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Shortage of Licensed Independent Social Workers With the Training Supervision Designation

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This is to certify that the doctoral study by

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has been found to be complete and satisfactory in all respects,
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Walden University
2018

Abstract

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Designation

by

Justa Crystal Link

MSW, University of New England, 2014

BSW, Spring Arbor University, 2011

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Social Work

Walden University

August 2018

Abstract

There is a shortage of Licensed Independent Social Workers with the Training Supervision Designation (LISW-S) in a county in rural Ohio. If there are not enough LISW-Ss, social workers may not have the ability or opportunity to work independently or gain the supervision needed to become more competent in specific areas of practice. The purpose of this project was to gain a better understanding of why some social workers in rural Ohio decide not to pursue an LISW-S credential, as well as whether there are resources or incentives that might prompt individuals to pursue this credential. This action research project was grounded in systems theory, which helped in identifying interactions among systems that may influence an individual's decision to become an LISW-S. Purposive sampling was used to recruit participants ($N = 5$) from the Ohio Counselor, Social Worker, and Marriage and Family Therapist Board. A focus group was conducted to gather data from Licensed Social Workers. Participants mentioned they did not pursue the credential due to age, their employers not requiring it, being unaware of the added value, and because acquiring the credential was not a personal or a familial priority. The findings from this study may support positive social change at practice and policy levels by helping social workers overcome barriers to achieving the LISW-S credential, which could result in more competent, well-trained social workers who can provide valuable services to consumers. Further research on this topic is suggested to test the possible solutions provided by the participants and the findings of the study.

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Dedication

I would like to dedicate this to my fiancé, friends, and family, who have always been supportive and understanding of all my goals. To Clayton, my fiancé, who spent many days and nights patiently waiting while I worked on this project and supporting me through the entire process. To my family, especially my mom, Brenda, for always encouraging me to go further in life. To my stepdad, Kevin, for believing in me. To my sister, Jill, for being a rock for me throughout life. To my friends, who always understood when I was not able to spend time with them due to my "homework." Thank you all for supporting me and encouraging me to reach my biggest goal in life: obtaining a doctoral degree. I love you all and cannot wait for free time to spend with you!

Acknowledgments

I want to extend a special thank you to the faculty members who have supported me along the way to this point in my academic career. To Dr. Nancy Campbell and Dr. Debora Rice, thank you for pushing me and encouraging me along the way, helping me to become the best researcher I can be. To Dr. Annette Anderson-Engler, thank you for always providing positive encouragement.

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Section 1: Foundation of the Study and Literature Review

There is a gap in the research related to the shortage of Licensed Independent Social Workers with the Training Supervision Designation (LISW-S) in rural Ohio. In this action research project, I sought to address this issue by identifying possible barriers, perceptions, and influences that may impact the decision to obtain the licensure. The first research question that I addressed was the following: Why do social workers in rural Ohio decide not to pursue an LISW-S credential? The second research question was the following: Are there resources or incentives that would make participants decide to pursue the LISW-S credential? Using an action research project with a qualitative component, I sought to answer these questions to inform future research and benefit social workers and the consumers who receive services from them.

This project is divided into four sections. The first section includes the problem statement, purpose statement, research questions, nature of the doctoral project, significance of the study, theoretical/conceptual framework, values and ethics, and a review of the professional and academic literature. Section 2 identifies the research design, methodology, data analysis, and ethical procedures. Section 3 identifies the data analysis techniques and findings. Section 4 identifies the application for professional ethics in social work practice, recommendations for social work practice, and implications for social change.

Problem Statement

There is a limited number of LISW-Ss in rural Ohio. For example, as of July 17, 2016, there were only 13 social workers with an LISW-S license in the area of focus,

compared to 56 Licensed Social Workers (LSWs) and three Licensed Independent Social Workers (LISWs; Ohio License Center, n.d.). As of July 17, 2016, there were approximately four active Registered Social Work Assistants (SWAs) and one active Social Work Trainee (SWT) in the county of focus (Ohio License Center, n.d.). As of July 11, 2016, there were approximately 483 active SWAs, 147 active SWTs, nine active temporary LSWs, 15,955 active LSWs, 2,718 active LISWs, and 5,260 active LISW-Ss in Ohio (Ohio Counselor, Social Worker, and Marriage and Family Therapist Board [Ohio CSWMFT Board], 2016). I sought to understand why social workers in rural Ohio decide not to pursue an LISW-S credential.

The lack of LISW-Ss could create a problem relevant to professional practice because there might not be enough supervisors for the social work interns in educational settings, LSWs who wish to pursue an LISW, or those who are seeking any type of higher licensure. Per Beddoe (2017), supervision training is essential for professional growth, learning, and development. However, some LISW-Ss are only allowed to provide training to social workers at their place of employment (K. Laughlin, personal communication, July 30, 2016), which decreases the number of LISW-Ss available to provide training supervision.

Purpose Statement and Research Questions

This project was an action research project with a qualitative component to better understand why social workers in rural Ohio do not pursue an LISW-S license. The findings helped me to gain a better understanding of influences on the decision to obtain an LISW-S. Social workers, educational institutions, agencies and organizations that

employ social workers, and future researchers could benefit from the findings from this action research project. Social workers may be able to better understand the barriers that may accompany the licensing process. Educational institutions may be able to use the findings to incorporate education regarding the licensing process for new social work students. Agencies and organizations may apply the findings in seeking ways to help employees obtain higher licensure. I sought to address a gap between supply and demand, as well as inform others of possible solutions to the problem.

The foundational research question in this study was as follows: Why do social workers in rural Ohio decide not to pursue an LISW-S credential? The second research question was as follows: Are there resources or incentives that would make participants decide to pursue the LISW-S credential? The questions were related directly to the literature because there is an obvious difference in the number of LSWs compared to LISWs and LISW-Ss in the county of focus. If insight can be provided as to why social workers decide not to pursue an LISW-S credential, these barriers may be addressed in the future to possibly improve the perception of licensure and the process of becoming an LISW-S, as well as increase the numbers of LISW-Ss.

Background of the Problem

Legislation has led to mandated supervision requirements for those practicing social work (Beddoe & Howard, 2012). With the supervision requirements came increased demand for licensed independent social work supervisors with the training supervision designation (Beddoe & Howard, 2012), also known as LISW-Ss in Ohio. However, there is a documented lack of trained supervisors (Beddoe & Howard, 2012).

Because supervision is critical for the effectiveness and well-being of practitioners and because inadequate supervision could be damaging to supervisees (Beddoe, 2017), the shortage of LISW-Ss in rural Ohio could impact the future availability of trained supervisors to guide and support current and incoming social workers. Schweitzer, Chianello, and Kothari (2013) also mentioned that a professional and stable workforce contributes to a quality social service system.

LISW-Ss have the legal ability to provide training supervision to social workers who wish to obtain new licensure or develop in areas of proficiency, per Ohio Administrative Code 4757-23-01 (Lawriter, n.d.). Training supervisors can assist with providing direction to supervisees, as well as enhancing supervisees' professional growth and development (Lawriter, n.d.).

The high demand for licensed independent social workers with the training supervision designation has impacted the rates charged for supervision as well, making it a service with a market value (Beddoe, 2012). Some agencies may provide supervisors and/or pay for supervision, but others may not, which means that social workers seeking training supervision may need to pay for supervision and/or find supervisors using their own means (Beddoe, 2012). Those who lack the financial resources or time needed to travel to or attend supervision may never obtain the LISW-S credential.

Improving My Social Work Practice

The knowledge that I have gained from my research on this social issue will likely improve my social work practice. An increased understanding of why social workers do not seek to become LISW-Ss may help me to advocate for and assist others with the

process of becoming an LISW-S. Understanding the factors that influence the decision not to obtain the licensure will also help me to promote social change by addressing those factors. If I can help fellow social workers to become independently licensed and to obtain a training supervision designation, I may also be able to help consumers in need of services, in that more experienced social workers may be better equipped to help those in need or may be able to help in different ways than those with less experience, training, or capability. Those who become LISW-Ss would be able to help LSWs and LISWs gain what they need to advance and help consumers in need. With more LISW-Ss, interns would be able to receive the supervision needed to fulfill requirements for a social work degree.

Furthering My Professional Development

This study has furthered my professional development. The research has helped me to gain increased understanding of certain barriers that may exist, and I will be able to use this information in my professional life. The information that I have gathered will help me when I supervise others who wish to become LISW-Ss. To become a competent supervisor, I will need to learn more about supervision. This study has provided insight on ways that I can work on issues with supervisees during their training supervision and help them understand and overcome perceived barriers to licensure and completion of requirements.

Influencing Other People's Learning

This study may influence other people's learning. Leaders of organizations that require employees to obtain licenses with the training supervision designation must

understand all aspects of what is involved and ways that they can help their employees to be successful. Educational institutions and accrediting institutions may also gain knowledge from this study to determine barriers and needs for interns or other students in social work programs. Additionally, this study may influence the learning of those who wish to become LISW-Ss by offering information on what others have faced in the credentialing process, which could help them to prepare for, avoid, and overcome barriers. It may also help licensing boards and educational institutions to help potential licensees. They may be able to provide students and social workers with additional education, support, and resources that may help them to overcome barriers. The publication of the findings of this study could be useful to others seeking information about why LISWs do not pursue the training supervision designation. Publishing the findings will help to fill the gap in current literature on why this certification is not often sought. Dissemination of the results of this action research project could provide more information to researchers regarding the use of online focus groups. According to Woodyatt, Finneran, and Stephenson (2016), comparable data could be beneficial to inform the quality of data obtained from the use of online focus groups. Social workers may also benefit from dissemination of this action research project, which may assist them in determining barriers to licensure and possible ways to overcome them.

Nature of the Doctoral Project

Action research is a form of social science and a process of action and reflection, with action researchers who facilitate the process (Coghlan, 2016). Action research is self-reflective, practice oriented, and experientially rooted, and it involves interaction and

collaboration (Coghlan, 2016). Action research seeks to address issues that are of pressing concern to others and, in developing practical solutions to these issues, contributes to the increased well-being of people and communities (Touboulic & Walker, 2016). This aligns with the profession of social work because social work's purpose is to help, educate, and provide support for others (National Association of Social Workers [NASW], 2017).

Research Methodology/Definitions

An action research project with a qualitative component was used to increase understanding of why social workers do not pursue the LISW-S credential. An online synchronous focus group was conducted through Adobe Connect. Advantages of using online focus groups include broadened options for participation recruitment and data collection methods through use of the Internet (Woodyatt et al., 2016), as well as real-time audio and visual interaction (Tuttas, 2015). An online focus group can also be recorded, which allows the researcher to review the video to note nonverbal cues such as facial expressions and body language. Tuttas (2015) noted that the Internet allows for spontaneity in participants' responses and increased accessibility, in that anyone who has an Internet connection can attend. Woodyatt et al. (2016) mentioned that more sensitive topics arose in online focus groups than in-person groups, which could be due to an increased sense of safety and comfort in the group environment. Ybarra, DuBois, Parsons, Prescott, and Mustanski (2014) found that online focus groups are low-cost interventions that help participants to address sensitive topics with increased comfort. A disadvantage of online focus groups is that it is only possible to see what is recorded by

each participant's camera; certain aspects of body language may not be seen, recorded, or observed if a person is only seen from the waist up. Another potential disadvantage is lack of access to the meeting link on certain devices. Moreover, little is known about the quality of data obtained during online focus groups (Woodyatt et al., 2016). As the researcher, I was a facilitator, a colearner with the participants, and an analyzer of data. The participants were colearners and educators on the issue.

The stakeholders of an action research project are those individuals who will benefit from it. The participants recruited for this project were LSWs and LISWs licensed in the state of Ohio. In documenting issues with training supervision, I focused on the supervision needed to meet social work program requirements for obtaining a new license in Ohio and/or to develop in areas of competency and proficiency. The word 'supervision' may take on various definitions throughout this project depending on a state's definition. For more specific operational definitions, see Section 2.

Data Collection

Data were collected from participants through email and focus groups. Participants were recruited through email using public contact information obtained from the Ohio CSWMFT Board. Those recruited included LSWs and LISWs in a county in rural Ohio. Registered Social Work Assistants and Registered Social Work Trainees were not allowed to participate in this action research project because individuals in these roles are not officially licensed or able to obtain status as LISW-Ss. The information obtained through the invitation emails was used to gain insight into those who were eligible and wished to participate. The emails included two attachments: an informed consent form

and a list of mental health providers in the county. Once participants responded, a confirmation of participation email was sent with a demographic questionnaire email attachment to collect demographic information from participants. McNiff and Whitehead (2010) mentioned that a researcher can either create an original questionnaire or can use one that has already been piloted. For this action research project, I constructed my own demographic questionnaire.

Stringer (2007) mentioned that focus-group questions should be provided and displayed for participants. Therefore, there was a focus group protocol that was available for review as a shared document during the focus group. The protocol provided the questions that were asked of participants, as well as the outline for the group protocol.

I took notes during the focus group to indicate any verbal and nonverbal cues, as well as any other information that might prove useful in the data analysis. Times of the cues and notes were recorded during the session so that they could be easily identified when I later reviewed a recording. I audio recorded the focus group to collect audio data. When reviewing the audio recording, I noted verbal cues that I had missed during live observation of the online focus group. The transcript also included notes on cues such as laughing. As mentioned by Tuttas (2015), body language may not be observed if a participant's camera is recording the participant only from the waist up. However, certain cues, such as nodding in agreement or shaking the head in disagreement as well as facial expressions that may have indicated agreement or disagreement with another participant's statements, were available for observation.

Because there were technical challenges, as Tuttas (2015) noted that there may be in a focus group, I asked that participants type responses in the message box or repeat their responses if they were inaudible. Following the focus group, a professional transcriptionist transcribed the audio recording verbatim and identified responses as corresponding to a guest number or to me (the researcher). The transcript was then imported into and analyzed through NVivo software, where all data were stored, organized, coded, and analyzed. NVivo supports qualitative and mixed-methods research and is helpful in gaining insight into and asking questions of data, as well as with relationship and matrix coding and content analysis (QSR International, n.d.).

Significance of the Study

This study contributes to the field of clinical social work. Social workers, researchers, and consumers may benefit from this research. Social workers may increase their competence and success in their work through education and training (Wermeling, Hunn, & McLendon, 2013), which can be acquired by pursuing an LISW-S license. By completing education requirements before and after licensure (Ohio CSWMFT Board, n.d.), social workers can gain information to inform their practice and increase the assistance they offer to others. Once individuals receive supervision and meet additional requirements to become LISWs in Ohio, they can obtain 9 hours of additional training regarding supervision or complete a master's-level course in supervision from an accredited university (Ohio CSWMFT Board, n.d.). Then, they may apply for the training supervision designation after 1 year of holding the LISW credential, in addition to paying appropriate fees as required by the Board (Ohio CSWMFT Board, n.d.). The education

and training that social workers receive can reflect on their practice in the clinical arena with their clients (Wermeling et al., 2013), demonstrating increased competence and capabilities.

For participants, the significance of this study resided in its impacts on the present profession of social work and the future of this field. Greater insight into why social workers do not pursue LISW-Ss may inform the development of solutions to this issue. It could also lead to the participants finding solutions for barriers of their professional endeavors if they wish. Additionally, it may inspire further research on this issue or further advocacy for the profession.

The implications of this project for social change are that it may educate people about this issue, help those who are supervisors and supervisees, and lead to further research to test the possible solutions provided by the participants and findings from the study. Social workers may be able to find answers that they need to pursue professional goals, and their competence may increase if they are able to identify necessary resources and support. Consumers may benefit by receiving services from social workers who are more competent and have a better understanding of the field. Additionally, the gap in the research may be partially filled with information from this study due to participants providing insight on this issue.

Theoretical/Conceptual Framework

The underlying theory for this action research capstone project was systems theory. Systems theory was originally developed by von Bertalanffy and Weiss (Witherington, 2014). Von Bertalanffy and Weiss recognized that there are reciprocal and

nonlinear relations and interactions among components of open systems (Witherington, 2014). Systems and relations among systems can also be closed or restrictive, depending on the boundaries that are set in place (Caws, 2015). For example, if the system of social workers is restrictive to the amount of information regarding licensure, some social workers may not understand what is required to obtain licensure to or how they may be able to advance. When systems are open, there are components imported and exported, which represents change (von Bertalanffy, 1950). Therefore, there may be open, closed, or restrictive components in the system that may allow or disallow interactions and sharing of elements (Caws, 2015). Open systems have continuous flows of materials in a steady state and are necessary for an organism's continuous working capacity (von Bertalanffy, 1950). An example of a restrictive or closed component is lack of education on preparing for the licensure examination, which can result in a social work candidate being unprepared and possibly failing the exam. An example of an open system is one that makes available all the necessary information for and removes all obstacles to a social worker completing requirements and obtaining licensure.

Systems Theory and Understanding the Problem

Since there were only 13 LISW-Ss, 56 LSWs, and three LISWs in the community at the time of the project proposal, it showed that some people had reached the LISW-S status by completing all requirements and that this is not an impossible feat. At the time of recruitment, there were 15 LISW-Ss, 54 LSWs, and two LISWs in the county of focus. There were LSWs and LISWs in the community, which indicated that there were some people who had not yet obtained or chosen to pursue the LISW-S credential. Rousseau

(2015) mentioned that the founders of systems theory believed that civilization was at
risk due to potential environmental, human, and social crises. This metaphor also applies
to the number and availability of LISW-Ss who will be able to guide the way for and
teach potential LISW-S candidates in Ohio. The future of social work may be in danger if
there are not enough new social workers being licensed, which could result in demand
outweighing supply. New social work candidates may also be at risk for not getting the
supervision they need to advance as clinical social workers. Additionally, consumers may
be at risk if the social workers who treat them are not well educated to provide services.

Systems Theory and the Intention of the Action Research Project

Systems theory may be used to explain the intention of this action research
project, in that I wished to explore the interactions and exchanges among systems that
may impact the decision to pursue an LISW-S credential. Rousseau (2015) mentioned
that the intention of the founders of systems theory was to develop a pathway to a better
world. Through this action research project, I intended to do the same; I sought to
discover the roots of the problem and identify barriers and factors that influence decisions
and outcomes in order to increase the number of LISW-Ss available to train future social
workers in the field.

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Values and Ethics

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There are principles and values from the Code of Ethics of the National
Association of Social Workers (NASW, 2017) that relate to this study. The NASW's
statements on the value of social justice and the principle of social workers challenging
social injustice apply to this project, in that the NASW (2017) indicates that social

workers must strive to ensure access to resources and services. Striving to ensure that necessary resources and services are available to future and current social workers to provide services to other social workers and consumers coincides with this value and principle. Discovering solutions that may be able to connect appropriate supervisors to those in need demonstrates this aspect of the NASW Code of Ethics.

The NASW value concerning the importance of human relationships and the principle of recognizing the central importance of human relationships also apply, as they reflect an understanding that relationships are important vehicles for change (NASW, 2017). The relationships between supervisors and supervisees are important because they demonstrate and help to educate social workers about the practice and mission of social work. The findings from this study could promote communication between supervisors and supervisees to increase supervision in the profession.

The value of competence and the principle of developing and enhancing expertise reflect an understanding that social workers should enhance knowledge and contribute to the knowledge base of the profession of social work (NASW, 2017). These apply because in this action research project I sought to explore potential reasons that more social workers are not pursuing the LISW-S credential in Ohio. By exploring this issue, I hoped to increase others' knowledge about it, as well as develop potential solutions that could lead to increased levels of knowledge and competence in those who would like to provide or receive training supervision.

The NASW (2017) has stated that social workers have ethical responsibilities to their colleagues. This action research project coincides with this ethical standard because

I sought to determine why there were not more social workers pursuing the LISW-S credential, when pursuance of the credential could help provide supervision and education to future social workers. Social workers should seek the counsel of more experienced and trained social workers to provide quality services to consumers and to have the best interests of consumers in mind (NASW, 2017). If there is a shortage of LISW-Ss, there may not be counsel available to those seeking guidance and education.

Evident Values in Clinical and Training Supervision

It is evident that there must be positive relationships in the supervision process. As Lawriter (n.d.) stated, supervisors must take responsibility for the services provided by supervisees and for the well-being of the consumers who are receiving these services. Additionally, if supervisors are providing guidance and support to social work supervisees, as Lawriter (n.d.) mentioned, they are fulfilling their ethical responsibilities to colleagues by assisting them in becoming more competent and knowledgeable. Manthorpe, Moriarty, Hussein, Stevens, and Sharpe (2015) reported that supervision can provide guidance to newly licensed social workers to help them manage their workload and provide higher quality services. Essentially, supervision demonstrates the act of helping other social workers and those in need, which is ethical per the Code of Ethics of the NASW (NASW, 2017).

Review of the Professional and Academic Literature

There is a shortage of LISW-Ss in rural Ohio, along with a gap in the literature about the shortage of LISW-Ss in rural Ohio. A theoretical literature review was completed to understand systems theory and the ways it relates to the issue and this

project. An empirical literature review was also completed in an attempt to understand this issue and the various areas that impact this issue.

To identify relevant peer-reviewed literature, I accessed the following databases from the Walden Library: SocINDEX, Thoreau, PsycARTICLES, and PsycINFO. The following key words were used for searches: *systems theory, clinical supervision, NVivo, Adobe Connect, online focus group, clinical social workers* and *shortage, clinical social work supervision* and *shortage, licensed independent social worker* and *lack,* and *independent social work* and *licensure.* Key words searched also included *clinical social work* and *supervision, clinical social worker* and *independent licensure, training supervision,* and *social work retention rates.* Other key words included *social workers* and *certifications* or *licenses, social workers* and *licensure, social workers* and *credentials, social work* and *license, social work* and *credentials, supervision* and *nursing,* and *internships* and *social work.* Full text, peer-reviewed articles were searched for in the English language from the years 2013-2018.

Theoretical Literature

There are important aspects of systems theory for understanding this area of clinical practice. Systems theory posits that a system is a whole with components and parts that interact with and influence each other (Witherington, 2014). Relations occur among the parts and components of a system and provide a background for understanding certain processes that may occur within the system (Witherington, 2014). From this perspective, one can state that there are interactions within the system that influence one

to obtain an LISW-S, as well as impact the ability and perceptions of the components of the system—in this case, the social workers.

The context for understanding and explaining the elements for clinical practice is that social workers' licenses impact their ability to provide services to both consumers and other social workers. For instance, an LSW in Ohio can provide interventions such as counseling, evaluation, psychosocial intervention, intervention planning, and social psychotherapy under supervision (Ohio CSWMFT Board, n.d.). LISWs in Ohio can provide the same services as well as diagnose and treat mental and emotional disorders without the supervision of another, and they may also engage in private practice (Lawriter, n.d.). LISW-Ss may provide all the services of LSWs and LISWs, and they can also provide training supervision and clinical supervision (Lawriter, n.d.). *Clinical supervision* consists of supervising a nonindependent social worker who is providing services to consumers to evaluate the supervisee's performance, provide guidance, approve interventions, assure that the supervisee is practicing within his or her competency, and assume responsibility for the supervisee's clients' welfare (Lawriter, n.d.). Training supervision is provided to supervisees obtaining a license or seeking development in new areas of knowledge and competency; the supervisor provides direction to support growth and development, competency in areas of practice, and adherence to ethical procedures to protect the welfare of consumers (Lawriter, n.d.). Training supervision is important for those who need to obtain new licensure or knowledge or to become independently licensed. It also plays an important role in

protecting consumers who are receiving services by ensuring that clinicians are competent, knowledgeable, and ethical.

Empirical Literature

The current state of the empirical research related to this study is limited. There are no known research studies related to the shortage of LISW-Ss in Ohio. However, there is existing research regarding the origin of clinical supervision, reasons for entering social work, factors and perceptions that could influence the decision to become licensed, knowledge about becoming licensed and taking licensing examinations, retention rates in the field of social work, availability and quality of supervision by social workers, perceptions of supervision, and supervisors' perceptions. The Council on Social Work Education and the Association of Social Work Boards also play roles in the field of social work, as will be discussed in the literature review.

The literature review includes information specific to Ohio, including requirements to become licensed, activities that require supervision, clinical supervision, training supervision, responsibilities and requirements of supervisors, continuing education for licensees, and the role of supervision within internships. The research addressed in this review also includes comparisons to other states' requirements for social work licensing in the United States. Finally, I provide information on the tools that were used in the action research project, including an online focus group, Adobe Connect, and NVivo.

Origin of clinical supervision. Clinical supervision dates to the 1920s, when the Organized Charities Association employed a case study committee to supervise case

workers who were going to serve people in their homes (White & Winstanley, 2014). The

case study committee would discuss individual cases, and the staff would learn from and

support each other in meetings (White & Winstanley, 2014). Eitington was said to be one

of the originators of psychoanalytic supervision, although it was never actually labeled as

such (Watkins, 2013). Eitington documented issues addressed in supervision, such as

supervisee learning issues, screening, and rationale, along with times and length of

supervision (Watkins, 2013). In 1926, John Dawson, the secretary of the Community

Chest of Greater New Haven, Connecticut, set guidelines for the supervisors of case

workers (White & Winstanley, 2014). Guidelines included coordinating casework

practice with the administration's ideals, promoting and maintaining good standards,

assisting with educational development for each case worker, making casework

experience results available for formulation of methods and policies, and cultivation of

loyalty among staff toward each other and the organization (White & Winstanley, 2014).

      Reasons for entering social work. There are factors that influence individuals to

enter social work. According to Schweitzer et al. (2013), social workers may go into the

field seeking a sense of fulfillment. People may also enter the field because they have

experienced disruptions in their personal lives (Turner, 2015). Berglund (2015)

mentioned that personal experiences may contribute to individuals' motivations to

become social workers. On a personal level, Berglund disclosed that she loved being a

social worker, teaching future social workers, and working with consumers in direct

practice.

Bradley, Maschi, O'Brien, Morgen, and Ward (2012) used a cross-sectional survey descriptive design to examine motivational factors for 245 LCSWs in New Jersey to enter the field of social work. Variables included age, gender, race/ethnicity, highest advanced degree earned, years of social work experience, clinical practice setting, and central interest (Bradley et al., 2012). Findings indicated that commitment to work for others' liberty, equality, and dignity; interest in working with people individually; and themes of social justice, service, and problem solving all influenced the decision to enter the field of social work (Bradley et al., 2012). Most social workers also reported values, ethics, and practices that were consistent with the mission of the social work profession, noting that there was a desire to work toward social change and to advance individuals' rights (Bradley et al., 2012). Deckert and Canda (2016) found that students at a Mennonite college chose to enter the field of social work because the values in the profession coincided with their faith tenets and allowed for serving others, showing compassion, working with marginalized populations, and assisting with transforming communities. Bradley et al. (2012) also mentioned that social work education may be improved if there is inclusion of feminist and narrative approaches, restorative justice, sociocultural perspectives, and other strategies that illustrate social justice.

Influences on becoming licensed. Synthesis of existing research implies that there are factors and perceptions that contribute to and influence the decision to become licensed (Miller, Deck, Grise-Owens, & Borders, 2015a; Miller, Deck, Grise-Owens, & Borders, 2015b; Miller, Grise-Owens, & Escobar-Ratliff, 2015), which can impact the ability to provide services in a clinical setting. Miller et al. (2015a) used an online cross-

sectional survey research design in 2014 with 223 social work graduate students in

Council on Social Work Education (CSWE)-accredited social programs in (state name

omitted) to determine the plans and perceptions of social work licensing and gather

demographics of the participants. Variables included race, gender, age, employment

status (full time or part time), program of enrollment, anticipated graduation year, and

current licensure status (Miller et al., 2015a). Findings indicated that the factors that

influenced the decision to become licensed included marketability for being hired,

uncertainty about the licensing process and laws, costs of obtaining and maintaining a

license and taking the examination, and the ways in which education has impacted the

ability to pass the licensing examination (Miller et al., 2015a). Plitt Donaldson, Fogel,

Hill, Erickson, and Ferguson (2016) mentioned that educational requirements have

complicated the ability to become licensed in some areas, which could be influencing

individuals' desire or capability to become licensed. Participants also mentioned barriers

of anxiety about taking the examination; time constraints; inability to balance work,

school, and practicum; procedural delays; and intrinsic limitations (Miller et al., 2015a).

The majority agreed that licensing was personally important and valued by their

universities, that social workers should be licensed, and that licensing demonstrates

competence, skill, knowledge, and qualification (Miller et al., 2015a).

Knowledge about licensing. Research indicates there is knowledge about the

licensing laws and confidence in ability to pass the licensing examinations (Miller et al.,

2015b), which conflicts with Miller et al.'s (2015a) study. Miller et al. (2015b) conducted

a study in 2014 using a cross-sectional survey research design online with 203

undergraduate students in CSWE-accredited social work programs throughout a southeastern state (name omitted). Variables included knowledge, beliefs, and perceptions regarding social work licensing, plans to take licensing examinations, confidence about passing the licensing examination, levels of ambiguity about taking the examination, factors influencing decisions to take/not take the examination, and the state and social work programs (Miller et al., 2015b). Findings indicated that there are major perceived barriers to obtaining a license and that there is ambiguity about licensing at the undergraduate level, lack of preparation for taking the examination, and lack of knowledge about what is required to take the examination, as well as a desire to receive better preparation to take the examination (Miller et al., 2015b). The authors noted that there is a positive outlook for social work licensing and there should be changes and improvements for social work education (Miller et al., 2015b). Grise-Owens, Owens, and Miller (2016) recommended recasting licensing in social work to promote congruence between education and professional competency.

Retention rates. There are factors that impact decisions to remain in the social work field (Wermeling et al., 2013). Lin, Lin, and Zhang (2016) reported that the shortage of social workers is projected to worsen dramatically in at least 30 states by 2030, representing a deficit of about 195,000 social workers. Wermeling et al. (2013) conducted a study using an online survey administered to 785 graduates of CSWE-accredited Master of Social Work (MSW) programs in a mid-south region of the United States who graduated between the years 1985 and 2005 and maintained contact with their alumni association (Wermeling et al., 2013). Dependent variables included the intention

to leave the social work profession, being out of the workforce, and intending to return to the profession of social work (Wermeling et al., 2013). Independent variables included labor force demographics, career employment, mobility of the labor force, type of undergraduate degree held by participants, year in which the MSW degree was received, area of concentration, and types of licenses or certifications held (Wermeling et al., 2013). Findings indicated that discontent and dissatisfaction with social work education, as well as lack of adequate preparation received through social work education, impacted decisions to remain in the social work field (Wermeling et al., 2013). Findings also indicated that a small majority of participants held social work licenses and that there should be research in the future addressing this issue (Wermeling et al., 2013). There is a need to increase the number of social workers to address diverse needs and populations in the United States (Lin et al., 2016).

Availability and quality of supervision. Research indicates deficiencies in the availability and quality of supervision by social workers (Howard, Beddoe, & Mowjood, 2013). Manthorpe et al. (2015) suggested that employers should be made aware of the importance of supervision as it helps to provide quality assurance as well as professional resilience. Due to poor availability and quality of supervision, some social workers decide to obtain interprofessional supervision (Howard et al., 2013). Howard et al. (2013) conducted a study in 2009-2010 with 243 social work and psychology professionals in Aotearoa, New Zealand who were engaged in offering and/or receiving interpersonal supervision (IPS). Variables included professional development stages of the participants, alternative profession-specific development, and workplace support (Howard et al.,

2013). Findings indicated that there are both advantages and disadvantages of IPS, as well as reasons for seeking IPS, including lack of availability of quality trained same-profession supervisors, both in the profession and in the region of sampling (Howard et al., 2013). Findings also indicated that the disadvantages of IPS included lack of shared theories and knowledge (Howard et al., 2013).

Perceptions of supervision. There seems to be a consensus that social workers should have social workers as supervisors (Hair, 2013). Hair (2013) conducted a concurrent mixed-model nested research design in Ontario, Canada that involved 636 social workers who resided in Ontario and had completed a bachelor's, master's, or doctoral degree in social work, who had previously been or currently were being supervised following their first degree completion, and who called themselves social workers or performed social work services with different populations (Hair, 2013). Variables included gender, type of social work degree, age range, years of practice, geographical setting, work setting, and service focus (Hair, 2013). Through the quantitative and written responses on the questionnaires, findings indicated that there were many participants who believed that supervision should promote knowledge and skill development and focus on administrative tasks (Hair, 2013). According to Manthorpe et al. (2015), social workers reported they appreciated supervision and that it contributed to the quality of their work. It was also found that some participants thought that supervision provided by organizations tended to have other agendas besides developing skills and knowledge, and that social workers should have separate supervision for administrative and clinical purposes, that supervisors should be held

accountable, that supervisors should be sought outside social workers' work settings, and that supervisors should be able to balance their responsibilities (Hair, 2013). Overall, supervision was perceived as beneficial to both new and seasoned professionals as a means to promote quality service for consumers (Hair, 2013). Social workers have also reported that more frequent, quality supervision assisted with managing workloads and improved professional practice (Manthorpe et al., 2015).

Perceptions from supervisors. Per Borders and Giordano (2016), beginner supervisors may be reluctant or anxious to give feedback to supervisees, and even more reluctant to use confrontation, especially when addressing issues such as conflicts in supervisory relationships, incompetence of supervisees, poor professional boundaries or relationships, and inability to follow protocols. Supervision could be used to educate new supervisors how to appropriately confront supervisees (Borders & Giordano, 2016). Manthorpe et al. (2015) reported that managers found that there was a lot of pressure associated with providing effective and proficient supervision to those in need. In a study by Borders and Giordano (2016), practicum students in a counselor education program were monitored to determine the students' comfort levels as new supervisors. The new supervisors were anxious, were often indirect, doubted their competence as supervisors, and were afraid to negatively impact the supervisory relationships (Borders & Giordano, 2016). However, there were epiphanies in which the supervisors could overcome negative thoughts and fears to successfully and effectively address issues using confrontation (Borders & Giordano, 2016).

Council on Social Work Education. The Council on Social Work Education

(CSWE) is the national accrediting association for baccalaureate and master's degree

levels social work education programs to enhance the education and quality of services,

future leadership roles, and evidence-based practices provided by professionals who

attend the accredited institutions (Council on Social Work Education [CSWE], n.d.). The

CSWE also promotes faculty development, advocates for the field of social work through

education and research, and engages in international collaborations (CSWE, n.d.). The

Council for Higher Education Accreditation (CHEA) sets requirements for the CSWE

and other accrediting agencies to ensure the agencies' accreditation processes

demonstrate accountability and the ongoing review of practice, employs fair procedures,

and advances academic quality (CSWE, n.d.). The CSWE's Commission on

Accreditation (COA) develops the accreditation standards for the social work programs

and the CSWE Office of Social Work Accreditation (OSWA) administers the

accreditation process through site visits, studies, and COA reviews (CSWE, n.d.).

Accredited educational institutions must explain how their missions and goals are

consistent with the profession of social work's goal, mission, purpose, and values

(CSWE, 2015). Courses offered at the accredited educational institutions should ensure

that different areas of competence are met, such as demonstrating ethical and professional

behavior, engaging, assessing, intervening, and evaluating practice with individuals,

families, groups, organizations, and communities, engaging in policy practice, practice-

informed research and research-informed practice, advancing human rights and social,

economic, and environmental justice, and engaging diversity and difference in practice

(CSWE, 2015). Additionally, programs must ensure that students can demonstrate the

practice behaviors that integrate the components of each competency (CSWE, 2015). As of October 2016, there were 511 accredited baccalaureate and 250 accredited master's social work programs, as well as 17 baccalaureate and 16 master's social work programs in candidacy (CSWE, n.d.).

In addition to requirements for coursework, there must also be field education at each degree level, per the CSWE (2015). There should be at least 400 hours of field education for baccalaureate programs and at least 900 hours for master's programs (CSWE, 2015). Interns at the baccalaureate level should have a field instructor who holds a baccalaureate or master's degree in social work from a CSWE-accredited social work program and have at least two years of post-degree social work practice experience (CSWE, 2015). Interns at the master's level should have a field instructor who holds a master's degree in social work from a CSWE-accredited social work program and have at least two years of post-master's degree experience in the field of social work (CSWE, 2015). If a field instructor does not have the type of degree or practice experience, then the program in which the intern is enrolled will assume full responsibility for reinforcing the social work perspectives and they also must describe how this was accomplished without background in social work (CSWE, 2015). However, the requirement of a field instructor with a master's degree in social work for the master's degree field students helps to ensure that there is training in the specialized areas beyond the generalist areas of knowledge (CSWE, 2015).

Association of Social Work Boards. The Association of Social Work Boards (ASWB) is a nonprofit organization that ensures social work regulation and is owned by

and comprised of the social work regulatory boards and colleges in the 50 United States, the 10 Canadian provinces, Guam, the United States Virgin Islands, the District of Columbia, and the Northern Mariana Islands (Association of Social Work Boards [ASWB], n.d.). The ASWB owns and maintains the examinations that are used for social work licensing boards to test a social worker's competence to practice (ASWB, n.d.). The ASWB currently maintains four licensure examinations, including the Bachelor's, Master's, Advanced Generalist, and Clinical examinations (ASWB, n.d.). However, not all jurisdictions use all the examinations, as each board's requirements differ (ASWB, n.d.). Each electronically-administered examination consists of 150 scored questions and 20 pretest questions to determine use on future examinations, although the questions are not distinguished during the test (ASWB, n.d.).

Candidates must register for the examination by applying and paying the appropriate fees (ASWB, n.d.). The Bachelor's and Master's Examinations are $230 each and the Advanced Generalist and Clinical Examinations are $260 each (ASWB, n.d.). Candidates must score 93-106 questions correctly, depending on the examination to pass the examination and candidates will receive the results immediately following completion of the examination (ASWB, n.d.). The examinations must be taken at a Pearson Professional Center location in the world and candidates are allowed four hours to take the examination (ASWB, n.d.). The questions consist of content areas, competencies, and knowledge, skills and abilities statements (ASWB, n.d.). Examination materials may be purchased on the ASWB website, which consist of content outlines and practice examinations.

The pass rates for the examinations in 2015 ranged from 64.8%-80.5% (ASWB, n.d.). If a candidate fails the examination, they must wait 90 days to take the examination and pay the appropriate fees again (ASWB, n.d.). Some jurisdictions may limit the number of times an examination can be taken, and certain state boards have additional rules for determining license status such as Colorado, Florida, Kentucky, Montana, Nebraska, New Hampshire, and Ohio (ASWB, n.d.). California requires that candidates submit documentation and payment to request license issuance; New Jersey requires that candidates contact the board for license application; West Virginia chooses to contact the candidates within 30 days of passing the examination; and the Massachusetts Board uses the ASWB to process the state's licensing applications (ASWB, n.d.). However, the general rule is that if the board required their permission to take the examination, they will most likely contact the candidate regarding status of licensure after the candidate takes the test (ASWB, n.d.).

Becoming licensed in Ohio. There are five main types of social workers in Ohio, including Registered Social Work Assistants, Social Work Trainees, Licensed Social Workers, Licensed Independent Social Workers, and Licensed Independent Social Workers with the training supervision designation (Lawriter, n.d.). All applicants must be of good moral character, apply and include appropriate documentation, pay the appropriate fees, pass the appropriate licensing examination, pass the Ohio laws and rules examination, obtain the necessary educational degree, submit educational transcripts, and complete and pass a background check (Lawriter, n.d.).

To become a Registered Social Work Assistant (SWA) in Ohio, one must hold at

least an associate degree in social service technology that consisted of a practicum (Ohio CSWMFT Board, n.d.). SWAs may perform human, social, and community services under the supervision of a Licensed Social Worker, Licensed Independent Social Worker, professional clinical counselor, psychologist, psychiatrist, or registered nurse who holds a master's degree in psychiatric nursing (Lawriter, n.d.). Services may include case management, community support and outreach, screening, crisis intervention and resolution, intake assessment and referral, recordkeeping, social assessment, visual observation of consumers, assistance of facilitation of groups, prevention services, orientation, and advocacy (Lawriter, n.d.). SWAs may not provide clinical social work (Lawriter, n.d.).

To become a Licensed Social Worker (LSW) in Ohio, one must complete coursework for their bachelor's, master's, or doctoral degree to include no less than 400 hours of supervised field experience or a practicum that is coordinated by one with an advanced social work degree (Lawriter, n.d.). One must also submit college transcripts, pass the licensing and laws and rules examinations, and submit to background checks (Lawriter, n.d.). Temporary licenses may be granted to those who have completed all requirements for licensure as an LSW, but are awaiting the actual award of the educational degree (Ohio CSWMFT Board, 2016). The temporary license may be renewed for a maximum period of 90 days, and temporary license holders will be able to work legally as a social worker in Ohio during this time (Ohio CSWMFT Board, 2016).

To become a Social Work Trainee (SWT) in Ohio, one must be enrolled and submit proof of enrollment in a master's level field education course, such as an

internship or practicum through a CSWE-accredited educational institution (Ohio

CSWMFT Board, n.d.). SWTs must show proof of enrollment before each semester or

quarter to maintain status as a trainee (Ohio CSWMFT Board, n.d.). The purpose of the

SWT registration is for students to be titled to practice at their field placement sites, and

this title is not valid at any other locations (Ohio CSWMFT Board, n.d.).

To become a Licensed Independent Social Worker (LISW) in Ohio, one must

have at least an MSW and complete 2 years or 3,000 hours of post-master's degree

supervised social work experience under the supervision of a Licensed Independent

Social Worker with the training supervision designation (LISW-S) in Ohio, with no more

than 1,500 hours per year to be credited (Lawriter, n.d.). The supervisee must also obtain

a minimum of 150 hours of either group or individual training supervision, with 1 hour

per every 20 hours of work (Lawriter, n.d.). Rules slightly differ when one is applying

from another state they are already licensed, and this information will not be discussed in

this literature review.

To become a Licensed Independent Social Worker with the training supervision

designation (LISW-S) in Ohio, one must complete all requirements for the LISW license

and hold the active LISW license for one year (Lawriter, n.d.). Within that year, the

licensee should complete 9 hours of continuing education in supervision, complete a

master's level course in supervision, or have completed a master's level course in

supervision from an accredited university (Lawriter, n.d.). The education about

supervision is required for the supervisor to gain knowledge about and skills for

supervision to increase competence and understanding of the supervisory role (Lawriter,

n.d.).

Types of supervision in Ohio. There are two types of supervision in Ohio,

including clinical and training supervision (Lawriter, n.d.). Clinical supervision includes

the evaluation of the supervisee's performance, approval of intervention plans and

implementation techniques, and assurance that the social worker is practicing within their

limits and competency (Lawriter, n.d.). When nonindependent social workers are

performing social psychotherapy in Ohio in a private practice, partnership, or group

practice, they should receive clinical supervision as required by the Ohio CSWMFT

(Lawriter, n.d.). Clinical supervisors assume responsibility for the welfare of the

supervisee's clients (Lawriter, n.d.).

Training supervision in Ohio is for the purpose of obtaining a new license and/or

to develop in areas of competency and proficiency when providing services to consumers

(Lawriter, n.d.). Training supervision allows the training supervisor to provide direction

to the supervisee on ways to apply ethical content, knowledge, skills, and competency in

practice with consumers (Lawriter, n.d.). Training supervision must be provided by an

LISW-S (Ohio CSWMFT Board, n.d.).

Activities that require supervision in Ohio. Per Lawriter (n.d.), supervision is

required for many activities conducted by social workers in Ohio. Licensed Social

Workers (LSW) in Ohio may diagnose and treat mental and emotional disorders, but only

under the supervision of an LISW, psychologist, independent marriage and family

therapist, psychiatrist, licensed professional clinical counselor, or registered nurse with a

master's degree in psychiatric nursing (Lawriter, n.d.). LSWs may also perform social

psychotherapy, but only under the supervision of an LISW, psychologist, psychiatrist, licensed professional clinical counselor, or registered nurse with a master's degree in psychiatric nursing (Lawriter, n.d.). However, LSWs may perform counseling and psychosocial interventions without supervision (Lawriter, n.d.). SWTs have the same scope of practice as LSWs and may be supervised by LSWs with MSWs, LISWs, or LISW-Ss (Ohio CSWMFT Board, n.d.). However, SWTs may only perform social psychotherapy under the supervision of an LISW-S (Ohio CSWMFT Board, n.d.).

Responsibilities of and requirements for supervisors. Supervisors in Ohio have many responsibilities, per Lawriter (n.d.). Supervisors should provide supervision to licensees who are not of independent status (Lawriter, n.d.). Supervisors should document the supervision with the date, content, and goals of the supervision times, sign the documentation at least quarterly, and ensure that all supervision documentation is submitted to the Ohio CSWMFT Board, as well as return supervisee evaluation forms to the Board within 30 days of receipt from the supervisee (Lawriter, n.d.). However, records of the supervision should be kept by the supervisee (Lawriter, n.d.). Supervisors should also discuss any issues that occur in the licensee's practice or concerns of the supervisee (Lawriter, n.d.). Supervisors should ensure that supervisees are using the appropriate assessment tools and techniques, provide education and training to supervisees, and provide documentation of the supervision to the supervisee (Lawriter, n.d.). LISW-Ss should have training in supervision theory and practice, competence in areas of which they supervise, and training in legal and ethical issues in relation to social work, counseling, social psychotherapy, and psychosocial interventions (Lawriter, n.d.).

Continuing education. SWAs, LSWs and LISWs in Ohio are required to complete 30 clock hours of continuing education during each 2-year period of renewal, with 3 of those hours in ethics (Ohio CSWMFT Board, n.d.) If LISWs decide to pursue the training supervision designation, they must complete 9 hours of continuing education in supervision (Lawriter, n.d.). LISW-Ss are required to complete 30 clock hours of continuing education during each two-year period of licensure, with at least 3 of those hours in supervision (Lawriter, n.d.). Continuing education may be completed face-to-face or by distance learning (Ohio CSWMFT Board, n.d.).

Per Gianino, Ruth, and Miyake Geron (2016), continuing education helps to promote a profession's overall well-being, as well as improve an individual's professional competence and knowledge base, development of one's career, and regulatory compliance. Continuing education also may be responsible for the dissemination of knowledge and best practices, as well as improving outcomes for the consumers of social work services (Gianino et al., 2016). Gianino et al. (2016) also mentioned that continuing education can aide with lifelong learning, networking, professional identity development, and cohesion within the profession, which may also impact social work retention rates, effectiveness of services, prevention of burnout, measurement of practice outcomes, and ease of and outlook for the profession. However, with certain barriers to continuing education, such as cost, availability, support from employers, and time to access (Gianino et al., 2016), it may seem as a burden or as an unachievable requirement.

Fees. Licensing fees are $40 for SWAs, $60 for LSWs, $20 for temporary

licenses, and $75 for LISWs and LISW-Ss (Ohio CSWMFT Board, n.d.). Renewal fees

are the same amounts as the licensing fees (Ohio CSWMFT Board, n.d.).

   Current numbers of social workers in Ohio. As of July 11, 2016, there were

approximately 483 active SWAs, 147 active SWTs, 9 active temporary LSWs, 15,955

active LSWs, 2,718 active LISWs, and 5,260 active LISW-Ss in Ohio (Ohio CSWMFT

Board, 2016). The data showed that there were only 5,260 training supervisors out of

24,572 social workers, which was about 21%. However, since some social workers are

unable to provide supervision to those outside of their place of employment (K. Laughlin,

personal communication, July 30, 2016), there are a lower number of social work

supervisors available for internship and licensure supervision.

   Internships and supervision. As mentioned, there must be internships completed

in social work education programs, as required by the CSWE (Council on Social Work

Education, 2015). In a previous study performed by Hessenauer and Zastrow (2013),

social work interns identified their field instructors/supervisors as playing a significant

role in their learning and main facilitators of the transfer of knowledge. A study was

performed by Miehls, Everett, Segal, and du Bois (2013) to determine second- and third-

year MSW students' perspectives on successfully completed field placements. Results

indicated that some of the participants were unclear about the role of the supervisors and

disappointed in the areas of the lack of receiving constructive criticism regarding their

styles of practice and interaction with the clients (Miehls et al., 2013). Participants noted

that unsuccessful supervision may be attributed to lack of collaboration, role of student

evaluations, conflict with supervisors, power dynamics, lack of agenda-setting, and the

inability to communicate openly with supervisors (Miehls et al., 2013). Participants also noted that successful supervision was comprised of aspects such as clear goal-setting, structure, being able to advocate on their own behalves in clinical placement, and having a good role model and mentor through their supervisors, which help to contribute to professional development (Miehls et al., 2013). Miehls et al. (2013) noted that supervisors' demonstration of the code of ethics of the profession, such as clear boundary-setting, advocacy, and social justice helps interns to be able to learn such behaviors. Petrila, Fireman, Fitzpatrick, Hodas, and Taussig (2015) noted that supervisory relationships should enable growth, trust, and self-reflection, as well as promote feedback. Meetings and supervision between supervisors and interns should provide support and accountability, address client and intern issues, develop plans for interventions, address administrative topics to be addressed, and the relationship between should be mutual with trust and openness to feedback (Petrila et al., 2015).

Comparison to other states. The types of social work licenses, requirements for licensing, and numbers of licensed social workers will be compared with other states. The states included in this literature review are Washington, Nevada, Minnesota, Louisiana, Kentucky, Maryland, Pennsylvania, and Maine. The reason for comparing these states is to identify one state out of each division of each region in the Unites States. According to the United States Census Bureau (n.d.), Washington is in the Pacific division of the West region; Nevada is in the Mountain division of the West Region; Minnesota is in the West North Central division of the Midwest region; Ohio is in the East North Central division of the Midwest region; Louisiana is in the West South Central division of the Southern

region; Kentucky is in the East South Central division of the Southern region; Maryland is in the South Atlantic division of the Southern region; Pennsylvania is in the Middle Atlantic division in the Northeast Region; and Maine is in the New England division of the Northeast region. These states have similar licensing requirements and types of social workers as the state of Ohio.

Supervisor statistics. In Washington, there are approximately 4,185 social workers who can provide supervision out of approximately 6,020 social workers (B. Burnham, personal communication, January 13, 2017), which is about 69%. In Nevada, there are approximately 924 social workers who can provide supervision for internships and higher licensure out of approximately 2,768 social workers (State of Nevada Board of Examiners for Social Workers, n.d.), which is about 33%. In Minnesota, there are approximately 1,875 social workers who can provide higher licensure supervision out of 11,492 social workers (J. White, personal communication, January 27, 2017), which about 16%. In Louisiana, there are only 860 out of 7,804 social workers who can provide supervision for higher licensure (R. DeWitt, personal communication, January 12, 2017), which is about 11%. In Kentucky, there are 500 approved supervisors out of 2,902 social workers (L. Turner, personal communication, January 10, 2017), which is about 17%. In Maryland, there are approximately 3,958 supervisors out of 13,977 social workers (S. Weinstein, personal communication, January 10, 2017), which is about 28%. In Pennsylvania, the Board does not approve supervisors, nor do they keep a list of licensees who are supervisors (S. Matter, personal communication). In Maine, there are about 2,969 social workers who may provide consultation (C. Eugley, personal communication,

February 6, 2017), which is about 50%.

   Crossing over professions. The idea of supervision for case workers crossed over

to the field of nursing, as it was thought to be important for the mental health nursing

staff to have leaders to guide them, help to broaden their understanding, and encourage

them to maintain in the area of which they had the most competence (White &

Winstanley, 2014). Lulu Wolf, who was the Dean of the School of Nursing at University

of California at Los Angeles, claimed that between the years of 1930 and 1940 marked

the point when a clinical supervisor was in charge to help head nurses in planning

programs, which eventually meant playing a role in the improvement of services to

consumers (White & Winstanley, 2014). Therefore, supervision was more familiar and

contributed to social work, but it became familiar and just as valuable within the field of

nursing, including mental health, psychiatric, and general nursing (White & Winstanley,

2014).

   Supervision has also become important in other fields, such as for chemical

dependency counselors (Ohio Chemical Dependency Professionals Board [OCDP

Board], n.d.). Chemical dependency counselors must obtain supervision while practicing

and during internships, or have experience providing supervision to become a clinical

supervisor (OCDP Board, n.d.). Psychology programs also require supervision for

students and licensees (Ohio Board of Psychology, n.d.). Nel and Fouche (2017) found

that supervision is essential for professional development for students in psychology

programs through their studies in South Africa. Supervision is also used in the medical

field (State Medical Board of Ohio, n.d.). A pilot study by Mughal and Noory (2015)

provided a chance for medical students to perform procedures on live, human patients instead of mannequins, and the medical students reported that the supervision allowed them to identify areas of improvement, as well as build skills. Supervision in any aspect or profession appears to be beneficial.

Use of online focus groups. Online focus groups are becoming more popular in use with qualitative research methods, especially since there have been major advancements in technology and widespread use of the Internet (Woodyatt et al., 2016). The Internet assists with broadening the options for participant recruitment and data collection methods such as online focus groups, which are similar to face-to-face focus groups since there is real-time (synchronous) audio and visual interaction (Tuttas, 2015). The real-time experience of an online focus group allows for spontaneity in responses and the use of the Internet provides accessibility for anyone who has an internet connection, regardless of location (Tuttas, 2015). In-person focus groups may also be challenging to coordinate (Tuttas, 2015), considering the variables involved such as travel, weather, and time.

In a study by Woodyatt et al. (2016), an online focus group held in Adobe Connect was compared to in-person focus groups. Although the online focus group members' responses were composed of fewer words, the responses were more to the point and immediate (Woodyatt et al., 2016). The online groups also lasted longer than the in-person groups and consisted of similar codes as the in-person groups (Woodyatt et al., 2016). However, there was a more sensitive topic that arose in the online focus group compared to the in-person focus groups, which the authors believed was due to the

possible safer, more anonymous and comfortable environment of the online setting (Woodyatt et al., 2016).

   Use of Adobe Connect. Adobe Connect is a web conferencing software service that allows users to host online meetings with voice over Internet protocol (VoIP) (Adobe Systems, Incorporated, n.d.). Adobe Connect allows hosting, collaborating, and presenting from multiple devices, including mobile devices, desktop and laptop computers, Apple Internetwork Operating System (iOS) devices, and Android devices (Adobe Systems, Incorporated, n.d.). Adobe Connect is accessible for those who have Windows, Mac operating system (OS), and Linux (Adobe Systems, Incorporated, n.d.). Meetings are accessed using a personalized Uniform Resource Locator (URL), and hosts can record, edit, and republish meetings, as well as access recordings on-demand and store recorded data (Adobe Systems, Incorporated, n.d.). Participants can be anonymized, content may be edited, and specific functionalities may be chosen by the host (Adobe Systems, Incorporated, n.d.). The host also can restrict who can join the meetings and share documents in the meetings (Adobe Systems, Incorporated, n.d.). There are also tutorials, on-demand courses, videos, and live daily trainings for users to learn how to operate and navigate the software (Adobe Systems, Incorporated, n.d.). The current version is Adobe Connect 9.7.5 (Adobe Systems, Incorporated, n.d.).

   Adobe Connect is used by the United States Department of Defense and includes advanced security, privacy, and compliance controls (Adobe Systems, Incorporated, n.d.). The monthly plan may be purchased for $50 per month and there is also a yearly plan that can be purchased for $540; both plans allow for unlimited meetings with up to 25

participants (Adobe Systems, Incorporated, n.d.). Users may sign up for a free trial period before purchasing Adobe Connect, and participants do not need to purchase the software to attend the meetings (Adobe Systems, Incorporated, n.d.).

The study by Tuttas (2015) also highlighted Adobe Connect as the most beneficial web conference service when compared to Skype, ooVoo, GoToMeeting, and Cisco WebEx due to ease of use for host and participants, audio and video quality, availability of a real-time chat window, simultaneous images of participants throughout the conference, and security (Tuttas, 2015). Additionally, the playback of the recording captures the real-time interaction just as it was displayed and how it occurred in the real-time focus group, which is essential for recording data, such as verbal and nonverbal cues and body language (Tuttas, 2015). Adobe Connect has also been used for online learning and was used in a study by Ng, Bridges, Law, and Whitehill (2014) to evaluate online-based learning. The results indicated that participants were satisfied with Adobe Connect and reported it was easy to use and set up and that it worked well for them (Ng et al., 2014). Adobe Connect is also HIPAA compliant (Adobe Systems, Incorporated, n.d.).

Summary

In summary, the literature review indicates a gap in knowledge about the shortage of LISW-Ss in Ohio. There is a need for determining why social workers do not pursue an LISW-S license in this demographic area. There is evidence that social workers will benefit more from having social work supervisors as opposed to interprofessional supervisors (supervisors from other professions), and that there is a shortage of supervisors and marketization that makes it costly. It also appears there is a lack of

knowledge about licensing procedures and examination information, which also influences the decision to become licensed.

The research completed for Ohio helped to confirm the fact that there are many requirements to become licensed as a social worker in Ohio, and there is evidence of the same rigorous requirements in other states as well. There are costly fees for licensure and the requirements are rigorous, including education, taking the ASWB examinations, paying initial licensing, application, and renewal fees, paying for continuing education, and the possible cost for supervision. Some social workers may not be compensated for internships and supervision responsibilities. This may mean that services are being provided with no compensation, which can deter social workers. Additionally, since some social workers are not permitted to provide training or licensure supervision to others outside of their place of employment, there are less supervisors available to aid other social workers in need. Compared to the other states, Ohio's percentage of social work supervisors for internships and higher licensure ranks 4th, which indicates there are other states that do not appear to have the issue of shortages and low numbers of supervisors as does Ohio.

This information influenced this study and myself to determine why more social workers are not pursuing the LISW-S credential, which would ultimately benefit social workers, the profession, and the consumers. Social workers can provide insight on this issue to determine possible solutions, which could improve the field of social work, the services provided, and the future of the helping profession. There is a need for social workers and supervisors, but if there are many barriers, it could be deterring people from

entering the profession. The action research project assisted with understanding the

problem and finding possible solutions to this issue.

Section 2: Research Design and Data Collection

There is a shortage of LISW-Ss in rural Ohio. The purpose of this section is to describe the research design, methodology, data analysis, and ethical procedures of this action research project. In the research design section, the research questions are stated, along with the nature of the study, the study's overall approach, a description of the alignment between the purpose of the study and the approach and methodology, operational definitions, and stakeholders. The methodology section contains information about the collection of data, variables, participants, my role as the action researcher, and instrumentation. The data analysis section provides a description of the chronological steps in the analysis process, each source of data and how it was analyzed, and methods used to address the rigor of the study. The ethical procedures section addresses ethical procedures used in the study, as well as limitations and biases of the study.

Research Design

The research question addressed was as follows: Why do social workers in rural Ohio decide not to pursue an LISW-S credential? The second research question was as follows: Are there resources or incentives that would make participants decide to pursue the LISW-S credential? The intention of this research was to explore the interactions and exchanges among systems that may impact a social worker's decision not to pursue an LISW-S credential. Upon completion of this research, I hoped to discover a better understanding of perceptions of the LISW-S licensure, factors that may present as barriers to obtaining an LISW-S credential, possible solutions to the issue, and reasons that social workers decide not to pursue an LISW-S credential. I would like to improve

the profession of social work and the services provided by social workers, as well as provide insight to those who may perceive the LISW-S credential as unnecessary or a burden.

There is an institutional context as well as a clinical social work practice situation relevant to this study. Supervision is a clinical social work practice. Without the supervision provided by LISW-Ss, social workers will not be able to meet the requirements to pursue and obtain the LISW-S credential. Therefore, the lack of supervision impacts clinical social work practice and the promotion and continuation of clinical social work practice through new social workers. Education also allows for more competent employees, as well as more successful and productive work (Wermeling et al., 2013). If fewer social workers are educated through training supervision, the competence of social workers and their services for consumers could be negatively affected.

Research Questions

The foundational research question in this study was as follows: Why do social workers in rural Ohio decide not to pursue an LISW-S credential? The second research question was as follows: Are there resources or incentives that would make participants decide to pursue the LISW-S credential?

Nature of the Study

The study was an action research project with a qualitative component using an online focus group for data collection. The study was voluntary for participants; participants were not disrespected or judged, nor did they experience any consequences for not participating or for discontinuing participation at any time before or throughout

the study. There was no type of compensation for being a participant in this study.

Participants were notified of this information in an informed consent form email

attachment.

Alignment of the Purpose of the Study With the Approach/Methodology Used

The purpose of this study was to increase understanding regarding LSWs' and

LISWs' perceptions of the LISW-S licensure, barriers to obtaining the LISW-S

credential, and personal decisions to not obtain the LISW-S credential. The goal of the

study was to find possible solutions to the shortage of LISW-Ss in rural Ohio. The

findings from this study may impact the social work profession and social workers, as

well as the services that these professionals provide to consumers. Using social workers

as experts on issues that impact them helped to provide validity to the study. Those who

experience issues are pertinent voices to be heard to find barriers that impact the

situation, as well as define possible solutions that will help others who are impacted.

Conducting a focus group helped me to build rapport with the participants, as did taking

the time to hear about participants' perceptions, thoughts, obstacles, and opinions.

Operational Definitions

Operational definitions of terms used in the context of the study are provided

below.

Active license: A license that is not in default of requirements and is current.

Association of Social Work Boards (ASWB): The organization that is dedicated to

social work regulation (ASWB, n.d.). It regulates the social work examinations, which

are required by most social work boards for licensure for candidates (ASWB, n.d.).

Continuing education: The education requirements that one must complete to maintain competency in areas of knowledge, as required by the state of licensure.

Council on Social Work Education (CSWE): The national accrediting organization for social work educational programs (CSWE, n.d.).

Endorsement: Sanction or approval ("Endorsement," n.d.).

Grandparenting: Refers to someone who met criteria for a license before new laws were enacted, such that the state allowed that person to be "grandparented in" and licensed under the new statutes.

Knowledge: One's understanding of, familiarity with, or awareness of something ("Knowledge," n.d.).

Lack: Something deficient or missing ("Lack," n.d.).

LISW: A Licensed Independent Social Worker in the state of Ohio.

LISW-S: A Licensed Independent Social Worker with the Training Supervision Designation in the state of Ohio.

LSW: A Licensed Social Worker in the state of Ohio.

National Association of Social Workers (NASW): A membership organization of professional social workers that creates professional standards and enhances the profession for social workers (NASW, n.d.).

Ohio CSWMFT Board: The Ohio Counselor, Social Worker, and Marriage and Family Therapist Board.

Perception: A mental image ("Perception," n.d.).

Reciprocity: The mutual exchange of privileges, such as the validity of licenses and accompanying privileges between two institutions ("Reciprocity," n.d.).

Shortage: A lack or deficit ("Shortage," n.d.).

SWA: A Registered Social Work Assistant in the state of Ohio.

SWT: A Social Work Trainee in the state of Ohio.

Stakeholders

The stakeholders of this action research project included social workers, agencies that hire social workers, consumers of services provided by social workers, and future researchers investigating this issue. The social workers were colearners in this project and provided their insight on the identified problem, as well as on the influences on their decisions not to pursue an LISW or LISW-S credential. They also identified possible solutions to the problem. Social workers were empowered to provide their opinions of this issue and the issues that social workers are confronted with when pursuing licensure. This project gave a voice to the social workers and may have an impact on future social workers. The agencies and organizations that employ social workers may be empowered to make necessary changes to policies and supervision requirements and availability to help social workers who would like to provide or receive supervision. Future researchers may be empowered to develop more research on this issue. In all of these respects, the project may have a positive impact on the field of social work, the potentials of social workers, and the services that consumers receive from social workers.

Methodology

Prospective Data

Data were collected from participants through emails, demographic questionnaires, and a focus group. First, participants were recruited through email using contact information obtained from the Ohio CSWMFT Board. To recruit participants, I sent 46 invitation emails, along with email attachments containing an informed consent form and a list of mental health providers in the county. The number of emails that I sent was determined by the current number of LSWs and LISWs in rural Ohio who provided email addresses to the Board. Respondents were asked to review the informed consent form and determine if they were willing and qualified to volunteer as participants in the study; if so, I asked them to respond in an email with the words "I consent" within 14 days of receipt of the email. Participants were asked to save or print a copy of the informed consent form for their records if they wished. Participants could also print or save the list of mental health providers in case they experienced any discomfort, stress, or concerns during or after participation in the study. However, only one participant responded, around 27 days later, stating that the email had been found in the spam folder. Given that the email could have gone to the spam folder for most of the recipients, and given that the email was sent around a holiday, response rates could have been impacted. I resent the emails with the attachments on December 2, 2017. There was only one response within 14 days. Two more social workers responded on December 22, 2017. Within the next 4 weeks, four more participants responded.

At that point, the eight respondents were sent a confirmation of participation email, along with a demographic questionnaire. I asked them to respond within 7 days if they wished to complete the questionnaire. The demographic questionnaire assisted with ensuring that the respondents met the criteria to be involved in the study and provided demographic information about the participants. McNiff and Whitehead (2010) advised researchers to give respondents a fixed time to return the questionnaire and to write the deadline date or time frame on the questionnaire. Four individuals responded with the completed questionnaire. The day after the deadline for receipt of the demographic questionnaires, verification began to ensure that all respondents met the criteria to be participants in the action research study. A reminder email was then sent to the eight respondents who met the criteria, which included the time and day for the focus group.

One hour before the group, an email with a link to join the focus group was sent, in which I asked the eight participants to click the link 20 minutes before the start of the group and begin registering as guests. The five participants who attended used their assigned guest numbers that were mentioned in the confirmation of participation emails. Participants were notified that they could contact me by phone if they were having issues logging on and I would assist them to ensure that all participants could connect properly and that the necessary components of the group were functional for each participant. The focus group was held on January 27, 2018, at 2:00 p.m. (see instrumentation section for a description).

Following the focus group, a professional transcriptionist was asked to sign a transcription confidentiality agreement, and then the transcriptionist transcribed the audio

data from the focus group verbatim, identifying responses as corresponding to specific guest numbers or to me (the researcher). Upon completion of the transcription and receipt of the transcript, I compared the transcript with the audio recording to ensure accuracy and make necessary changes. The draft of the transcript was disseminated to the participants, which was an attachment to the transcription review and revision email. This method was used to screen for errors that could have been made through transcription and to ensure that there was an accurate record of the participants' reports. This method, which Stringer (2007) called *member checking*, allows participants to clarify the meanings and accuracy of responses. Participants were asked to review and revise the transcript or state that there were no changes to be made, responding within 7 days. One participant did not respond; the remaining participants indicated that there were no changes to be made. Upon learning that there were no changes to be made, I disseminated the transcript to the participants via email for review, to ensure that the data were correct. The transcript was then imported to be analyzed through NVivo software, whereby all data were stored, organized, coded, and analyzed. This approach was similar to that taken by Dumbili (2016), who also used focus groups and submitted transcripts to NVivo.

Variables. Variables in this study that could have impacted participants' responses included gender, race, ethnicity, age, educational degrees, type of licenses held, status of practice, type of social work practice, years of being licensed, professional setting, and agency requirements to hold a specific license. Other possible variables included the time, setting, and length of the meeting, as well as lack of monetary incentives. Attitudes, subjective norms, and beliefs could also have impacted the results

of the study.

Participants

Participants included active LSWs in rural Ohio, as recognized by the Ohio CSWMFT Board, who had chosen not to or had not yet pursued an LISW-S credential. Eligible participants were identified through the Ohio CSWMFT Board through purposive sampling and solicited through email addresses provided by the Board. Participants were given the option to complete a demographic questionnaire, responses to which were used as additional data in the findings. A minimum of eight and a maximum of 10 participants were needed for the study. The first eight participants who responded were picked in the order of their responses to the invitation email. Eight participants were to be included in the study to provide a quality sample of the population and to ensure that each participant's insights were heard, valued, and given individual attention. However, only five participants attended the group and participated. The participants' names and identities will remain confidential when publishing the results of the study; only guest numbers will be used. Social workers were able to provide the most insight on this issue because they were licensed and had not yet obtained the LISW-S licensure.

Action researcher. Acting in the capacity of colearner, facilitator, recorder, and educator, I empowered others in this study. I also collected and analyzed the data. I was a communicator with an open mind who followed ethical standards for the project and always remained mindful of the best interests of the participants. McNiff and Whitehead (2010) mentioned that interviewers should develop and use good listening skills. I was a good listener in this study. I also maintained contact with all members of the review

teams in relation to the project.

Instrumentation

An action research methodology with a qualitative component was used to collect data. Participants received emails with requirements for participation in the project in an invitation email. Participants were asked to respond if they met the qualifying criteria of holding an active LSW or LISW license in rural Ohio. The first eight participants who responded to the emails and met selection criteria were selected to participate in the study.

Description of the focus group. A focus group was facilitated through Adobe Connect with five participants to understand the social work issue from the participants' perspectives and identify possible solutions to the identified problem. The focus group was audio recorded and then professionally transcribed verbatim for data analysis. Open-ended questions, as noted in the focus group protocol, were discussed for clarification during the focus group. Notes were also taken during the focus group to record cues and anything that may have been missed in the audio recording. Questions were asked to clarify responses and meanings.

Once all participants were signed in to the focus group and technical difficulties were addressed, participants were asked if they were ready and they were informed that the recording would begin. The recording of the focus group then began. The focus group was audio-recorded to collect audio data. There was a focus group protocol that was available for review as a shared document during the entirety of the focus group, which indicated the protocol for the group and questions that were asked of participants. The list

of mental health providers in the county was also a shared document during the focus group in case the participants experienced any stress or discomfort resulting from participation in the online focus group. Notes were taken during the focus group to indicate any verbal and nonverbal cues, as well as any other notes that could provide useful in the data analysis, as Stringer (2007) mentioned that recorders should take notes during focus groups.

Stringer (2007) mentioned that facilitators should clearly explain all procedures, including recording and reporting procedures to participants, and designate time frames for activities. At the beginning of the audio-recorded focus group, the date and time of the focus group was stated, along with the guest numbers of the participants who were present. I also ensured that all participants were able to see the shared documents. Stringer (2007) also mentioned that facilitators should set ground rules. There was an opening statement when participants were advised of the protocols for certain situations including answering questions, taking breaks, and emergency protocols, as well as informing them of the expected approximate length of the group, which was estimated to be around 45-90 minutes. Participants did not have any questions about the procedures or protocol.

I developed interview questions that were asked of the participants. Each participant had a chance to answer each question, as Stringer (2007) noted that facilitators should ensure that each person has an equal opportunity to talk and that discussions should be related to the focus questions. There were questions to clarify participants' responses, as necessary. Following the interview questions and responses, the participants

were asked if they had anything they would like to add, and so they did. Then, the closing statement was made, signifying the end of the focus group and instructions for participants to look for the email with the draft of the transcript, as well as to close their browsers to leave the group. The focus group ended and the recording was then stopped.

The informed consent form email attachment was derived from a template by Walden University (n.d.), which outlined the information that must be included in an informed consent form when conducting a study involving participants over 18-years-old. Additional information was added to include specific details about this study, including information about the study, researcher information, procedures, sample questions from the study, potential risks and benefits of the study, payment information, confidentiality information, contact information, and means to obtain consent.

The transcription confidentiality agreement was derived from the template by The University of Chicago: Social and Behavioral Sciences Institutional Review Board. (n.d.). More specific details were added to the form, such as study and researcher information to personalize information to this action research project.

Demographic and interview questions in the study included the following:

1. Demographic Questions

    a. What is your gender?

    b. What is your race and ethnicity?

    c. Are you at least 18 years old?

    d. What is/are your educational degree(s)?

    e. Are you currently practicing in the field of social work?

f. What type(s) of active license(s) do you hold with the Ohio Counselor, Social Worker, and Marriage and Family Therapist Board? (Must be licensed in rural Ohio)

g. What is your position at your place of employment?

h. What type of social work do you practice? (i.e. populations, clinical, ages, special populations)

i. In what type of professional setting do you practice? (i.e. community mental health agency, private practice, contractual)

j. How long have you been licensed as a social worker?

k.   Are there any agency requirements for the type of license you hold to maintain your position?

l. What would be a preferred time for you to meet for the focus group, including days and time frames?

2. Interview Questions

a. What is your perception of the LISW-S (Licensed Independent Social Worker with the Training Supervision Designation) license?

b. What perceived barriers, if any, are there to obtaining an LISW-S credential? How are the barriers specific to the micro, mezzo, and/or macro levels?

c. What recommendations would you suggest to improve the process of becoming an LISW-S?

d. Why have you decided not to pursue an LISW-S? Consider the factors in the micro, mezzo, and macro levels that may have impacted your decision.

e. Are there resources or incentives at the micro, mezzo, and/or macro levels that would change your mind or make it more likely that you would apply for the training supervision designation in the future?

f. Is there anything you would like to add? Are there comments specific to the micro, mezzo, and macro levels?

There were other prompt questions that were used to help clarify responses from participants, such as with those who were difficult to hear due to technical difficulties. Variables in this study that could have impacted responses may have included gender, race, ethnicity, age, educational degrees, type of licenses held, status of practice, type of social work practice, years of being licensed, professional setting, and agency requirements to hold a specific license.

Data Analysis

All data were and will be stored on USB flash drives, except the notes I took during the focus group, which were written on paper and stored in a locked cabinet; all data will be kept for a minimum of five years. The focus group was audio-recorded. The recording was submitted to a professional transcriptionist who transcribed verbatim the data into a Microsoft Word document. The Word document was imported into NVivo software. I stored, organized, coded, and analyzed data with the use of NVivo. I searched for and generated common themes and patterns, as well as identified word frequencies.

Use of NVivo Software

The information from the demographic questionnaires was stored in NVivo software. NVivo qualitative data analysis software is used for qualitative and mixed-methods research designs and helps to store, organize, code, analyze, and retrieve data, as well as find insights in data such as open-ended survey responses, articles, web content, and interviews (QSR International, n.d.). NVivo is used in education, government, and business, and across multiple disciplines, such as psychology and political science, healthcare research, behavioral sciences, and medical research (QSR International, n.d.). NVivo allows people such as researchers, researcher assistants, professors, students, lecturers, and faculty staff work efficiently to uncover connections in data, back-up findings with evidence, and ask questions of data (QSR International, n.d.). When using NVivo, multiple queries can be run to search for text, cross tabulate data, and analyze word frequency (QSR International, n.d.). There are also ways to link NVivo with databases used for collections of articles, such as Zotero and Endnote to import articles and data from the articles into the software (QSR International, n.d.). Mixed methods research options are also available when exchanging data between NVivo and programs such as Microsoft Excel and Access and IBM SPSS Statistics (QSR International, n.d.).

Researchers have used versions of NVivo to assist with coding and generating common themes from data (Gagné, Valiquette-Tessier, Vandette, & Gosselin, 2015; Rotaru, Drug, & Oprea, 2016; Ewart & Ames, 2016). There are also many researchers who have used NVivo in the organization and analysis of their data (Paulus, Woods, Atkins, & Macklin, 2017). Paulus et al. (2017) conducted a literature review of 414 peer-

reviewed journal articles in which NVivo was used as the qualitative data analysis software and found that some users of the software reported it helped to make data analysis more effective and efficient, provide rigor and structure in the analysis process, and find themes in data, as well as display results in matrices and charts. Albritton, Angley, Grandelski, Hansen, and Kershaw (2014) used the coding tree in NVivo software to code their data obtained from video- and audio-recorded focus groups, in which they found themes that emerged and identified frequent responses made by participants. Upon completion and review of the data analysis, a report of the findings was compiled.

Chronological Steps in the Analysis Process

The data were imported into NVivo software. Once the data were in the software, the data were organized and coded. The responses were coded by questions asked during the focus group. Queries were ran to identify common words and phrases. Data were coded into themes, or nodes as they are called in NVivo. The analysis assisted with finding meaning in the data. Once meaning was identified, it was applied to the purpose of the study. The intent was that the questions and subquestions would be answered with the findings from the analysis.

Methods Used to Address the Rigor of the Study

The transcript from the transcriptionist was reviewed for accuracy by listening to the recording from the focus group and following along with the transcript. Any errors were corrected, and the revised transcript was disseminated to the participants for review for accuracy and revision in the transcription review and revision email. Participants were asked to return the revised transcripts with changes made in red ink to me within 7 days,

or respond even if there were no revisions or recommendations to be made. Participants who responded reported that the transcript was accurate; one participant did not respond to the request to review.

Ethical Procedures

The participants' identifying information was kept confidential throughout and will be kept confidential after this action research project. The information that was shared was gender, race, age (over 18 or not), degree(s) held, if the participant was currently practicing, type of professional license, job position, type of social work practice, professional setting of employment, license length, agency requirements to maintain employment position, and preferred times to meet. Participants were notified of the confidentiality procedures and any concerns and questions were addressed. One participant requested to not use the video during the group, as she did not feel comfortable. The invitation email, along with the informed consent form email attachment and the list of mental health providers in rural Ohio were sent to participants prior to the focus group, which outlined the nature of the project, researcher information, background information, procedures/protocol of the study, sample questions for the focus group, voluntary nature of the study, risks and benefits of participating in the study and research, payment information, privacy information, equipment needed for participation, and consent, contact and question instructions. Participants were asked to return an email with the words, "I consent" if they were willing to volunteer for participation in the study, which they did.

In the confirmation of participation email, participants were assigned a guest number. The participants were asked to sign into Adobe Connect as a guest, using the assigned guest number as their name, as well as state their guest number before talking. This assisted with confidentiality and was useful when transcribing the focus group recording, as the transcriptionist was able to refer to the guest number when recording responses from participants.

The transcriptionist was asked to sign the transcription confidentiality agreement to ensure agreement to keep all information from the study confidential, as well as to hold in strictest confidence the identification of any individual involved in the study, to not make copies of study materials unless requested to do so by me, to store all study-related materials in a safe, secure location, to return all study-related materials to the me in a complete and timely manner, and to delete all electronic files that contained study-related materials from their computer, hard-drive, and any back-up devices.

Information for this project was stored on flash drives that were encrypted and the flash drives were and will be stored in a locked cabinet for a minimum of five years post-graduation. Myself, my chairperson, my committee member, Walden University Research Reviewer, and Institutional Review Board will have access to the data.

Limitations

There were limitations in this project, such as a low-response rate, as it was assumed the response rate would be higher. However, there were only eight respondents. Another limitation was that only five out of the eight respondents attended the group. There were also technical difficulties, such as one participant's microphone not working,

so she typed her responses in the chat box in the meeting room and I read them out loud

for transcription purposes. Another person did not wish to be seen on camera, so

nonverbal cues were unable to be recorded. One participant was also using an iPad and

did not have headphones, so it was difficult to hear her speak. Another participant had

issues with her microphone and it was difficult to hear and understand her at times. The

limitation of generalizability is also present, as the information unveiled in this study may

not be applicable to all regions, states, or social workers. All participants were Caucasian

women who were LSWs in rural Ohio. Therefore, there was a lack of information about

LISWs' decisions to not pursue or obtain the training supervision designation. There was

also a lack of perceptions from social workers outside the county and male social

workers.

Biases

There could have been biases that influenced the project outcome. I have made it

my top personal and professional goal to reach the highest level of licensure and

education, with the intention to empower others to do the same. This personal goal may

have impacted the outcome if I were to have unconsciously attempted to influence others'

beliefs about the importance of becoming an LISW-S. Though I do not intentionally force

beliefs or preferences upon anyone, it is a bias that needed to be monitored and evaluated.

I was sure to remember the bias and strived to keep all biases out of the study. I evaluated

the study at certain intervals to ensure there were no personal influences being enforced.

Summary

The action research project addressed a clinical social work problem. Through interview questions in a focus group with social workers, there was an increased understanding of why social workers do not pursue independent licensure with the supervision designation in rural Ohio. Barriers and potential solutions were also identified on the micro, mezzo, and macro levels. Stakeholders worked collaboratively with me to uncover insight on related factors that have shaped attitudes, beliefs, and perceptions toward licensure.

Data were collected through many sources, including emails, demographic questionnaires, and participants' verbal and nonverbal responses during an online focus group. There were strategic methods of identifying and selecting participants, gathering data, organizing, analyzing, and storing data, and presenting the results from the research that contribute to the validity of the study. Other resources were utilized to aide in this process, such as NVivo, Adobe Connect, and a transcriptionist. Variables may have impacted the responses and results, but there were actions taken to minimize negative impact, such as setting realistic expectations for the study and arranging times that were convenient for the participants. Participants included Licensed Social Workers (LSWs) in rural Ohio.

I was mindful of the importance of the stakeholders and their safety in the study and worked to minimize harm. The ethical intent of the action research project was to protect participants and create no harm. Therefore, there were ethical standards that I

followed throughout and after the study. In addition, I clarified roles and empowered others throughout the process.

Many instruments were utilized to gain information and select participants, including emails with solicitation, requirements for participation, informed consent, information about the study, and to disburse the final transcripts from the group. Data were entered into, stored, coded, and analyzed through NVivo software and will be kept on USB flash drives for a minimum of five years upon completion of the study. Data will be stored per Walden University's standards. There was a possibility for limitations and biases to occur, but I took caution to avoid imposing any beliefs on to participants, as well as to be cautious of imposing factors.

Section 3: Presentation of the Findings

The purpose of this action research project was to better understand why social workers in rural Ohio do not pursue an LISW-S license. It was my hope that the findings would help in gaining a better understanding of influences on social workers' decisions about whether or not to pursue and obtain an LISW-S license.

The purpose of this section is to describe the data analysis techniques, including the time frame for data collection, recruitment, and response rates, as well as data analysis procedures, validation procedures, limitations, and problems encountered during this study. Findings are also identified, including descriptive characteristics, ways in which the findings answer the research questions, and unexpected findings.

The foundational research question in this study was as follows: Why do social workers in rural Ohio decide not to pursue an LISW-S credential? The second research question was as follows: Are there resources or incentives that would make participants decide to pursue the LISW-S credential?

The participants were identified through public contact information received from the Ohio CSWMFT Board. Data were gathered through a demographic questionnaire completed by the participants, researcher-recorded verbal and nonverbal cues from participants during the online focus group, and verbal responses during the focus group.

Data Analysis Techniques

The time frame for data collection began when I requested public contact information for the LSWs and LISWs in rural Ohio from the Ohio CSWMFT Board on October 31, 2017. I received the information on November 1, 2017. The invitation email,

list of mental health providers in the county, and confirmation of participation email were sent on November 5, 2017, to the LSWs and LISWs who had provided email addresses with their contact information. Responses began November 30, 2017, and ended January 22, 2018. The response timeframe was more prolonged and response rates were lower than expected. I reviewed the preferences that each participant stated regarding when to hold the group (located in the demographic questionnaire) and set the date for the focus group; no participants disagreed with the proposed date. The date of the focus group was January 27, 2018. Attendance rates were also low, as only five of the eight participants who responded attended the group.

The data analysis procedures used in the study included coding and word frequency queries, which were completed through NVivo qualitative data analysis software. The transcript was uploaded into NVivo and was then coded by responses to the questions asked during the focus group. When coded, the data were linked to responses in the transcript. The responses to the demographic questionnaires were also uploaded as a Microsoft Excel document, and the participants' demographic information was coded to identify gender, race, educational degrees, license types, job positions, type of social work practice, professional setting of employment, license length, agency requirements to maintain employment position, and preferred times to meet for the focus group. This information was then formed into a project map to identify commonalities, differences, and overall demographics of the participants. These data contributed to the findings of this project, as well as to its limitations and strengths.

Validation Procedures

The validation procedures used in this project included inviting social workers as experts on the social work issue as well as member checking. Inviting social workers to be participants assisted with validity because the issue related to social workers. Member checking was used to verify the accuracy and validity of the transcript of the focus group. First, I listened to the audio recording, followed along in the transcript, and made necessary changes for accuracy. Second, I sent out the transcript to the participants for review as an attachment to the transcription review and revision email. Four of the five participants responded, stating that they did not recommend any revisions. One participant did not respond to the request to review the transcript. On the eighth day following the transcription review and revision email, after no response from one of the participants and no revisions suggested by the other respondents, I sent the final transcript as an attachment to the final dissemination to participants email.

Limitations

There were limitations in conducting this study. For instance, only five of the eight responding participants attended the focus group. One of the participants did not wish to appear on video, so I was unable to record nonverbal cues from this participant. Another participant's microphone did not work, so I was unable to hear the tone in her voice in her responses to the research questions. Three of the initial respondents did not complete the demographic questionnaire, one of whom attended the focus group. Another limitation was that only women participated, so the data did not include perceptions of males. Additionally, only social workers in rural Ohio participated, so there was no input

from social workers from other geographic areas. Additionally, all of the participants were LSWs, so there were not any perceptions from LISWs.

I encountered problems when conducting this study, including outdated demographic information from the Ohio CSWMFT Board, low response rates from solicitation, a low attendance rate for the focus group, and technical difficulties during the focus group. The demographic information that I had for LSWs and LISWs in rural Ohio was not current. Some of the email addresses I had for social workers were no longer active. Therefore, multiple emails were undeliverable. Additionally, the information I had on levels of licensure for some social workers were not accurate, as some of the responses that I received from social workers indicated that they were not practicing or actively licensed anymore or had already achieved LISW-S status, which disqualified them from the study. There were low rates of response to the emails, and responses were not received within the suggested time frames. Eight participants confirmed participation, yet only five attended.

Further, there were technical difficulties within the focus group, including a microphone not working for one of the participants. This participant had to type her responses into the chat box in the group room. It was also difficult to hear and understand two of the participants, so they were asked to repeat their answers multiple times or type their responses. Additionally, the only recording available in the focus group room in Adobe Connect was one that recorded both audio and video. Because video recording was not approved, another method to record audio was used. In my initial efforts to plan

for potential technical difficulties, I developed a backup method of recording, which I used successfully. The secondary recording was released to the transcriptionist.

Findings

There are descriptive characteristics that describe the sample of participants. Upon completion of the project, the findings helped to answer the research questions. Findings included reasons for not pursuing the LISW-S credential, barriers to obtaining the LISW-S credential, recommendations to improve the process of becoming an LISW-S, decisions to not pursue an LISW-S credential, resources and incentives to pursue the LISW-S credential, and additional comments regarding the shortage of LISW-Ss in rural Ohio.

Descriptive Characteristics

There are descriptive characteristics that appropriately characterize the sample, which were gathered from responses to the demographic questionnaire. Four of the five participants who attended the group completed the demographic questionnaire. Those four stated that they were Caucasian females who were at least 18 years old, actively licensed, and practicing as LSWs in rural Ohio. It should be noted that by observation, I determined that all participants were women.

Three of the four participants who completed the demographic questionnaire had a Master of Social Work degree, while another had a Bachelor of Science degree in sociology and psychology. While most respondents only mentioned their highest degree, one mentioned all of her educational degrees and certificates, including a Bachelor of

Psychology degree with a minor in sociology, a Master of Social Work degree, and a postgraduate Certificate in Healthcare Administration.

Job positions reported by the participants included senior and community engagement coordinator; medical social worker with hospice; executive director; mental health therapist; parent, family, and community engagement coordinator; and clinical therapist. Some of the participants had multiple professional settings of employment. Settings reported by the participants included a community action agency, hospice provider, homeless shelter, community mental health agency, and nonprofit organization. Two respondents mentioned working at a community mental health agency. Types of social work practice included the following:

- Senior services—Providing in-home assessments for Meals on Wheels and connecting seniors to programs and resources while supervising three senior centers

- Outpatient hospice in homes or nursing homes, which involved frequent travel and working with populations of all ages, including individuals and families, with a specialty in working with terminally ill patients

- Clinical and advance generalist

- Mental health and general social work with all ages

One respondent stated that she had been licensed for 4 years, another 4½ years, the third 6 years, and the fourth for 28 years. Three of the respondents stated that there were agency requirements to maintain licensure, while another stated the opposite. One respondent elaborated, stating that an LSW was required and an MSW was preferred.

Three respondents were flexible concerning times to meet, and one respondent

preferred evenings or weekends.

Reasons for Not Pursuing an LISW-S Credential

There were findings that addressed the research questions. The first research

question was as follows: Why do social workers in rural Ohio decide not to pursue an

LISW-S credential? The first inquiry to address this research question was as follows:

What is your perception of the LISW-S (Licensed Independent Social Worker with the

Training Supervision Designation) license? There were negative, neutral, and positive

responses (see Table 1).

Negative responses indicated that the process of achieving the LISW-S is cost

prohibitive, time consuming, and difficult overall. One participant mentioned that she had

been working toward the licensure for years, and another mentioned that she had been

working toward the licensure for 2 to 3 years specifically. The perception of one

participant was that she had been unsuccessful in finding someone to supervise her to

obtain the LISW, which is the license needed before obtaining the training supervision

designation. Some participants also mentioned that there are not enough LISW-Ss in rural

Ohio to provide training supervision for those who wish to become LISWs.

One participant stated that she did not know the added value of the LISW-S to the

profession and that she has not worked with many LISW-Ss, which was coded as a

neutral response. One participant noted that she knew that there were supervision

requirements to obtain an LISW-S and that it provides education for other social workers;

she expressed that she perceived it as a time-consuming process to achieve the status of an LISW-S.

There were also positive perceptions, including the perception that LISW-Ss are experienced people who help other social workers with learning and achieving the LISW and LISW-S licenses. It was also mentioned that LISW-Ss have participated in many trainings and that the process of licensure is worth the effort. Guest 1 stated, "to me it's kind of the holy grail of social work."

Table 1

Reasons for Not Pursuing an LISW-S Credential

Perception	References
Negative	14
Neutral	1
Positive	8

Barriers to Obtaining an LISW-S Credential

The second inquiry to address the research question was as follows: What perceived barriers, if any, are there to obtaining an LISW-S credential? How are the barriers specific to the micro, mezzo, and/or macro levels? As shown in Table 2, there were barriers mentioned for each level.

On the micro level, family obligations were perceived as a barrier. Additionally, time to attend supervision and time and effort to participate in specific trainings to achieve the training supervision designation were barriers. Financial costs for supervision

and licensure were perceived as barriers. Lack of financial means to obtain higher education was also mentioned. Some barriers were directed toward the requirements to obtain the LISW licensure, which is necessary before obtaining the training supervision designation.

On the mezzo level, barriers included lack of employer knowledge about the value of the licensure, lack of employer financial assistance, and lack of employer support and understanding. Guest 1 stated, "They don't understand what you can actually do with that licensure, so they don't think it's important and then they don't want to let you—in my case, they don't want to let me go to supervision." A participant mentioned that her employer did not know the capabilities of someone with an LISW-S, stating that this lack of knowledge contributed to lack of support. It was also mentioned that employers did not seem to support employees who wished to pursue higher education.

For the macro level, lack of support from the social work community and from the county were perceived as barriers. Some participants had not attempted to work toward becoming an LISW-S, so they were unsure of specific personal barriers, although they mentioned that they had knowledge of others who had attempted to pursue and obtain the licensure, who also experienced multiple barriers. The barriers mentioned by those not pursuing the licensure were cohesive with the barriers mentioned by the participants who had been actively attempting to obtain status as an LISW-S.

Table 2

Barriers to Obtaining an LISW-S Credential

Barriers	References
Family obligations	3
Financial	6
Lack of community support	1
Lack of employer assistance	3
Time	3

Recommendations to Improve the Process

The third inquiry to address the research question was as follows: What recommendations would you suggest to improve the process of becoming an LISW-S? The main themes mentioned, as seen in Table 3, were employer financial assistance, lower costs for supervision, free supervision, LISW-Ss donating to supervision costs for other social workers, and attending trainings to count toward supervision hours.

Employer financial assistance was recommended in regard to employers who might be willing to pay for the training supervision or to compensate employees for time spent attending supervision or trainings to obtain licensure. Guest 4 stated, "It is very expensive to pay for supervision if you don't have an employer who pays for it." It was also recommended that employers in the social work field contribute financially toward social workers pursuing licenses. One participant mentioned that she was paying $40 per hour for training supervision, which halted the process of pursuing the LISW-S status, as

it became cost prohibitive. Therefore, the recommendation of social workers providing free training supervision was mentioned to assist social workers to overcome this perceived barrier. Some participants mentioned that there should be a requirement for LISW-Ss to provide a certain number of supervision hours free for social workers. It was recommended that LISW-Ss contribute to the cost of licensure or supervision for LSWs and LISWs. There was mention of supervision being offered for free or at a lower cost, but the participant who made this suggestion did not indicate whom she believed should be responsible. Some participants stated that some trainings for continuing education hours and trainings that are required for licensure should be allocated toward required hours of supervision. Again, the cost-prohibitive process of obtaining supervision was mentioned.

Table 3

Recommendations to Improve the Process

Recommendations	References
Attend trainings for supervision hours	1
Employer financial assistance	1
LISW-Ss donate	1
Lower supervision costs	3
Supervisors provide free supervision	4

Decisions to Not Pursue an LISW-S Credential

The fourth inquiry to address the research question was as follows: Why have you decided not to pursue an LISW-S? Consider the factors in the micro, mezzo, and macro levels that may have impacted your decision. As shown in Table 4, three participants mentioned that they were working toward becoming licensed as an LISW, and eventually an LISW-S. One participant mentioned that she had applied for the LISW licensure and was awaiting a response from the Board. Another participant mentioned she had been attempting to obtain the supervision for 5 years and halted the process multiple times due to various reasons, such as cost of supervision, time, and personal and family obligations. One participant mentioned that she drives out of town to obtain the supervision, but that it is worth it because she wants to obtain the LISW and then work toward becoming an LISW-S. She also mentioned that she will be providing supervision free of charge when she is an LISW-S. This was mentioned as a personal vow she made to her current supervisor who is providing free supervision with a 'pay-it-forward' agreement. However, the other participants were able to identify reasons they decided not to become LISW-Ss. On the micro level, the LISW-S status was regarded as not being a personal or familial priority. It was also mentioned that it was not a priority for a participant's family. Age was also mentioned as a reason one participant decided not to pursue becoming an LISW-S. Regarding employment, Guest 2 mentioned, "Not to demean, I don't know that it would add a value, as I've been working there for 17 years, and so they just don't require it." On the mezzo level, participants mentioned that their employers did not

require it and it was not required to maintain their current job position, so there was no

motivation to pursue. There were no factors mentioned for the macro level.

Table 4

Decision to Not Pursue an LISW-S

Factors	References
Age	1
Employer does not require	2
Working toward licensure	3
Not personal or familial priorities	1
Unaware of added value	1

Resources and Incentives to Pursue the LISW-S Credential

The second research question was as follows: Are there resources or incentives

that would make participants decide to pursue the LISW-S credential? The first inquiry to

address this research question was: Are there resources or incentives at the micro, mezzo,

and/or macro levels that would change your mind or make it more likely that you would

apply for the training supervision designation in the future? There were many resources

and incentives identified, as shown in Table 5. On the micro level, it was mentioned that

some participants would more likely pursue the credential if it costed less and did not

require as much time. On the mezzo level, it was mentioned that free supervision from

LISW-Ss was also an incentive. Employer support was also mentioned as an incentive,

which meant emotionally supporting an employee's decision to leave work and attend

supervision or trainings. Financial incentives were also mentioned, specifically in regard to employers. Employment requirements also were perceived as a motivation and incentive to pursue the licensure if it meant maintaining a job position. Additionally, having more supervisors in the county appeared to make it more likely to pursue becoming an LISW-S. Some participants mentioned that if their employer required an LISW-S, they would begin to work toward that licensure. Lower costs for supervision were also identified on the mezzo level. Most incentives were linked to supervision 'struggles'. Some participants mentioned that they were pursuing becoming an LISW-S and that there was nothing that would stop them or change their mind. Another participant mentioned she was not sure of incentives that would change her mind to pursue becoming an LISW-S. One participant was unsure of any incentives, but noted that if she decided to pursue an LISW-S in the future, she would want to ensure that there were supervisors available locally, in the community. She also mentioned that costs of supervision provided by LISW-Ss would needed to be lowered. However, she stated, "At this point, I'm not interested in pursuing that designation, the LISW-S." She insisted that she was not interested in pursuing the licensure since her employer does not require it and it was not necessary to maintain her current position. One participant stated that she would prefer a financial incentive from her employer to pursue and obtain the LISW-S status. Some participants agreed that support from employers to pursue higher licensures would be appreciated. Employers were recommended to support the idea of leaving work to attend supervision and trainings to meet licensure requirements, and that it could

increase incentive to pursue a higher licensure and credentials. On the macro level, it was

mentioned that lower costs for licensure would be an incentive.

Table 5

Resources and Incentives to Become LISW-S

Resources/Incentives	References
Employer support	2
Free supervision	1
Job requirement	1
More supervisors in county	3
Nothing will stop from pursuing	2
Unknown	1

Additional Comments

The second inquiry to address this research question was as follows: Is there

anything you would like to add? Are there comments specific to the micro, mezzo, and

macro levels? As shown in Table 6, some participants mentioned that there were better

understandings on a micro level, such as recognizing the 'struggles' of the licensure and

credentialing process that an individual may face, such as finding a supervisor to provide

training supervision and maintaining the cost to obtain the supervision hours and

licensure. One of the participants who was not interested in pursuing a higher licensure

reported she obtained a better understanding of the barriers of obtaining status as an

LISW-S and she may know what more to expect if she later decided to pursue. On the

mezzo level, a participant, Guest 6, mentioned that she hoped the findings of the action research project initiate change in the community. She stated, "If somehow there could be a group of social workers developed in our county and we could all work together, that would be great." On the macro level, it was mentioned that there were hopes that the findings of this project initiate change in the field of social work. Another participant mentioned that she hoped the feedback from the participants in the project would educate others and provide feedback to governing boards to initiate change and reduce some of the perceived barriers.

Table 6

Additional Comments

Comment	References
Hope that project initiates change	2
Knowledge of struggle with process	1

These findings answer the research questions by providing insight and further understanding on perceptions of the LISW-S credential, as well as factors that influence the decision to pursue. The findings demonstrate social workers' perceptions of an issue that impacts their personal and professional lives, as well as the field of social work. The findings also presented barriers of steps that lead to obtaining an LISW-S status. The responses answered the questions and inquiries and provided suggestions and recommendations that could help other social workers in the future, as well as contribute

to change in the field of social work. There were also hopes from participants that there would be changes at all levels due to findings form this project.

One of the main findings in this project was that social workers were experiencing barriers to obtaining the LISW license, which is necessary before obtaining the training supervision designation, also known as the LISW-S. Therefore, one of the main issues of focus was on the difficulty of obtaining the license that is necessary to obtain the 'S' designation and not specifically a matter of some social workers deciding not to pursue the LISW-S status. The perceived barriers of finding someone to provide the supervision to obtain the independent license, as well as the cost of the supervision and licensure, and the necessary time to attend the supervision were all mentioned as barriers to obtaining the LISW. The process of becoming independently licensed was perceived as one of the main barriers. Additionally, some people did not see the value of the higher licensure nor the value of pursuing the licensure, which impacts the decision to not become an LISW-S. The findings also demonstrated that social workers appear to be passionate about finding solutions and ways to overcome barriers, as well as helping other social workers. The involvement of the communities and organizations within the different levels was also suggested, such as employers, social workers in the community, the licensing Board, and those in the field of social work.

Unexpected Findings

There were unexpected findings in this study. One unexpected finding was that social workers may not know the added value of becoming an LISW-S, or of the status itself. Another unexpected finding was that participants mentioned very little about

certain factors of obtaining the LISW-S status, such as examinations, examination fees, licensing fees, and educational requirements. There was also no mention of professional organizations or licensing boards contributing to the costs of the supervision, although participants mentioned that LISW-Ss should provide free supervision or donate to help pay for supervision for other social workers.

Summary

Findings from this project helped to gain a better understanding of the influences on social workers' decisions about whether or not to pursue and obtain an LISW-S credential. Through data analysis, including coding and word frequency queries, results were organized to determine ways the research questions were answered. Validation procedures were utilized to add validity to the project. There were limitations and technical difficulties throughout the study. Participants contributed by providing insight on reasons for not pursuing an LISW-S credential, barriers to obtaining an LISW-S credential, recommendations to improve the process of becoming an LISW-S, resources and incentives to pursue the LISW-S credential, and other valuable insight on the shortage of LISW-Ss in rural Ohio.

There were findings in this study that could contribute to a positive impact from changes within the social work field. It appeared that social workers were passionate about creating and contributing to positive change, as well as making their voices heard with hopes to helping others. All findings from this project apply to professional practice, as well as provide implications for social change.

Section 4: Application to Professional Practice and Implications for Social Change

The purpose of this study was to increase my understanding of why social workers in rural Ohio do not purse an LISW-S. The reason it was conducted was to gain a better understanding of the influences on the decision to obtain an LISW-S.

There were key findings from this study. Participants described their perceptions of LISW-Ss and the credential. Participants mentioned that an LISW-S appears to be someone who is trained and experienced and who helps other social workers. Participants perceived supervision hours and pursuing the LISW licensure and LISW-S credential as cost prohibitive, time consuming, and difficult. Some participants did not know the added value of becoming an LISW-S. However, most participants agreed that there were not enough LISW-Ss in the area to provide supervision for those pursuing an LISW-S credential.

Perceived barriers to obtaining an LISW-S credential included time to attend supervision and trainings, competing family obligations, and costs of supervision and licensure. Other perceived barriers included lack of employer support to attend trainings and supervision; lack of employer knowledge, assistance, and understanding; and lack of support from the social work community.

Recommendations to improve the process of becoming an LISW-S included LISW-Ss providing free or low-cost supervision, overall lower costs for supervision, financial assistance, attending trainings to count toward supervision hours, and LISW-Ss donating to the cost of supervision.

Most of the participants were pursuing or planned to pursue the credential, though some participants did not find it necessary to do so. Some did not know the added value of pursuing the credential or of the LISW licensure. Resources or incentives to pursue an LISW-S credential included free supervision, employer support and financial incentives, requirements to maintain a job position, and having more supervisors in the county. Those who were pursuing the credential reported that nothing that was going to stop them in this effort, despite the difficult process of meeting licensure and credentialing requirements. Participants mentioned that they hoped that the findings from the project initiated change in the community, as well as in the field of social work. It was also recommended that social workers form groups to support and educate each other to overcome barriers and develop possible solutions.

The purpose of this section is to describe applications of this project in the context of professional ethics in social work practice, including principles and values related to this social work problem, ways that the NASW Code of Ethics guides clinical practice in this area of focus, and ways that the findings may impact social work practice in relation to the area of professional ethics. I also present recommendations for social work practice, including action steps for clinical social work practitioners who work in this area of focus, findings that will impact my own social work practice, transferability and usefulness of the findings, limitations that impact the usefulness of this study, and recommendations for further research. Implications for social change are also identified, including the potential impact for positive change at the micro, mezzo, and macro levels.

Applications for Professional Ethics in Social Work Practice

One principle from the NASW Code of Ethics related to this social work problem indicates that social workers' primary goals are to help people in need and to address social problems (NASW, 2017). This principle related to the problem in this study because the findings motivated me to address the problems that the social workers stated that they were facing. Disseminating the findings will help to educate social workers who decide to follow the path of becoming an LISW-S. Social workers are in need of help in addressing and overcoming barriers, and I believe that this study may empower others to make changes. The value indicating the importance of human relationships also applies to this social work problem because, according to the NASW (2017), social workers should understand that relationships are important for change. The social workers in this study identified LISW-Ss as important people who help other social workers. This implies that LISW-Ss are important in their relationships with other social workers because they train and provide guidance as well as help others to overcome barriers.

The NASW Code of Ethics guides clinical social work practice in this area of focus. While social workers have commitments to their clients, they also have commitments to their colleagues (NASW, 2017). These commitments should have equal importance, and just as social workers fight for justice within their profession, they should fight for justice for their consumers. It is important for social workers to ensure competence in all areas by receiving necessary training. Therefore, without training from supervisors, supervisees may not be able to provide quality clinical social work to consumers in need.

These findings may impact social work practice, particularly in relation to the area of professional ethics. If LISW-Ss can implement some of the changes proposed by the participants in this project, such as providing services to local social workers and providing some free supervision, their actions would serve to uphold the NASW Code of Ethics. Social workers may feel more confident that they are acting ethically and helping others in the process. The NASW Code of Ethics states that social workers have ethical responsibilities to clients, to colleagues, in practice settings, as professionals, and to the social work profession (NASW, 2017).

Social workers should remain proficient in practice and functions (NASW, 2017). By considering and implementing possible solutions noted in the findings of this study, it may be possible to help social workers ensure that they are basing their services on the recognized knowledge of other social workers. Social workers should also contribute time to activities that promote value for the profession and uphold the mission of the profession (NASW, 2017). Social workers could help other social workers, work to improve the profession, and uphold ethical practice in order to strengthen the mission of social workers.

<div align="center">**Recommendations for Social Work Practice**</div>

Two recommended action steps for clinical social work practitioners who work in this area of focus are to educate others and apply the concept of barriers to their own practice with consumers. Consumers who use social work services also face barriers, such as transportation and cost. Therefore, if an agency allows community- and home-based practice, it may be beneficial to consumers for providers to meet them where it is

convenient for them. Social workers should also provide some pro bono services to those

who do not have financial or insurance resources to obtain services. If there are

practitioners who work with consumers, it may also be beneficial to gain more

knowledge of ways to become educated and trained so that they may provide competent

services to consumers.

LISW-Ss can begin to consider providing services that may help other social

workers to overcome barriers. If LISW-Ss can provide some free supervision and assist

local social workers, change may be initiated. They can also educate social workers on

the issues that impact the profession so that social workers may be more prepared

throughout the process. Researchers can also address this issue by researching more

populations to determine what other barriers exist and how each demographic area can

begin to address the barriers together. Regarding policy, there seems to be needs for

policy changes. For instance, the governing boards can identify and recognize the barriers

that social workers are facing and make licensure and credentialing more flexible so that

supervision hours may be more accessible and cost efficient. Changes need to be enacted

to ensure that there are enough LISW-Ss to help other social workers.

These findings will impact my own social work practice as an advanced

practitioner. Now that I am aware of the barriers that the costs of supervision create, I

will ensure that I provide some free supervision. I will provide hours at no cost for people

in my community so that they do not have to travel. Because time, availability, and cost

were some of the key issues presented, I would like to make sure that change starts with

me in my local community. If LISW-Ss begin to help other social workers in the focused

community, their actions may initiate change in other demographic areas. I will also be able to help other social workers find resources in their communities, in the hope that they will not face as many barriers that participants cited. I can take time to educate social workers so that they may be more prepared to overcome barriers when they begin working toward licensure and credentialing.

There is transferability for the findings from this study to the field of clinical social work practice. If more LSWs and LISWs are obtaining clinical and training supervision, they will have greater competence in their practice with consumers. Their increased competence could assist them in developing confidence in their capabilities and increased outcomes for their consumers. Clinical social workers may also be able to recognize barriers and relate to the consumers they serve. Many consumers face daily barriers, and since social workers also face barriers, supervision may improve the level of rapport and understanding between social workers and consumers.

The findings from this study may be useful to the broader field of social work practice. If more social workers could achieve the LISW-S credential, they would be able to provide more training to other social workers, which could help the latter to be more educated and competent when providing services to consumers.

This study may also have usefulness for other researchers. Researchers could identify other demographic areas and more social workers to provide perceptions of the credential and the barriers and incentives surrounding its achievement to provide more generalizable findings and to gain greater understanding of why people may not pursue this credential.

Finally, this study has usefulness in the context of policy considerations, in that the participants identified barriers and possible solutions and reviewed the laws and rules for social work practice, licensure, and credentialing. Policies could be tailored to help potential licensees to achieve the LISW-S status.

A limitation that may impact the generalization of this study is that social workers were chosen from rural Ohio; therefore, the sample was not representative of all regions in the United States. Additionally, only women participated; therefore, men's opinions were not represented. There were also low response and attendance rates, which decreased the generalization factor for the focused county. Another limitation was that some email addresses provided by the Ohio CSWMFT Board no longer existed. Additionally, some of the social workers who were recruited had also already obtained an LISW-S by the time of recruitment, and others were not willing to participate because they did not feel that they would have much to contribute to the study.

A strength of this study was that participants were engaged when participating in the focus group. The focus group allowed them to voice their opinions, and because they were with like-minded individuals, they probably felt empowered to speak the truth. Participants also presented as passionate about the topic, as evidenced by their responses and nonverbal cues. Participants were able to recommend possible solutions that could impact future studies and research. Another strength was that all participants were patient, although some experienced technical difficulties.

Recommendations for further research that are grounded in the strengths of the current study include capitalizing on the ideas mentioned by the participants and perhaps

making some changes that could then be researched, such as evaluations of new programs or policies. Holding a focus group at a conference for social workers such as that held by the NASW may be a good idea to gain more perceptions from a wider array of social workers. There may be many more social workers who are passionate about this issue but who do not reside in the community in which this study took place.

There are recommendations for further research that are grounded in limitations of the current study. One recommendation is to include a larger sample to recruit participants, which could increase the response rate. Another recommendation is to advertise the study within professional organizations or on social media, which could increase awareness as well as participation rates. Greater demographic diversity among participants might also result in more and different responses and ideas. The call-in option could also be used if an online meeting space is used in the future, which might reduce the chances of technical difficulties. Another recommendation is to hold an in-person focus group so that there are not technical difficulties for the participants. This could also increase the capability to record nonverbal cues. Incentives could also be given to increase interest in participation. A final recommendation is to have an assistant help with recording nonverbal cues while the researcher is concentrating on responses and follow-up questions.

There are ways in which the information produced in this project can be disseminated. One potential channel for dissemination is the NASW. I could present the information at conferences to bring awareness to more social workers. Another approach to dissemination could involve the Ohio CSWMFT Board. This could be helpful because

the members of the Ohio CSWMFT Board could possibly begin to find ways to implement solutions that were recommended in the focus group. They could also reach out to those who are licensed by the Board to be able to implement change. A third channel for dissemination could be publication in a social work journal.

Implications for Social Change

There are potential impacts for positive change at the micro, mezzo, and macro levels. At the micro level, individuals could be informed of the perceived barriers that exist to obtaining the LISW license and LISW-S credential. This could assist individuals in preparing better to find ways to overcome barriers, such as seeking supervisors who provide free supervision or supervision at low cost to obtain the LISW license. Additionally, it could help others to develop plans to make time to attend supervision and save money to pay for the cost of supervision and licensure. They could also begin to incorporate their employers into the plan so that they may plan for time to leave their place of employment to attend supervision. Individuals may also be able to prepare their families for the time that it could take to obtain the credential. At the mezzo level, employers could be educated on barriers related to employers' allowance for time and understanding of the importance of supervision and the value of the LISW-S credential. Employers may be able to understand the benefits for their agencies, employees, and consumers, which could impact care and quality of services. At the macro level, the social work professional organizations and accrediting educational organizations could assist with helping social workers find local supervisors and promote change in this issue. The findings could be presented at conferences to increase awareness of perceived

barriers and possible solutions and allow social workers to collaborate in developing solutions and providing insight into this issue.

There are also potential impacts for positive change at the practice, research, and policy levels. At the practice level, social workers may be able to incorporate their personal accounts of barriers and solutions into their practice with consumers to demonstrate the capabilities of overcoming barriers. At the research level, more researchers could investigate the issue of the shortage of LISW-Ss, which could lead to more voices being heard and more solutions being recommended. More research could be performed to identify additional barriers to obtaining an LISW license, which could eliminate or minimize the impacts on the training supervision designation and the impact on the social work field. There could be positive changes at the policy level, because the licensing boards may realize that changes need to be implemented to create a more appealing and achievable level of licensure and designation. Policies could be implemented, such as supervisors being required to provide some free supervision. Further, state agencies could provide supervision so that individuals would not be forced to provide supervision for free. When there are not enough people obtaining an LISW, the situation impacts the number of people who will be able to obtain the training supervision designation.

Summary

The issue identified that sparked this action research project was the lack of LISW-Ss in rural Ohio, as well as a gap in research and findings. The goal of this action research project was to gain a better understanding of why social workers in rural Ohio

do not pursue an LISW-S credential. Social workers in rural Ohio were brought together to make their voices heard on this topic. The social workers produced information on perceptions of licensure and credentialing, barriers to licensure and credentialing, recommendations to improve the licensure and credentialing processes, impacts on decisions not to pursue the credential, resources and incentives that would make it more likely to pursue the credential, and recommendations for positive social change. It is my hope that the findings will spark change at all levels and for all social workers. The field of social work needs transformation, and the participants in this project appeared passionate about being a part of a system of change. There were many key findings that identified ways that systems interact to influence decisions. My knowledge level has increased, and I am hopeful that the findings may be disseminated to assist others in need and spread the word regarding much-needed changes to improve the social work field.

References

Adobe Systems, Incorporated. (n.d.). Home page. Retrieved from http://www.adobe.com

Albritton, T., Angley, M., Grandelski, V., Hansen, N., & Kershaw, T. (2014). Looking

for solutions: Gender differences in relationship and parenting challenges among

low-income, young parents. *Family Process, 53*(4), 686-701.

doi:10.1111/famp.12088

Association of Social Work Boards. (n.d.). Home page. Retrieved from

https://www.aswb.org

Beddoe, L. (2012). External supervision in social work: Power, space, risk, and the

search for safety. *Australian Social Work, 65*(2), 197-213.

doi:10.1080/0312407X.2011.591187

Beddoe, L. (2017). Harmful supervision: A commentary. *Clinical Supervisor, 36*(1), 88-

101. doi:10.1080/07325223.2017.1295894

Beddoe, L., & Howard, F. (2012). Interprofessional supervision in social work and

psychology: Mandates and (inter) professional relationships. *Clinical Supervisor,*

31(2), 178-202. doi:10.1080/07325223.2013.730471

Berglund, J. D. (2015). Pain and joy in school: Reflections on becoming a social worker.

Reflections: Narratives of Professional Helping, *21*(4), 51-54. Retrieved from

https://www.reflectionsnarrativesofprofessionalhelping.org/index.php/Reflections

Borders, L. D., & Giordano, A. L. (2016). Confronting confrontation in clinical

supervision: An analytical autoethnography. *Journal of Counseling &*

Development, 94(4), 454-463. doi:10.1002/jcad.12104

Bradley, C., Maschi, T., O'Brien, H., Morgen, K., & Ward, K. (2012). Faithful but

different: Clinical social workers speak out about career motivation and

professional values. *Journal of Social Work Education, 48*(3), 459-477.

doi:10.5175/JSWE.2012.201000043

Caws, P. (2015). General systems theory: Its past and potential. *Systems Research and*

Behavioral Science, 32(5), 514-521. doi:10.1002/sres.2353

Coghlan, D. (2016). Retrieving a philosophy of practical knowing for action research.

International Journal of Action Research, 12(1), 84-107. doi:10.1688/IJAR-2016-

01-Coghlan

Council on Social Work Education. (n.d.). Home page. Retrieved from

http://www.cswe.org

Council on Social Work Education. (2015). *Educational policy and accreditation*

standards for baccalaureate and master's social work programs. Retrieved from

http://www.cswe.org/Accreditation/EPASRevision.aspx

Deckert, J. C., & Canda, E. (2016). The influence of faith background on Mennonite

students' choice of social work as a profession: An exploratory study. *Social Work*

& Christianity, 43(2), 213-232. Retrieved from

https://www.nacsw.org/publications/journal-swc/archived-swc/

Dumbili, E. W. (2016). Intoxicating entertainment? The influence of "Star Music Trek"

on the drinking practices of Nigerian students. *Contemporary Drug Problems,*

43(1), 62-78. doi:10.1177/0091450916637936

Endorsement. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

https://www.merriam-webster.com/dictionary/endorsement

Ewart, J., & Ames, K. (2016). Talking text: Exploring SMS and e-mail use by Australian

talkback radio listeners. *Radio Journal: International Studies in Broadcast &*

Audio Media, 14(1), 91-107. doi:10.1386/rjao.14.1.91_1

Gagné, A., Valiquette-Tessier, S., Vandette, M., & Gosselin, J. (2015). Reflecting on the

co-parenting experience of couples living in established stepfamilies: A

phenomenological inquiry. *Journal of Family Research*, *27*, 101-122. Retrieved

from http://en.sbu.ac.ir/Research_Institutes/Family_Research/Pages/Journal-of-

Family-Research-.aspx

Gianino, M., Ruth, B. J., & Miyake Geron, S. (2016). Social work continuing education:

A statewide case study. *Journal of Teaching in Social Work, 36*(4), 342-362.

doi:10.1080/08841233.2016.1206053

Grise-Owens, E., Owens, L. W., & Miller, J. J. (2016). Recasting licensing in social

work: Something more for professionalism. *Journal of Social Work Education,*

52(Suppl. 1), S126-S133. doi:10.1080/10437797.2016.1174641

Hair, H. J. (2013). The purpose and duration of supervision, and the training and

discipline of supervisors: What social workers say they need to provide effective

services. *British Journal of Social Work, 43*(8), 1562-1588.

doi:10.1093/bjsw/bcs071

Hessenauer, S., & Zastrow, C. (2013). Becoming a social worker: BSW social workers'

    educational experiences. *Journal of Baccalaureate Social Work, 18*, 19-35.

    Retrieved from http://jbsw.org/?code=cswe-site

Howard, F. M., Beddoe, L., & Mowjood, A. (2013). Interprofessional supervision in

    social work and psychology in Aotearoa New Zealand. *Aotearoa New Zealand*

    Social Work Review, 25(4), 25-40. doi:10.11157/anzswj-vol25iss4id60

Knowledge. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

    https://www.merriam-webster.com/dictionary/knowledge

Lack. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

    https://www.merriam-webster.com/dictionary/lack

Lawriter. (n.d.). *Ohio laws and rules: 4757: Counselor, Social worker, and Marriage and*

    Family Therapist Board. Retrieved from http://codes.ohio.gov/oac/4757

Lin, V. W., Lin, J., & Zhang, X. (2016). U.S. social worker workforce report card:

    Forecasting nationwide shortages. *Social Work, 61*(1), 7-15.

    doi:10.1093/sw/swv047

Manthorpe, J., Moriarty, J., Hussein, S., Stevens, M., & Sharpe, E. (2015). Content and

    purpose of supervision in social work practice in England: Views of newly

    qualified social workers, managers and directors. *British Journal of Social Work*,

    45(1), 52-68. doi:10.1093/bjsw/bct102

McNiff, J., & Whitehead, J. (2010). *You and your action research project*. New York,

    NY: Routledge.

Miehls, D., Everett, J., Segal, C., & du Bois, C. (2013). MSW students' views of supervision: Factors contributing to satisfactory field experiences. *Clinical Supervisor, 32*(1), 128-146. doi:10.1080/07325223.2013.782458

Miller, J. J., Deck, S. M., Grise-Owens, E., & Borders, K. (2015a). Exploring graduate students' perceptions about social work licensing. *Social Work Education, 34*(8), 986-1004. doi:10.1080/02615479.2015.1096924

Miller, J. J., Deck, S. M., Grise-Owens, E., & Borders, K. (2015b). Undergraduate student perceptions of social work licensure: An exploratory study. *Journal of Baccalaureate Social Work, 20*(1), 43-61. doi:10.18084/1084-7219-20.1.43

Miller, J. J., Grise-Owens, E., & Escobar-Ratliff, L. (2015). Preparing MSW students for social work licensure: A curricular case example. *Journal of Teaching in Social Work, 35*(3), 296-316. doi:10.1080/08841233.2015.1039160

Mughal, Z., & Noory, S. (2015). Increasing medical students' confidence in procedural skills using a junior doctor-delivered bedside supervision program. *Teaching & Learning in Medicine, 27*(4), 417-421. doi:10.1080/10401334.2015.1077130

National Association of Social Workers. (n.d.). Home Page. Retrieved from http://www.socialworkers.org

National Association of Social Workers. (2017). *Code of ethics of the National Association of Social Workers*. Retrieved from https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English

Nel, L., & Fouche, P. (2017). Experiences of master's students regarding clinical

    supervision in an applied psychology programme in South Africa. *Teaching in*

    Higher Education, 22(1), 30-43. doi:10.1080/13562517.2016.1213230

Ng, M. L., Bridges, S., Law, S. P., & Whitehill, T. (2014). Designing, implementing and

    evaluating an online problem-based learning (PBL) environment—A pilot study.

    Clinical Linguistics & Phonetics, *28*(1-2), 117-130.

    doi:10.3109/02699206.2013.807879

Ohio Board of Psychology. (n.d.). Retrieved from http://psychology.ohio.gov/Laws-

    Rules/Psychology-Law-and-Rules

Ohio Chemical Dependency Professionals Board. (n.d.). Home Page. Retrieved from

    http://ocdp.ohio.gov/licensing.stm

Ohio Counselor, Social Worker, and Marriage and Family Therapist Board. (n.d.). Home

    Page. Retrieved from http://cswmft.ohio.gov/

Ohio Counselor, Social Worker, and Marriage and Family Therapist Board. (2016). *2016*

    licensee count. Retrieved from

    http://cswmft.ohio.gov/CSWMFTBoard/ReportstotheGovernor.aspx

Ohio License Center. (n.d.). *License search*. Retrieved from

    https://license.ohio.gov/lookup/default.asp

Paulus, T., Woods, M., Atkins, D. P., & Macklin, R. (2017). The discourse of QDAS:

    Reporting practices of ATLAS.ti and NVivo users with implications for best

    practices. *International Journal of Social Research Methodology, 20*(1), 35-47.

    doi:10.1080/13645579.2015.1102454

Perception. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

    https://www.merriam-webster.com/dictionary/perception

Petrila, A., Fireman, O., Fitzpatrick, L. S., Hodas, R. W., & Taussig, H. N. (2015).

    Student satisfaction with an innovative internship. *Journal of Social Work*

    Education, *51*(1), 121-135. doi:10.1080/10437797.2015.977175

Plitt Donaldson, L., Fogel, S. J., Hill, K., Erickson, C., & Ferguson, S. (2016). Attitudes

    toward advanced licensing for macro social work practice. *Journal of Community*

    Practice, 24(1), 77-93. doi:10.1080/10705422.2015.1127864

QSR International. (n.d.). Retrieved from http://www.qsrinternational.com/

Reciprocity. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

    https://www.merriam-webster.com/dictionary/reciprocity

Rotaru, T., Drug, V., & Oprea, L. (2016). How doctor-patient mutual trust is built in the

    context of irritable bowel syndrome: A qualitative study. *Revista De Cercetare Si*

    Interventie Sociala, 55, 185-203. Retrieved from https://www.rcis.ro/

Rousseau, D. (2015). General Systems Theory: It's present and potential. *Systems*

    Research and Behavioral Science, 32(5), 522-533. doi:10.1002/sres.2354

Schweitzer, D., Chianello, T., & Kothari, B. (2013). Compensation in social work:

    Critical for satisfaction and a sustainable profession. *Administration in Social*

    Work, 37(2), 147-157. doi:10.1080/03643107.2012.669335

Shortage. (n.d.). In *Merriam-Webster's online dictionary*. Retrieved from

    https://www.merriam-webster.com/dictionary/shortage

State Medical Board of Ohio (n.d.). *Statutes and the Ohio Revised Code*. Retrieved from

    http://www.med.ohio.gov/LawsRules/Statutes.aspx

State of Nevada Board of Examiners for Social Workers. (n.d.). Home Page. Retrieved

    from http://socwork.nv.gov/

Stringer, E. T. (2007). *Action research* (Laureate Education, Inc., custom ed.). Thousand

    Oaks, CA: Sage.

Touboulic, A., & Walker, H. (2016). A relational, transformative and engaged approach

    to sustainable supply chain management: The potential of action research. *Human*

    Relations, 69(2), 301-343. doi:10.1177/0018726715583364

Turner, K. (2015). "Borrowed light": Reflecting on learning to be a social worker.

    Reflections: Narratives of Professional Helping, 21(4), 32-34. Retrieved from

    https://www.reflectionsnarrativesofprofessionalhelping.org/index.php/Reflections

Tuttas, C. A. (2015). Lessons learned using web conference technology for online focus

    group interviews. *Qualitative Health Research, 25*(1), 122-133.

    doi:10.1177/1049732314549602

The University of Chicago: Social and Behavioral Sciences Institutional Review Board.

    (n.d.). *Confidentiality agreement for transcriptionists (sample)*. Retrieved from

    https://sbsirb.uchicago.edu/page/confidentiality-agreement-transcriptionists-

    sample

U.S. Census Bureau. (n.d.). Home Page. Retrieved from https://www.census.gov

Von Bertalanffy, L. (1950). The theory of open systems in physics and biology. *Science,*
3(2872), 23-29. Retrieved from the

http://science.sciencemag.org/content/111/2872/23

Walden University. (n.d.). *Sample consent form for adults (for participants over 18).*
Retrieved from

http://academicguides.waldenu.edu/researchcenter/orec/documents

Watkins, C. J. (2013). The beginnings of psychoanalytic supervision: the crucial role of
Max Eitingon. *American Journal of Psychoanalysis*, *73*(3), 254-270.
doi:10.1057/ajp.2013.15

Wermeling, L., Hunn, V., & McLendon, T. (2013). Social work education's effect on
retention. *Journal of Social Work Education, 49*(2), 222-234.
doi:10.1080/10437797.2013.768111

White, E., & Winstanley, J. (2014). Clinical supervision and the helping professions: An
interpretation of history. *Clinical Supervisor, 33*(1), 3-25.
doi:10.1080/07325223.2014.905226

Witherington, D. C. (2014). Self-organization and explanatory pluralism: Avoiding the
snares of reductionism in developmental science. *Research in Human*
Development, 11(1), 22-36. doi:10.1080/15427609.2014.874763

Woodyatt, C. R., Finneran, C. A., & Stephenson, R. (2016). In-person versus online focus
group discussions: A comparative analysis of data quality. *Qualitative Health*
Research, 26(6), 741-749. doi:10.1177/1049732316631510

Ybarra, M. L., DuBois, L. Z., Parsons, J. T., Prescott, T. L., & Mustanski, B. (2014). Online focus groups as an HIV prevention program for gay, bisexual, and queer adolescent males. *AIDS Education & Prevention*, *26*(6), 554-564. doi:10.1521/aeap.2014.26.6.554