Hermann (Continued from Page 1)

need to ensure knowledge and skill development after the MSW and the protection of clients by requiring credentialed membership standards. Members of the SCSW generally remained with the NASW. Many maintained their political agenda in addition to their clinical practice. Most continued to work in agencies. Many served clients through their private practices. This enabled additional contact with clients through the practice of social casework both within and outside of agencies. There is no evidence that the NASW's recent efforts in promoting clinical practice are at the expense of other fields of service or other specializations or its recognition of the richness and importance of generalist practice.

- 2) The textbooks used to teach BSW and MSW students consistently ascribe to the primary value of practice as being the welfare of clients and client systems. The SCSW and the NASW adhere strongly to this principle. The changes in the 1980 Code of Ethics do not diminish this historical dictate. This Code clearly outlines ethical standards of conduct from conduct and comportment, responsibility to clients, responsibility to colleagues, responsibility to employers, responsibility to the profession and responsibility to society. All of these are priorities. The Code makes this clear: one cannot honor one section of the code without integrating the others. The Preamble clearly states: " This code is based on the fundamental values of the social work profession that include the worth, dignity and uniqueness of all persons as well as their rights and opportunities." It is not a set of rules but rather a statement of principles. It strengthens the commitment to our historical principles reflected in the 1967 version. Priorities have not changed.

- 3) Licensure now exists in most states. A public body administers licensure in each state. This public body is charged not with representing social work or protecting social work, but rather with representing and protecting social work's clients. Some states license clinicians as a speciality. Most do not. Most license generalists at the MSW and/or BSW levels of practice. The clients of all social workers who are licensed are protected not merely by the "good will" of social work or by the social worker's professional ethics but also by the support of government. This is public regulation of a public profession to protect the public. Licensing requires certain knowledge, identified skills, adherence to professional values and standards of behavior which reduce the risk to clients by unethical, destructive and damaging practice. Social workers who are licensed are required to prove their knowledge of specialized and generalists methods, social policy cultural diversity, human behavior and the values and ethics of social work. They are then required to use this knowledge in the best interest of their clients.

Most mental health professionals are social workers. Private practice is not new. Social workers work for clients whether or not they are in agencies. The private practitioner is able to self-direct practice without the restrictions placed by the bureaucracies of agencies. When licensed, however, they are still accountable to clients and the public - not agency regulations. They are able to practice advocacy for clients free from the threat of administrative interpretations.

- 4) Licensure is a response to the need to protect the public - not a cause of the growth of the number of social workers who retreat from systems change. It is not, however, a given that clinicians face and either/or focus to practice. One may see clients privately as an aspect of agency practice and within the broader context of social work's mission to effect systems change. Most private practitioners are also agency employees. Many are involved in cause advocacy, policy reform and other aspects

(Continued on Page 11)

NICARAGUA: SOCIAL PROBLEMS AND COMMUNITY SOLUTIONS

by Agnes Zellin and Paul Tick

This past May, four human service workers visited Nicaragua to assess the social service needs of the country. We were invited by the Nicaragua Institute for Social Welfare and Social Security (INSBBI). The Director of INSBBI, Marcia Ramirez, hoped that by developing relations between human service workers in the U.S. and Nicaragua, some Nicaraguan workers could come to the U.S. and receive desperately needed training.

During our two-week trip we visited schools, hospitals, day care centers, community service organizations and rehabilitation centers. We visited the capital city, surrounding cities, country towns and the Atlantic Coast. There, the most devastating effects of the 1988 hurricane are still a part of everyday life.

Everywhere we traveled we witnessed the incredible efforts of the country's sixty trained social workers to overcome enormous social problems.

Everywhere we traveled we witnessed the incredible efforts of the country's sixty trained social workers to overcome enormous social problems. With so few trained social workers and scare resources, the slogan and practice of "social problems -- community solutions" was developed. It was recognized that the most significant problems are social ones and it takes the efforts of everyone together; professionals, working people, parents and children to solve the nation's physical, emotional; and economic problems. Wherever we went, whole communities were involved.

Before 1979, there were virtually no social services available to the people of Nicaragua. In 1979, after the success of the revolution, the Ministry of Social Welfare was created and in 1982 it merged with the Institute of Social Security. The present organization seeks to ensure that the population is socially secure and stable. However, the goal is distant. Ten years of the U.S.-backed Contra war has left 26,000 people killed, 250,000 displaced, 6,000 young people disabled and thousands orphaned. To complicate matters, last October's hurricane Joan ripped though 80% of Nicaragua, leaving 10% of the population homeless, destroying the crops of hundreds of thousands of people and killing 170. The war and hurricane have contributed to a serious collapse of the Nicaraguan economy.

The reality of repairing Nicaraguan lives is delicately and tenuously balanced between hope and despair. The Vice Minister of INSBBI, Dr. Ricardo Chavarria, explained: "Our people have been castigated over and over and this makes it very difficult to continue. Since the revolution, we have emerged as a people of great solidarity, friendship, and patriotism. These are the best values in life but at the same time we face major social problems. They are not complex but they are deeply felt -- hunger, isolation, poverty."

However, the vision of service workers prevails -- it is a vision of the strength and intelligence of the Nicaraguan people. One worker explained: "the social worker is a worker of the people. We do not resolve the problems for a community. We work with the community and the community decides how it will solve its own problems. We don't want our experienced workers to stay inside our institutions. We must work with the people as community workers." INSBBI

(Continued on Page 12)