Multiple Relationships: Maintaining Professional Identity in Rural Social Work Practice

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Abstract

Working in a rural community locates the professional in a wider social network as community members often expect more from their professionals; not only as service providers, but also as engaged members of the community. This can result in the rural social worker being highly visible both personally and professionally and it can also lead to overlapping relationships. These higher expectations can place stress on the worker in terms of maintaining accepted professional roles and a sense of professional identity. This qualitative study explores the first-hand experiences of a cross-section of service providers in more than a dozen communities within northwestern Ontario and northern Manitoba, Canada. The responses of the participants provide some insight into how rural practitioners maintain their professional identity when working within the unique demands of the rural and remote context. Recurring themes from the interviews suggest that these professionals craft their own informal decision-making processes to address intersecting roles, community gossip, and personal isolation, even while, in some cases, practicing in their home community. The findings provide greater understanding of the pressures and realities of working in small remote towns and the challenges of responding to the expectations and realities of relationships including the expectation of working with friends and family members of friends or colleagues: issues that have not been adequately studied in the literature to date.

Keywords: professional identity, dual relationships, ethical dilemmas, ethics, rural practice

Several contextual considerations influence social work practice in rural or remote areas. Delaney and Brownlee (1995, 1996, 1999) list large distances between communities, lack of resource systems and inherent limits on social options as key characteristics shaping practice. Pugh (2007) adds that most issues for rural practice have to do with relationships. These include: the increased likelihood of worker/client contact outside of the professional encounter; the desire of the client to 'place' the worker in relation to themselves and others in the community (local links, family backgrounds etc.); and the generally more friendly, informal, normative style of relating to others within most small communities. Pugh suggests that these aspects of relationships lead to boundaries being understood differently in rural or remote practice settings; "[rural workers] cannot easily maintain social distance from service users by relying upon a neutral or detached professional persona, for this is likely to obstruct the building of trust. It may be perceived as pompousness or insincerity, and may also run counter to local expectations" (Pugh, 2007, p. 1412). The permeability of boundaries, multiplicity of roles and inter-related relationships that rural or remote contexts are know for, can lead to a fusion of personal and professional lives (Green, Gregory & Mason, 2006) and ultimately challenge the social worker's accepted notions of practice and professionalism (Evans, 2008).

Professional Identity within a Rural Context

A significant challenge for practitioners in small communities is that as community members too, they will often find themselves living, working and socializing in the same circles as their clients, meeting during community events and accessing each other for services and friendships (Graham et al., 2008; Gripton & Valentich, 2004; Hargrove, 1986; Krieg Mayer, 2001; Welfel, 1998). For example, the clinician may have to purchase goods or services from a client, or their client may be the local banker, or teach the clinician's children at school (Simon, & Williams, 1999). In a small community, people must rely more closely on each other to meet their immediate needs, and the clinician is no exception to this dynamic (Zapf, 1985). Having to rely on others, and the fact that there are fewer people to share and have experiences with, inevitably results in multiple relationships (Hargrove, 1986; Scopelliti, et al., 2004; Campbell & Gordon, 2003).

This interconnectedness and resulting visibility "means learning to cope with awkward situations when the worker meets clients outside of work" (Krieg Mayer, p. 92). It also means that the social worker's lifestyle is on public display and often critiqued by the community and used to evaluate the worker's competence, ability and trustworthiness. Schmidt (2009) refers to this phenomenon when he states that, "For better or worse social workers hold positions that might be regarded as having some amount of moral authority or integrity. As a result, community members want to see that the social worker and members of the social worker's family conform to a certain imagined standard" (p. 12). If the personal life of the social worker varies from this imagined standard the ramifications can be significant for the social worker's professional credibility and his or her ability to perform the social work role within the community.

Building credibility and a reputable image within a community may require active participation (Zapf, 1985), but this in turn increases the likelihood of developing multiple, and sometimes conflicting, relationships. Mellow (2005) reflects on these potential role conflicts by highlighting that one of the challenges of engaging in multiple community roles is that professional work is typified by formal roles and detached relationships, whereas rural professionals are faced with the need of having to build trust and connections. It is a conflict that makes it difficult to maintain appropriate emotional distance with clients. Krieg Mayer (2001) found examples of this role conflict in a qualitative study of rural social workers in Australia. Krieg Mayer reported that it was difficult for the social workers to gain the trust of the local community without becoming integrated into the community, for example buying property. However, Krieg Mayer also reported that even with integration it could be difficult for the social workers to maintain a sense of professional identity when the community had a poor understanding of the social work role. Some community members were perceived as resenting social workers for being meddlesome and interfering (resulting in social workers avoiding using a professional title in order to gain acceptance) whereas other community members underrated the professional contribution of social workers. Zapf (2009) suggests that one solution to the development and appreciation of the social worker's role in a rural or remote context is to develop a partnership with the community. However, as Zapf indicates through examples, this can place the social worker in a conflict position with the profession when the community's perception of needed services and appropriate social work roles are in opposition to bureaucratic guidelines of a distant head office or of established practice guidelines.

Clearly, the rural or remote context would appear to pose unique challenges for social work practice that warrants further exploration. Accordingly, the present study was undertaken to explore in greater detail how social workers practicing in rural or remote regions perceive the challenges of maintaining a sense of professional identity while working in these communities.

Methodology

Participants

This study of how rural and remote practitioners manage their professional identity is part of a broader program of research carried out by Lakehead University and the University of Calgary exploring the phenomenon of dual relationships. The population of interest for this study was workers who were living and practicing in, or had lived and practiced in, rural or remote communities in northwestern Ontario and/or northern Manitoba Canada for a period of five or more years. For the purposes of this study rural and remote communities were determined using Statistics Canada's (2007) Canadian census dictionary criteria. Specifically, all communities were more than 100 km from a larger urban centre, and all had low population densities as defined by Statistics Canada (less than 400 people per square km).

In all, forty-four participants from thirteen rural/remote communities were recruited to participate in the study through invitation, purposive sampling, and third party referral.

These participants represented Anglophone ($n = 28$), Francophone ($n = 2$), and Aboriginal ($n = 14$) workers practicing in fields such as addictions, child welfare, crisis, and mental health and related counselling. Thirty-four participants were female, and 35 participants worked in front line service delivery while nine worked in a supervisory role. More than half of the participants had over ten years of practice experience, and 16 were currently working in their home community.

Interviews

Through the use of qualitative inquiry, phenomenological methods, and open-ended questions, initial in-person ($n = 41$) and telephone ($n = 3$) interviews, as well as six follow–up interviews, were conducted over a twelve-month period. Data collection followed qualitative methods and procedures, and included interviews, observation, and documentary materials (Dey, 2007). As mentioned above, initial interviews were mostly conducted in-person and most were about one hour in length. All interviews were retrospective in nature, focussing on practitioners' lived experiences with multiple community roles and relationships. The initial interviews consisted mainly of open-ended exploratory questions, and questions/areas of interest were revised one participant to the next depending on input from previous participants (Dey, 2007). Follow-up interviews were conducted by telephone and focussed on new areas of interest which had emerged from the data.

Data analysis was completed using accepted phenomenological methods, using a combination of hand coding and computer assisted data analysis software (NVivo 8). In addition to exploring workers lived experiences with dual relationships, transcripts of interviews were further analysed for themes related to how workers managed their professional identities and how that might or might not have impacted on the dual relationship decision making process.

Limitations of the Research

One of the limitations of this study is that data collected was, for the most part, from accounts by practitioners of *historical* practice and personal situations, a methodology highly vulnerable to lapses in memory. Another limitation is that, due to sample size and specific practice contexts, findings from this study may not be broadly generalizable.

Findings

Although the intent of this study, and the broader program of study it is a part of, was to explore the *unique* professional experiences of rural or remote practitioners with regard to dual relationships, as stated above transcripts of interviews were further analysed for themes related to workers' perceptions regarding the challenge of maintaining a sense of professional identity while working in small northern communities. From the interview data five significant themes emerged:

(1) Importance of a professional identity
(2) Personal isolation
(3) Third hand information and/or community gossip
(4) Practicing in one's home community
(5) Overlapping roles; providing service to family, friends, and colleagues

While study participants represented a range of age, gender, years of experience, and practice setting, most addressed these five broad topics in their interviews.

Importance of a Professional Identity

When participants spoke about *professional identity*, they often spoke about *credibility*; the reputation of personal conduct described by Pugh (2007). It appeared from the interviews that rural professionals were very aware of how they were perceived in the community, and made conscious choices in an effort to maintain their professionalism:

> Maybe what I do here at the agency kind of affects what kind of social activities I choose to do and how I put myself out in the community, I guess. So, it's more of a concern of my presentation to the community, based on the fact that I want them to see me in a professional way and don't want them to be questioning my credibility. Being an addictions counsellor, you know, I don't go around and go to social outings and get drunk or falling down or, you know, those types of things which would throw my credibility completely out the window. *(participant 3ied8)*

> I prefer to do things like coach soccer, volunteer, get myself known so that when they do come in they may go 'oh you look familiar' but I know it is not going to be from anything negative. *(participant 4ide9)*

Mellow (2005) suggests that "rural life problematizes notions of professionalism" (p. 50) resulting in a struggle to reconcile professional work (e.g. credibility and a reputable image) with the realities of practicing in a rural/remote context. The following topics, from the participant data, elucidate this struggle.

Personal Isolation

As outlined above, one of the major difficulties in maintaining a professional identity in a rural or remote community is *high visibility* (Krieg Mayer, 2001; Pugh, 2003; Pugh, 2007; Mellow, 2005). This was a common concern among study participants with many referring to the 'fishbowl' effect:

> … in terms of living in a small town you have to come to terms that you live in a fish bowl and that people coming in to see you actually have probably a fair bit of knowledge about who you are, where you live, who your kids are and what hobbies you enjoy doing, just because it is such a small community. *(participant 7ups3)*

> For me, I play really low key in the community and I think that I do that on purpose. When I first came here I was very cognizant of not jumping into friendships or relationships too quickly, to try and kind of watch what was going on. It is very much like in a fish bowl here, people see what you are doing all the time and so watching that and being cognizant of that. *(participant 4rmv9)*

Balancing both a personal and a private life seemed to be a significant challenge for rural and remote social workers. Many participants spoke about how they isolate themselves socially to avoid potentially inappropriate or uncomfortable encounters with clients. This is what Pugh (2007) described as an 'opting out' strategy, avoiding social contact in an effort to avoid feeling compromised (p. 1414). Some of these workers simply avoided 'high risk' situations:

> Avoiding certain social settings that I know could be problematic: that I know potentially a lot of clients might be at. Some social functions I definitely avoid. I don't know if that's necessarily for professional image or just because I don't want to necessarily deal with some of the stuff I might see. *(participant 3ied8)*

> I know that I have a couple of clients that go to that particular bar and I'm not going to go there to have a drink and have them intoxicated coming up to me and talking forever about whatever. Right? So I guess I would avoid some places. *(participant 9niz5)*

Others isolated themselves to a much broader extent, avoiding almost any social contact outside of their professional role:

> I put a lot of pressure on myself too to become, to maintain my professional image in the community. Since working in the field I can't even tell you how many times I have been out; not very many because of that reason. If I am going to spend time with friends or celebrate holidays I generally do it in private gatherings just to avoid that, I guess, because the type of clients that we serve come from all walks of life. You can see them anywhere, not necessarily a bar, anywhere, a bank, the grocery store. *(participant 2hfc7)*

> I try to isolate myself as much as I can. *(participant 8vqr4)*

As was stated above, most workers, made *conscious choices* about isolating themselves to maintain their professional identity. How they choose to do that was often a reflection of their area of practice:

> If I wasn't working in the addictions field I might be less worried about going to the bar. But since I work in the addictions field, hanging out in the bar would not be a good idea. *(participant 1ojy6)*

Third Hand Information and/or Community Gossip

One other aspect of maintaining a professional identity appeared to be a worker's ability, or willingness, to manage third hand information and community gossip. It appeared from the interviews that most participants were careful to differentiate between information gained through their professional role and information, which was gained third hand:

> I hear stories about what they might have been doing on the weekend or that sort of thing so it does affect things. It is hard to just turn that off but at the same time you have to maintain professionalism and keep it work related and try not to bring in what you've heard, or what the gossip is and that sort of thing, into the work setting. (*participant 9ezi5*)

> Essentially it's information you can't use. Right? Because it's third party so it's information that you can't really bring into the therapeutic relationship. You know? However you hope that there's a way for that information to come out. *(participant 2qwl7)*

Often though, it didn't appear to be as simple as filtering out any and all third hand information or community gossip:

> A lot of it is weighing the benefits to therapy, or just gossip. And that is an essential component living in a small town; what is gossip and what is helpful information? *(participant 7ups3)*

And this decision making around third hand information, both in terms of acquiring it and sharing it, was often complicated by the various roles (both personal and professional) that workers had in the community:

I think this is a good point to bring up in your research. There is a difference between gossip and knowing information because you have different social positions in your community. If you have different social positions in your community, then ethically, legally, where do you stand sharing that information that you've acquired at a different agency in 'round' or with another team. And really you acquired that information at another agency; you know very private information about this person. How do you share that? Do you share that? That's the question. (*participant 1xsp6*)

Practicing in One's Home Community

While the above topics/themes were common to most rural and remote workers interviewed, workers practicing in their home community, the community that they grew up in, identified several unique factors that influenced how they managed their professional identity. While a number of workers suggested that returning to their home community might, at times, be professionally beneficial, others suggested that, at times, it was not. It was noted that past behaviour can be a factor in maintaining a professional image:

> I also grew up in this community so that meant that when I was a teenager and I was younger I spent a lot of time partying in the community. So it's not that infrequently that someone walks through our door here looking for services who is someone who I've known socially and have been at parties with in the past. (*participant 6tot2*)

as can family legacy:

> I have seen where people have been non compliant with working with me just because they know who my family is and know that they might have had an issue with one of my family members previous to and they hold that against me. I have had that. (*participant 9ezi5*)

A participant who had 'immigrated' into a community provided a contrast:

> I'm someone that was transplanted here. I think it is more difficult for someone who has grown up here all their life and has tentacles out all over the community because they have relatives. I think that is more of a challenge because what if you've got Aunt Betty who is a drunk and is in treatment and co-exists with a co-patient of yours and gets the scoop on you. I don't have that dilemma but some of my colleagues do. So I feel very fortunate because I am anonymous. (*participant 1xsp6*)

This family legacy can also be considered in terms of overlapping roles due to family and historical ties:

> Yes, I have a client right now, I used to live with his brother. So and now I'm providing services to him. But I don't live with his brother any longer but that is how he knows me. And when I came into this position and had to go into the courtroom and talk to him and say I'm providing this service he said, 'Oh, I know you and I know that you'll take care of me'. (*participant 6kfc2*)

From the example above, it is apparent that these overlapping family and historical ties, can lead to dual relationships, relationships with potential ethical implications.

Overlapping Roles; Providing Service to Friends, Family of Friends, and Colleagues

In rural and remote practice the reality is that professionals' roles within the community overlap. From the data it appeared that workers constantly moved in and out of their different roles and, as a result, dual relationships with colleagues and other community professionals were inevitable:

> Well I seldom get repeat offenders but there is always someone new. You know like for instance my physician, who is not my physician anymore because he is retired, but he would come to me and talk about his children and their addictions and how to work on that. And it was always kind of a dilemma; was that a consultation? Was that a client relationship? You know? So sometimes those get a little iffy. So what I usually do is I will again ask for clarification, 'Okay are you approaching me as a client approaching a counsellor or in consultation about how to deal with an anonymous client?' (*participant 1ojy6*)

To maintain their professional identity within these dual relationships, either with family, friends, or colleagues, required some form of decision making. Participants described formal processes that included, for example, consciously weighing the potential risks and rewards:

> I always do the bigger picture of how could this play out - worst case scenario - and I've done that where I've taken on a client and my daughter is friends with their daughter and I was thinking is this where they then call me at home, are they going to start emailing me, are they going to cross that line of 'Hey'... *(participant 4ide9)*

or seeking supervision:

> I always seek supervision. I always let my supervisor know if I know somebody from the community or if I have a family member on my caseload or those kinds of things. You know, sometimes we need that extra pair of eyes to be like, 'Oh wait a minute, no, where did that decision come from?' *(participant 4rmv9)*

They also described a variety of informal and intuitive processes that included things like personal values:

> Well of course we are bound by our code of ethics, and that is the foundation from which you practice. And then within that of course you have to sort some things out yourself and so I think that in each individual circumstance I still have that foundation and then I seem to operate from additional layers of rules or boundaries for myself. *(participant 2gbg7)*

or 'comfort':

> I've had to do it. It depends upon the individual and the context in which they are there. It depends on their comfort level and mine. *(participant 1xsp6)*

Discussion and Conclusion

The participants in this study who shared their perceptions of the challenges they face in maintaining a sense of professional identity when working in a small community mostly supported the issues raised in the literature. Rural professionals are faced with a multitude of considerations. For these practitioners, maintaining a professional identity is a conscious effort. A combination of personal isolation and the need for integration, the pervasiveness of gossip and community scrutiny, lifelong connections to community members and overlapping roles were all reported as issues that impact the participants' construction of their professional identity.

Banks (1998) has noted how social work has struggled with its core values in the face of changing social trends and that these trends have raised questions about the potential loss of a specific professional identity for social work. This potential threat to identity would appear to be echoed by the comments from the respondents to this study, but for different reasons. It would seem clear from their reported experiences that the unique social context of rural and remote practice introduces challenges to a professional social work identity that are as significant as issues such as the rise of consumerism or the increasing importance of user participation that were considered by Banks as a threat to professional identity.

Two issues stood out in this research in particular. First was the situation of working in a community that the social worker had grown up in and the inevitable need for a transition from one identity, say as a youth, to another in the form of a professional and credible social worker. As the respondents indicated, being a life long member of the community accentuates all of the factors that pose a challenge to maintaining a professional identity that may be experienced by a newcomer to the community as well as introducing unique considerations. The sheer extent of social inter-connections such as extended family, old friends, and previous relationships and involvements (in their many forms), as Dreschler (1996) has indicated, is a particular challenge for workers in remote areas. It is a situation that contains many opportunities for role conflict with each being a situation where the social work role must be interpreted and decided upon.

The second issue that stood out was the situation of being thrust into circumstances of having to work with friends and family members of friends or colleagues. As there are no specific guidelines in the ethical code that reflect the reality of rural or remote practice with respect to managing these relationships, those interviewed indicated that they were required to use their own decision-making skills to ethically provide services to such clients. It was made clear by the participants that the obvious role conflicts in these situations required clear boundaries to be established and the potential issues in providing services to be carefully considered. However, it is an example of the dual relationship dilemmas arising in rural and remote practice that have frequently been articulated within the professional literature (Gripton & Valentich, 2004; Halverson & Brownlee, 2010; Pugh, 2007; Reamer, 2003) and represents a situation where the social worker can experience conflicts with the expectations of the profession for ethical conduct.

The situation of working with community members known to the social worker or where there was a previous link or involvement, whether this was unrecognized or unanticipated at first, nevertheless represents a boundary violation that can leave the worker vulnerable to professional regulations. The development of regulatory boards for social work and social service workers, such as in Ontario, which oversee professional conduct means that the vulnerability of the worker to some form of professional accountability has increased. Although rightly established as a means to protect the public, it raises concerns about the liability of workers who find themselves in contravention of the standards as a result of their willingness to provide services in remote areas when no other services are available. This is a dilemma that gives rise to some concern as Dietz and Thompson (2008) note, "we wonder whether we as practitioners, in our attempts to protect ourselves and our profession, have enacted barriers that separate us from our clients to their potential detriment" (p. 6). Similarly, Alexander and Charles (2009) state that when social workers respond to what they perceive as a critical need for care and the provision of social work services even though it encompasses a dual relationship it, "puts workers in a potentially untenable position caught between our codes of conduct and what they perceive to be a critical component of effective social work practice" (p. 20). It is surely an issue that requires further debate about the code of ethics (see Brownlee & Taylor, 1995; Taylor & Brownlee, 2000) and further study as it places some social workers in a particularly vulnerable position.

In summary, through interviews with workers in rural and remote areas, this study has demonstrated the high prevalence of multiple, inter-related relationships, the permeability of boundaries, and how these factors make it difficult to manage and maintain professional identity. The themes that emerged from the participant responses indicated a significant impact of context upon the maintaining of a professional identity. The responses from the participants have increased our understanding of the unique demands of the context especially the expectations and realities of relationship obligations as well as the influence of unconfirmed stories and anecdotes about people, including about the workers themselves, and how these influence professional activity. The findings also highlight two specific pressures related to context experienced by the respondents in this study, namely,

the expectation of working with friends and family members of friends or colleagues, and the challenge of working in a community that the social worker had grown up in. These two issues have not been studied extensively in the literature and both form a possible focus of future research in this area.

References

– Alexander, C. & Charles, G. (2009). Caring, mutuality and reciprocity in social worker-client relationships. *Journal of Social Work, 9,* 5-22.
– Banks, S. (1998). Professional ethics in social work – what future? *British Journal of Social Work*, *28*, 213-231.
– Brownlee, K. (1996). The ethics of non-sexual dual relationships: A dilemma for the rural mental health professional. *Community Mental Health Journal, 32*(5), 497-503.
– Brownlee, K. & Taylor, S. (1995). The Canadian Association of Social Workers Code of Ethics and non-sexual dual relationships. *The Social Worker*, 63, 133-136.
– Campbell, C. D. & Gordon, M. C. (2003).Acknowledging the inevitable: Understanding multiple relationships in rural practice. *Professional Psychology*, *34*, 430-434.
– Delaney, R.& Brownlee, K. (1996). Ethical dilemmas in northern social work practice. In R. Delaney, K. Brownlee & M. K. Zapf (Eds.), *Issues in northern social work practice* (pp.47-69). Thunder Bay, ON: Lakehead University Centre for Northern Studies.
– Delaney, R. & Brownlee, K. (Eds.). (1995). *Northern social work practice*. Thunder Bay, ON: Centre for Northern Studies, Lakehead University.
– Delaney, R., Brownlee, K., & Sellick, M. (Eds.). (1999). *Social work with rural and northern communities*. Thunder Bay, ON: Centre for Northern Studies, Lakehead University.
– Delaney, R. & Brownlee, K. (Eds.). (2009). *Northern and rural social work practice: A Canadian perspective.* Thunder Bay, ON: Centre for Northern Studies, Lakehead University.
– Dietz, C. & Thompson, J. (2004). Rethinking boundaries: Ethical dilemmas in the social worker-client relationship. *Journal of Progressive Human Services*, *15*, 1-24.
– Dey, I. (2007).*Grounding grounded theory: Guidelines for qualitative inquiry.* Bingley, UK: Emerald Group Publishing.
– Drechsler, G. (1996). My neighbour, cousin, and client: A response from the Yukon to Brownlee and Taylor on the ethics of non-sexual dual relationships. *The Social Worker, 64*, 1-3.
– Evans, M. (2008). When worlds collide: Understanding the intersection of the personal and the professional in social work practice In R. Pockett & R. Giles (Eds.), *Critical reflection: Generating theory from practice* (pp.1-15). Sydney: Darlington Press.
– Fine, M., & Teram, E. (2009). Believers and skeptics: Where social workers situate themselves regarding the code of ethics. *Ethics & Behavior, 19*(1), 60-78.
– Graham, J. R., Brownlee, K., Shier, M. & Doucette, E. (2008). Localization of social work knowledge in Canada's geographic norths: An exploratory qualitative analysis of practitioner adaptations to social work knowledge in northern Ontario and Northwest Territories. *Arctic*, *61*, 399–406.
– Green, R., Gregory, R. & Mason, R. (2006). Professional distance and social work: Stretching the elastic? *Australian Social Work*, *59*, 449–461.
– Gripton, J., &Valentich, M. (2004). Dealing with non-sexual professional-client dual/multiple relationships in rural communities. *Rural Social Work, 9*, 216-225.
– Halverson, G., & Brownlee, K. (2010). Managing ethical considerations around dual relationships in small rural and remote Canadian communities. *International Social Work*. *53*, 247-260.
– Hargrove, D.S. (1986). Ethical issues in rural mental health practice. *Professional Psychology: Research and Practice, 17*, 20-23.
– Krieg Mayer, A. G. (2001). Rural social work: The perception and experiences of five remote practitioners. *Australian Social Work*, *54*, 91-102.

– Mellow, M. (2005). The work of rural professionals: Doing the gemeinschaft-gesellschaft gavotte. *Rural Sociology, 70*, 50-69.
– Pugh, R. (2003). Considering the countryside: Is there a case for rural social work? *British Journal of Social Work, 33*, 67-85.
– Pugh, R. (2007). Dual relationships: Personal and professional boundaries in rural social work, *British Journal of Social Work,37*, 1405-1423.
– Reamer, F. G. (2003). Boundary issues in social work: Managing dual relationships. *Social Work, 48*, 121-133.
– Schmidt, G. (2009). What is northern social work? In R. Delaney & K. Brownlee (Eds.), *Northern and rural social work practice: A Canadian perspective.* Thunder Bay, ON: Centre for Northern Studies, Lakehead University.
– Scopelliti, J., Judd, F., Grigg, M., Hodgins, G., Fraser, C., Hulbert, C., Endacott, R., & Wood, A. (2004). Dual relationships in mental health practice: Issues for clinicians in rural settings. *Australian and New Zealand Journal of Psychiatry, 38,* 953–959.
– Simon, R. I., & Williams, I. C. (1999). Maintaining treatment boundaries in small communities and rural areas. *Psychiatric Services, 50*, 1441-1446.
– Statistics Canada (2007), *2006 Census Dictionary*. Retrieved November 2011, from http://www12.statcan.ca/census-recensement/2006/ref/dict/index-eng.cfm
– Taylor, S. & Brownlee, K. (2000). Non-sexual dual relationships: Challenging professional accountability. *Ontario Association of Social Workers: Newsmagazine, 27*(2), 1-2.
– Welfel, E. R. (1998). *Ethics in counseling and psychotherapy.* Pacific Grove, CA: Brooks/ Cole Publishing.
– Zapf, M. K. (1985). Home is where the target group is: Role conflicts facing an urban-trained social worker in a remote northern Canadian community. In W. Whitaker (Ed.), *Social work in rural areas: A celebration of rural people, place, and struggle* (pp. 187-203). Orono: University of Maine.
– Zapf, M. K. (2009). Northern service delivery: Strategies and considerations. In R. Delaney & K. Brownlee (Eds.). (2009). *Northern and rural social work practice: A Canadian perspective* (pp. 67-79). Thunder Bay, ON: Centre for Northern Studies, Lakehead University.