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Malaysian Child Social Workers' Perceptions of Emotions in Decision-making Processes

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Abstract

The present research aimed to investigate the perceptions of the Malaysian Child Social Workers on emotions in their professional practice i.e. decision-making processes. Traditionally, decision-making is viewed as a rational process where reason indicates the best way to achieve a goal. However, many philosophers, neuroscientists and psychologists emphasise that the role of emotions in decision making is not exempted. The overall research strategy was ethnographic. The researchers used a mixture of methods including individual interviews, participant observation, and a questionnaire. The research was conducted in three locations in Malaysia: Kuala Lumpur, Petaling and Kota Kinabalu. Participants consisted of child protectors and rehabilitation officers from the Malaysia Welfare Department and medical social workers in hospitals. This paper presents an analysis of individual interviews in the three locations. A total of twenty-five interviews were conducted (twelve male, thirteen female; age range 29-51). Data were analysed using thematic analysis. The research findings revealed that the Malaysian child social workers tended to avoid emotions in their professional practice (i.e. decisionmaking processes), which might be due to the procedural practice. Based on the participants' perceptions with regard to the use of emotions in decision-making proceses, the Malaysian child social workers' understanding, knowledge and terms pertaining to emotions and their contributions in decision making were seemingly confined to the negative effects of emotions. Emotions, however, were not only characterised as disruptive but also viewed as having their 'rationality'.

Key words: emotions, decision-making process, child and family workers, human service organisations

Introduction

Decision-making is one of the core tasks in social work practice. Child and family social workers routinely make decisions that affect clients' lives. In this case, social workers are required to make good decisions that suit the clients' desires and needs. Working with children and their families requires the social workers to address the parents' needs as well as those of the children, as both parties often require attention. When social workers begin to think about children, they may be confronted with dilemmas. For instance, social workers have to focus on the children's needs while attending simultaneously to the family circumstances in which they are located (Wilson, Ruch, Lymbery & Cooper, 2008). Power is one of the principles of effective relationship-based social work with children and families. Wilson et al. (2008) argue that one of the main reasons for emotions running so high in social work with children and families is the statutory responsibilities of childcare social workers, which allow them to remove children from their families under certain circumstances.

Some researchers have viewed emotions as a dimension in decision-making (see Damasio, 2006; DeSousa, 1987). There seem to be situations in which emotions can enhance decision-making processes even though it is widely believed that the influence of emotions on reasoning would create problems. The researcher posits that whether emotions are functional or dysfunctional for decision-making depends on how social workers experience their emotions and what they do about them during decision-making.

Studies indicate that the brain uses two modes of reasoning: heuristic and analytic (see Hicks & Kluemper, 2011). Heuristic reasoning has been categorised as intuitive, automatic and implicit processing, while analytic reasoning is referred to as deliberate, rule-based and explicit processing (Hicks & Kluemper, 2011). If one's heuristic reasoning failed to produce a correct judgement, it would result in cognitive bias. Cognitive bias refers to systematic bias in the decisions people make, arising from the application of one or more heuristic processing (Lockton, 2012). Tversky and Kahneman (1974) argue that cognitive bias stems from a reliance on judgemental heuristics, which refers to the study of people's judgement under conditions of uncertainty.

In the social work profession, the terms 'judgement' and 'decision-making' are often used interchangeably. However, according to Taylor (2010:10), professional judgement is when "a professional considers the evidence about a client or family situation in the light of professional knowledge to reach a conclusion or recommendation", while decision-making is defined as:

the selection of a course of action as a result of a deliberate process by one or more people. Professional decision-making in social work is argued to consist of various models of ethical decision-making which aim to

encapsulate as many features (or steps) of the decision-making process but they are of limited use in day-to-day social work practice. (Taylor, 2010)

Banks (2012) proposes ethical decision-making and ethical work by providing an essential reference point for professional decision-making (i.e. ethical, psychological, emotional, practical, technical and legal aspects are included in the decision-making processes). There is a suggestion that, in decision-making processes, decision-makers should employ a self-reflective attitude that incorporates self-monitoring and disconfirming strategies into their daily work habits (Rogerson, Gottlieb, Handelsman, Knapp & Younggren, 2011). According to Rogerson et al. (2011), emotions and values exert a powerful influence through automatic and intuitive processes. Acknowledging and understanding the resulting tendencies and biases forms a promising path to a more realistic, accurate and helpful conceptualisation of decision-making, particularly in emotionally charged situations. This means that 'practice wisdom' calls for practitioners to heighten their reflective capacities in judgement processes (see Collins & Daly, 2011). Collins and Daly (2011) add that intuition or 'gut feeling' may also have a key role in the use and development of practice wisdom. In *The Social Work Dictionary*, 'practice wisdom' is defined as "a term often used by social workers to describe the accumulation of information, assumptions, ideologies, and judgements that have seemed practically useful in fulfilling the expectations of the job" (in DeRoos, 1990:282).

The roles of cognitive biases and heuristics have been much discussed in medical decision-making. Because of the potential relevance of cognitive biases and heuristics to decisions made by both patients and clinicians, there is growing interest in studying them in the medical context (see Blumenthal-Barby & Krieger, 2014; Croskerry, 2003). Cognitive Dispositions to Respond (CDRs) means removing the stigma of bias to clear the way towards accepting the capricious nature of decision-making, and perhaps they go some way towards exculpating clinicians when their diagnoses fail (Croskerry, 2003). In business management, heuristics are proposed due to the view that, for certain cognitive and environmental constraints, rationality is hardly possible, so heuristics rescue the manager from worrying about an urgent decision; thus, the dependence on shortcuts paves the way into the management's psyche while making the decision (Asadullah & Muhammad Kundi, 2013). It is not

certain whether heuristics are good or bad; however, there is a view that their accurate use depends on the situations and individuals in the organisations that rely on heuristics in an adaptive way (see Gigerenzer & Gaissmaier, 2011). In addition, Khatri and Ng (2000) found that there is a positive relationship between intuitive synthesis and organisational performance in an unstable environment and vice versa, which means intuitive synthesis is an important strategy process factor that managers often exhibit in their strategic decision-making. There is also a view that some heuristics are highly efficient and can compete with complex decision models in some application domains – for example, depending on readily available internal information and gut feelings in order to avoid long-term delays (Albar & Jetter, 2009). This strengthens the view that the most important role of emotions in decisionmaking is to guide behavioural decisions via motivational processes, allowing for fast actions (Zeelenberg et al., in Bohm, 2008). A recent study showed that there is an association between level of emotional intelligence (EI) and decision-making. The study by Sumathy, Madhavi and Felix (2015) indicated that EI highly influenced the leader's decisions, and that decision-making was more highly influenced by the empathy dimension of EI. There is a negative meaningful relationship between EI and the rational decision-making style of managers and a positive meaningful relationship between EI and the intuitive decision-making style of managers (Moghadam, Tehrani & Amin, 2011).

Doyle, Miller and Mirza (2009) add that personal and professional factors are related to ethical decision-making among social workers. Personal factors that are related include ethnicity, religion and gender. On the other hand, professional factors that are related include commitment to social work values, education, and whether or not social workers have received formal ethics training. Doyle, Miller and Mirza (2009) also add that social workers sometimes make rational and ethical decisions based on rules and/or codes (codified), and at other times they tend to make decisions following factors other than the rules and/or codes (e.g. intuition). This means the social workers use both codified and non-codified rationales when dealing with ethical dilemmas. This seems to suggest that both approaches have a role to play in social work practices (see also O'Sullivan, 2011).

This paper explores Malaysian child social workers' perceptions about emotions and their contributions in decision-making processes in the context of child and family social work in Malaysia.

Methodology

Empirical investigations in psychology suggest that some emotions can be found in all cultures, and there are expressions that can be cross-culturally recognised (see Brun, Doguoglu & Kuenzle, 2008). This research employed the ethnographic approach as the research design. However, this research was not conducted as a full ethnography. This research draws on and is framed by some ideas which originate from ethnography. The way in which the ethnographic approach was used was due to the philosophical stance of the researcher (see Atkinson & Hammersley, 1994), in which emotion is perceived as a confluence of biological underpinnings, shaped by a cultural worldview and script for social behaviour.

The complex nature of the main research question seeks to investigate the perceptions of the Malaysian child social workers concerning emotions and its contributions in the processes of decision making in child protection, child rehabilitation and child welfare organisations. Individual interviews were used to provide the qualitative data that aimed at gaining a working familiarity with the frames of meaning within which the child social workers perceived and used emotions and in their professional practice. Data then coded and analysed manually. The data were analysed utilising thematic analysis, which searched for themes and patterns as developed by Braun and Clarke (2006). More specifically, the taped interviews were transcribed.

The data were collected from the volunteered male and female social workers, experienced and newly qualified social workers, people of different age groups, levels of education, and lengths of service in their current jobs, and individuals working in a variety of roles (e.g. as a child protector, a child rehabilitation officer or/and an administrator). Table 1 presents the socio-demographic descriptions of the participants/interviewees. The mean age of the participants was 38 years, comprising 12 (48%)

male and 13 (52%) female participants. From the 25 participants, one reported as unmarried. In terms of educational background, the participants were divided into three formal educational levels: 6 participants (24%) had a diploma certificate, 15 participants (60%) possessed a bachelor's degree and 4 participants (16%) having a master's degree. On the other hand, in terms of working profession, 8 participants (32%) were child protectors, 10 participants (40%) were probation officers and 7 participants (28%) were medical social workers. Conversely, 11 (44%) interviews were conducted in Kota Kinabalu, 10 (40%) interviews in Kuala Lumpur, and 4 (16%) interviews in Petaling. Meanwhile, the social workers' working experiences ranged from 1 year to more than 20 years.

Pseudonym	Gender	Age	Marital Status	Academic Qualification	Position	Location	Experience s in Child
							(Years)
Child protector 1	Male	35	Married	Diploma	Child Protector	Kota Kinabalu	3
Probation officer 1	Female	35	Married	Diploma	Probation Officer	Kota Kinabalu	2
Probation officer 2	Female	35	Married	Bachelor	Probation Officer	Kota Kinabalu	5
Probation officer 3	Male	32	Married	Diploma	Probation Officer	Kota Kinabalu	2
Probation officer 4	Male	47	Married	Bachelor	Probation Officer	Kota Kinabalu	5
Child protector 2	Female	33	Married	Diploma	Child Protector	Kota Kinabalu	2
Child protector 3	Female	40	Married	Bachelor	Child Protector	Kota Kinabalu	19
Child protector 4	Female	48	Married	Master	Child Protector	Kota Kinabalu	>20
Child protector 5	Male	34	Married	Dilopma	Child Protector	Kota Kinabalu	5
Med Soc Worker 1	Female	43	Married	Bachelor	Med Social Worker	Kuala Lumpur	2
Med Soc Worker 2	Male	51	Married	Bachelor	Med Social Worker	Kuala Lumpur	>20
Probation officer 5	Male	45	Married	Diploma	Probation Officer	Kuala Lumpur	16
Child protector 6	Female	35	Married	Bachelor	Child Protector	Kuala Lumpur	5
Med Soc Worker 3	Female	50	Married	Master	Med Social Worker	Kuala Lumpur	>20
Probation officer 6	Female	36	Married	Master	Probation Officer	Kuala Lumpur	5
Probation officer 7	Female	30	Married	Bachelor	Probation Officer	Petaling	4
Probation officer 8	Male	29	Married	Bachelor	Probation Officer	Petaling	2
Child protector 7	Female	34	Married	Bachelor	Child Protector	Petaling	9
Child protector 8	Male	39	Married	Bachelor	Child Protector	Kuala Lumpur	5
Probation officer 9	Male	29	Married	Bachelor	Probation Officer	Petaling	1
Probation officer 10	Female	34	Married	Bachelor	Probation Officer	Kuala Lumpur	1
Med Soc Worker 4	Male	33	Married	Bachelor	Med Social Worker	Kuala Lumpur	5
Med Soc Worker 5	Male	42	Single	Master	Med Social Worker	Kuala Lumpur	6
Med Soc Worker 6	Male	33	Married	Bachelor	Med Social Work	Kota Kinabalu	9
Med Soc Worker 7	Female	37	Married	Bachelor	Med Social Worker	Kota Kinabalu	13

Findings and Discussions

Emotions as a Negative and Disruptive Element in Decision-making Processes

The theme, the perception of emotions as a negative and disruptive element in decision-making processes, was identified while investigating how the Malaysian social workers perceived emotions and EI in decision-making processes. In relation to the topic of emotions and decision-making processes, it is noted that the use of emotions was discouraged in one of the selected organisations of this study where the participants were recruited. The participants seemed to perceive emotions as a negative element and commented that emotions and feelings should be avoided during professional practice, such as in decision-making processes. They perceived that emotions could disrupt decision-making processes. The participants mentioned that

In management, we can't be emotional [laughs]. It [management] must depend on the needs, rationality and our experiences. So people will not say ... "Eh! Emotions have been involved in her decision-making" ... it must be natural.

(Child Protector 4, female, aged 48)

Whatever kind of decision is made, it must be on a professional basis, you know. We do not only follow our emotions, or follow what we feel, whether we feel angry, patriotic, love our work or have elements of bias, no. But, it's more

to ... not only for the benefit of our service or our department. So, when we refer to our service, we are usually geared more towards the patients' benefit because our core business is serving the patients.

(Medical Social Worker 3, female, aged 50)

Emotions, if emotions ... errr ... I don't involve emotions in making decisions. For example, if a mother has to be sent to prison and she has a child aged about five years old, when the child turns five, they need to be separated. For the child's sake, we don't allow a child to be in prison. There are emotions. Of course, a child must be taken care of by his/her mother. But in this case, it's different.

(Child Protector 8, male, aged 39)

Errr ... I am not saying that they [emotions] are negative, but I don't want these emotions to influence me in my decision-making processes, and I am not saying that if I use emotions, my decision will be a correct one. But, I am kind of ... I don't want to be influenced by my emotions.

(Probation Officer 7, female, aged 30)

The illustrations above seem to show us that emotions were perceived by the Malaysian social workers as a negative element that should be avoided in social work practice (e.g. decision-making processes), regardless of whether they were viewed as positive or negative. This seems to suggest that, if one includes emotions in decision-making processes, one will be viewed as unprofessional. In addition, the interest of the clients must be made a priority. Even though social workers may experience a certain kind of emotion when dealing with clients, they must avoid it at all costs. This seems to reveal that in the Malaysian context in general and in social work practice in particular, emotions (i.e. one's own and others' emotions) are avoided and their inclusion in professional practice is discouraged. This may result from the general view that emotions are disruptive; due to this perception, emotions (i.e. anger) are devalued in some cultures (see Mesquita & Walker, 2003).

The reason for the avoidance of emotions in professional practice as perceived by the participants was that emotions could disrupt their rational thinking regardless of whether they are positive or negative. The participants claimed that involvement of certain kinds of emotions could cause them to lose their confidence and leave them doubtful about whether they were making wise judgements. Hence, according to them, emotions should be used within limits. The participants reported that

I do not involve emotions ... to me, in the process of making decisions, sometimes, we can feel a mixture of emotions, either a good or bad mood, or personal problems. In decision-making, I am not confident. And, sometimes, I am doubtful too. If emotions are there, they would make me less focused on my work – for example, if I have personal problems or any internal or external problems, of course they [negative emotions] disturb me. I would not make wise decisions if I was being emotional.

(Child Protector 5, male, aged 34)

I think we need to minimise the use of our emotions. I think if we depend on emotions, any kind of decision that relates to the patients will not be a wise one. (Medical Social Worker 7, female, aged 37)

The examples above show that the inclusion of emotions in decision-making processes is not encouraged due to their negative effects on decisions and actions. The Malaysian child social workers perceived that certain emotions that arose from problems faced by individuals or issues relating to clients could disrupt their rational judgement. It seems that emotions are completely avoided and rejected in their professional duties:

I have a case involving a boy. This boy was sent to the rehabilitation institution due to his misbehaviour. I believe he [his client] became mischievous due to his

broken family. At that time it was close to the Eid celebration. He has been in the institution for six months. Our procedure states that after six months in the institution, a child can apply to go home for at least three days for the Eid celebration or if there is any emergency in his/her family. But it depends on his/her discipline while he/she is in the institution. We don't simply allow them to go home if we're not satisfied with their behaviour. His mother came and showed her sadness and anger. I don't mind, even if it is for Eid Mubarak. I know the child was sad, really sad, because he wanted to be with his family. But we have our policy.

(Probation Officer 5, male, aged 45)

Traditionally, decision-making is viewed as a rational process where reason indicates the best way to achieve a goal. Stocker (2002) states that one reason ethicists have ignored emotions or thought of them as relatively unimportant stems from the view that emotions are abnormal and perhaps rare events and are often of considerable depth. Emotions thought of this way are naturally perceived as misleading, disruptive and even overwhelming. Goldie and Spicer (2002) also argue that emotions are characteristically thought of by philosophers as states that give rise to perturbation in what might roughly be called right thinking. The quantitative research findings show that these traditional perceptions of emotions seem to be embraced fully by the Malaysian child social workers.

The participants, however, seemed to reveal that their work is full of emotional experiences. They experienced negative as well as positive emotions (e.g. sadness, anger, lack of confidence, doubt and empathy), particularly when dealing with clients However, due to their negative perceptions of emotions, particularly the emotions which had been emphasised by the management and which they had been discouraged from using in their professional practice, they preferred to put aside their emotions when doing their jobs. It seems that the Malaysian child social workers' understanding, knowledge and terms concerning emotions and their contributions to decision-making were limited to the negative effects of emotions. In addition, the participants perceived that if they included emotions in their decision-making processes, they would consider their acts as unprofessional, which would lead to unethical practice. However, this is not surprising, particularly when it concerns social work practice in which the relationship between the role of emotions within the practice is considered against the backdrop of proceduralist practice (see Ingram, 2012). As social workers, they have a role in supporting reasonable and informed client decisions in accordance with professional guidance, values and standards, as well as legal and policy frameworks in their practice (Taylor, 2010). The Malaysian social workers indicated that they tended to avoid emotions, which might be due to the proceduralist practice. This was in contrast with social work professionals in the UK, where the standard view has always been that social workers need to be aware of their emotions and to use emotions in a professional way that prioritises the needs of service users. As a body of professionals, the UK's social workers are and have been highly critical of and resistant to the types of proceduralist practice that governments have tried to impose on them (Ingram, 2012). Furthermore, the present study also shows that the Malaysian child social workers sought to act within professional boundaries.

Conclusion

Under the theme of perception of emotions as a negative and disruptive element in decision-making processes, it seems that the Malaysian child social workers' understanding, knowledge and terms concerning emotions and their contributions to decision-making processes were limited to the negative effects of emotions. This may stem from how Malaysian people devalue emotions due to cultural restrictions on expressing negative emotions.

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