue influence, such as ability of others to exert control over a patient by force, coercion or manipulation. ...The requirement for voluntariness does not imply that clinicians should refrain from persuading patients to accept advice. Persuasion involves appealing to the patient’s reason in an attempt to convince him or her of the merits of a recommendation. In attempting to persuade the patient to follow a particular course of action, the clinician still leaves the patient free to accept or reject this advice.” (Etchells, Sharpe, Dykeman, Meslin and Singer, 1996, p. 1083).

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