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Intuition in social work practice: a different kind of knowing

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ABSTRACT

This phenomenological, interpretive study sought to discover whether social workers in Aotearoa (New Zealand) integrated intuitive knowledge and experiences into their practice. The aim was to understand how this integration or non-integration impacted their practice and how their professional environments influenced their experiences. Through reflexive thematic analysis of interview transcripts, the findings gave insight into the practice of how four social workers utilized intuition in their professional practice. These findings included the impact of this integration and their professional environment on their personal and professional well-being and client outcomes.

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Introduction

This research aimed to discover how social workers use and experience intuition in social work practice in Aotearoa (New Zealand) and contribute to a growing body of literature on this topic. We intended to allow space for participants to freely express their thoughts and ideas without fear of being ridiculed, called unprofessional, or inappropriate.

Before beginning this research, through personal conversations with social work practitioners who have had intuitive experiences related to their practice, we were inclined to believe that most social workers did not feel safe personally, professionally, or ethically integrating their intuitive experiences into their practice, yet it seemed that many decisions were based on these experiences, consciously or unconsciously.

Positivism, a belief that what is legitimate is only what can be measured empirically and scientifically (Durkheim & Lukes, 1982 does not allow for a space in between what humans personally experience and what science has provided measures and evidence for (DeCarlo et al., 2020). Intuitive experiences fall into this space. The expectation of inclusion of Kaupapa Māori¹ in the social work profession is growing, and with this, social work in Aotearoa (New Zealand) is moving further toward inclusion and appreciation of

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Indigenous wisdom, which includes intuition, embodiment, and the acknowledgment of unseen forces as a legitimate lens for constructing the world.

We hope this research will be useful to the profession by providing some examples of integrating intuitive knowledge in professional practice in Aotearoa (New Zealand). We were also curious to find out what integration can look like and how practitioners describe the influence of their professional environments on intuitive practice. We also hoped that this study could grow into further research into how Aotearoa social workers' intuitive experiences can be openly embraced in a safe, effective, and inclusive manner, particularly in work environments that are not specifically Kaupapa Māori.

What we found in the literature

The study of intuition is in a state of steady growth. Subjects concerned with “known unknowns” (Gambrill, 2018), such as intuition, rapidly expand into a much larger discourse on existentialism (Canda & Furman, 2020), transpersonal theory (Luoma, 1998), and social constructivist paradigms (Ringel, 2008). Thus, working within the parameters of this small-scale research, it was integral that we narrow the assessment of the literature to the six areas outlined in this review:

- Defining intuition
- Exploring the overlap of spirituality and intuition
- Ethics
- Integration or exclusion
- Bias
- The influence of positivism and managerialism

Defining intuition

The first step in this research was to define what was meant when enquiring about intuition and intuitive experiences. Wahbeh et al. (2022) developed what is known as the Noetic Signature Inventory, a 44-item inventory and 12-factor model developed from an international qualitative study on the first-hand accounts of noetic experiences of 521 English-speaking adults (Wahbeh et al., 2021). The 12-factor model itemizes intuitive experiences and gives a basis for this study's thematic analysis. These items are:

- Inner knowing,
- Embodied sensations,
- Visualizing to access or effect,
- Inner knowing through touch,

- Healing,
- Knowing the future,
- Physical sensations from other people,
- Knowing yourself,
- Knowing others' minds,
- Apparent communication with nonphysical beings,
- Knowing through dreams,
- Inner voice.

Wahbeh et al. (2022).

Additional texts embarking on similar explorations provided useful definitions for intuition, such as intuition as a form of non-conscious reasoning (Cook, 2017), emotional reasoning, and internalized learning (Sicora et al., 2021), affect attunement and empathy (Trevithick, 2014), and defining it as a product of experiential and traditional knowledge (Welsh & Lyons, 2001). Psychology Today defines it as:

a form of knowledge that appears in consciousness without obvious deliberation. It is not magical but rather a faculty in which hunches are generated by the unconscious mind rapidly sifting through past experience and cumulative knowledge (Psychology Today, 2024).

We agreed that intuition is closely linked to spirituality in being non-material, yet strongly felt and beyond our conscious control, yet able to be assessed and reflected upon, including our knowledge, experience, and rational reasoning. We also agreed that an inquiry-based approach can help us discover whether we can use it in our professional practice or ignore it.

Spirituality and intuition

An immediate issue to navigate when embarking on this research is the blurred lines between spiritual and/or religious experiences and intuition. Canda and Furman's (2020) work on this topic poses perhaps the simplest framework yet: spirituality connotes a way of processing and a way of being. This also defines the experiences of individuals who report noetic experiences (Wahbeh et al., 2021) and captures the additional definitions explored previously in this review. Vetvik et al.'s (2018) definition of spirituality includes both religious and nonreligious ways individuals process information and make meaning. Specific to Aotearoa, Nash and Stewart (2002) analyzed that spirituality is an important aspect of the human experience, related to but different from religion, which is similar to the perspective of Canda and Furman (2020), who state spirituality and religion are distinct but directly related concepts. While aware that the two terms represent two very different concepts, sourcing literature on integrating intuition into the professional

practices of the caring professions is not without limits. Thus, working on the premise that spiritual experiences, by definition, are akin to intuitive experiences requires wider exploration, which is beyond the scope of this research.

Concerns around ethics and taboo

The literature overwhelmingly concludes that there are strong cultural taboos regarding intuitive practices in the professional social work setting. Wahbeh et al. (2021) found that the notion of taboo prevents transparent discussion of noetic experiences despite mounting evidence of how common they are. This resonates with Canda & Furman's work (2020), which found that some social workers reported that incorporating spirituality into professional practice violates the International Federation of Social Workers (2018). What is intriguing about this is that Vetvik et al. (2018) found that the International Federation of Social Workers Code of Ethics calls for a holistic, person-in-environment approach to clients, which should include understanding a client's spiritual integrity and well-being. The Aotearoa New Zealand Association of Social Workers (2019) Code of Ethics includes "Wairuatanga," which relates to the spirituality and soul as one of its main principles and emphasizes the expectation that social workers are capable of holding space for their spiritual well-being of themselves and others. In that context, the implication is that integration of intuitive ways of knowing is in harmony with the code of ethics rather than in breach. Additionally, Fox (2021) found that although Māori practitioners emphasize the importance of integrating spirituality into social work practice, traditional knowledge is neglected in everyday practice due to systemic issues related to colonization. Further, Vetvik et al. (2018) found that most clients are receptive to integrating spirituality into treatment, giving little indication that they would find integration unethical. They reported that practitioners do not offer integration despite the high interest of clients. There is a distinct clash between what the research shows, practitioners' interpretation of codes of ethics, and a tacit professional taboo.

Integration enhances, and exclusion can be detrimental

The literature is conclusive that integrating intuition into the social workers' toolkit enhances their practice, and exclusion can be detrimental. The study of the role of intuition in child and family social workers' assessments of risk during initial visits reported that intuition, emotional responses, "niggles," and "gut feelings" allow social workers to reach rapid decisions with incredible accuracy, often before deliberative or analytic reasoning can draw on the facts (Cook, 2017). That does not mean that facts and deliberative reasoning need to be ignored or excluded; it just means that professional decisions can be

enhanced by the awareness of intuition in this process. Sicora et al. (2021) found that social workers' expectation to exclude less tangible processes, such as intuition, from their decision-making in favor of explicit rationale excludes a central part of the human brain's capability to make sound judgment calls. Similarly, Trevithick (2014) found that the consequence of exclusion seriously hinders the quality and effectiveness of social work. Welsh and Lyons (2001) found that it is not always appropriate for practitioners to disregard intuitive knowledge when making assessment decisions, specifically in the context of mental health. Welsh and Lyons (2014) posit that the way forward is encouraging social workers to practice a blend of experiential, traditional, and intuitive knowledge, which resonates with Trevithick's (2014) work. Further, Nash and Stewart (2002) state that a safe, balanced, and confident social worker is one who first knows their own personal approach to spirituality and religion and, secondly, is knowledgeable about the spiritual experiences of clients. We would add the importance of ensuring that spirituality or intuitive knowledge is never imposed on clients but openly explored, preferably at the client's request, with the purpose of inspiration, hope, and inclusion of practical wisdom that is often an ally in problem-solving.

Bias and how to avoid it

The literature is also conclusive that in integrating intuition lies a risk of human error and imposition of bias. There is concern that when left unchecked, intuition may be vulnerable to mishandling and confused with unconscious bias (Welsh & Lyons, 2001, Cook, 2017; Sicora et al. 2021). Carew (1987) proposes that mitigating this risk lies not in the exclusion of intuition but in following a process upon the reception of intuitive knowledge, which is to observe, forms a hypothesis, verify, and take action. Sicora et al. (2021) suggest "discipline" upon integration, and Cook (2017) suggests critical evaluation. Fleißner and Steimle (2024) proposed a theoretical framework for assessing intuitive reasoning in social work, which offers a potential way of using intuition safely and reflexively to avoid bias and imposition.

The influence of positivism, managerialism, and evidence-based practice

The existing literature is pointing toward the artificial divide between evidence-based practice and integrated intuition. Trevithick (2014) argues that managerialism is the reason social work has failed to uphold or recognize the central role emotional and intuitive reasoning plays in the lives of human beings and has lauded logical thinking as innately superior to idiosyncratic, intuitive, and unconscious elements, particularly in judicial decision-making. Managerialism and positivism often go together (Clegg, 2014), and Welsh and Lyons (2001) point to positivism in workplaces as the main cause of negative

impacts on practitioners' capabilities during mental health clinical assessments. Specific to the Aotearoa (New Zealand) context, Phillips (2016) found that the values and practices of organizations can directly block spiritual experiences in practice, and such environments are unwilling to handle the spiritual concerns of social workers appropriately, preferring to pathologize them. Finally, Pease (2009) queries whether evidence-based practice as we know it is conducive to critical social work, theorizing that the best model of practice for social workers encompasses non-positivist forms of knowledge that do not currently fit within the evidence-based practice paradigm. Aligned with Pease (2009), we believe that critical knowledge-informed practice should inform evidence-based practice, and we advocate for more space for the utilization of tacit knowledge and reflexive practices that include intuition and other ways of knowing (Heron & Reason, 2005).

Building on the findings of Trevithick (2014) and Welsh and Lyons (2001) is Gambrill's (2018) research on the prevalence of "avoidable ignorance" in social work research. Gambrill (2018) posits that misconceptions about the function of science, such as science only dealing with what can be observed, impede the exploration of other ways of knowing and perpetuate positivist thinking. Gambrill asserts that some journals promote the publication of ignorant research to neutralize "dangerous" knowledge – knowledge that falls outside the lens of general science and evidence-based practice. Gambrill (2018) discusses the various kinds of "knowns" in social work research and evidence-based practice: known unknowns, unknown unknowns, and unknown knowns. For the most part, intuitive phenomena have been considered beyond the reach of science and thus categorized as a known unknown. We wanted to explore how social workers explore and utilize their "known unknown" in their professional practice.

Addressing the gap in the literature

Three gaps were identified in the existing literature. First was data that specifically captured whether positivism and/or managerialism held sway on the experiences of social workers in Aotearoa (New Zealand) workplaces. While many of the sources reviewed produced intriguing findings on the impact cultural and professional environments have on social workers, these findings were limited to Norway (Vetvik et al., 2018), the United States (Oxhandler et al., 2018; Yamada et al., 2019), the United Kingdom (Cook, 2017; Trevithick, 2014), Italy (Sicora et al., 2021), and Germany (Fleißner & Steimle, 2024). This gap was addressed by inviting social workers who practise in Aotearoa (New Zealand) to participate.

Secondly, while it was possible to find research that identified the impact inclusion/exclusion had on the professional practice of social workers (Cook, 2017; Sicora et al., 2021; Trevithick, 2014), there was no data that revealed the

impact inclusion or exclusion had on social workers' views of their practice or their well-being. Research shows that the well-being of social workers is essential for safe practice (Roulston et al., 2017). This gap was addressed by specifically exploring how participants viewed the impact of inclusion/exclusion of intuitive capabilities in their professional practice and well-being.

We also wondered how social workers practically already apply their intuition in their practice without imposing it. It was important to address ways of creating space for intuitive abilities or experiences to be integrated into social workers' practice and to envision what safe applications may look like.

Methodology

This phenomenological interpretive study utilized extended epistemology (Heron & Reason, 2008), criterion sampling, and reflexive thematic analysis.

An interpretive phenomenological study considers the researcher's prior knowledge of the subject matter and/or personal experience of the phenomena. As this was a master's study research project and both a student and a supervisor had personal experiences of the phenomena and a keen interest in exploring it further, an interpretive phenomenological approach seemed to be most suitable. Additionally, acknowledgment of an interpretive approach, which is multilayered, critically subjective, and socially constructed, was necessary. Approaching this research from a distinctly different perspective than positivism is important, given that this study is, in part, seeking to understand the influence positivism may have in professional contexts concerning the inclusion of intuition in social work practice. It also allowed us to declare our bias and belief that positivism is an outdated paradigm that needs to change in professional practice.

This study was a qualitative inquiry into participants' lived experiences of a particular phenomenon (Runco et al., 2021), and it upheld that participants were active agents in their own lived experiences, capable of knowing their agency and making meaning of their own experiences (Mischel et al., 2008). Finally, extended epistemology enabled us to see data through the lens of four ways of knowing that fall outside the positivist empirical ways of discerning what is real and true (Heron & Reason, 2008). Special focus was put on the experiential and presentational knowledge during interviews and on propositional and practical knowing during our interpretation of findings. Experiential knowing relates to the direct encounter with the phenomena and understanding it through perception, empathy, and resonance (Heron & Reason, 2008). Presentational knowing relates to the expression of experiential knowing, in which significance is revealed through different expressions (Heron & Reason, 2008). Propositional knowing, common in academia, was utilized in the way that we were clear that the "map is not the territory" and that we cannot generalize based on this small-scale research, but that we can

propose ideas based on examples of how our participants practically used intuition in their everyday work. That led us to develop practical suggestions that we hope can enhance social work practice, making it useful practical knowing – the fourth component of Heron and Reason’s extended epistemology. Criterion sampling was used, and participants were selected because they had met a predetermined set of criteria (Cohen & Crabtree, 2019). The criteria for inclusion were:

- (1) Registered social workers in Aotearoa (New Zealand)
- (2) Having lived experience of the phenomenon (intuition in social work practice).

Reflexive thematic analysis was used as it is an inductive, flexible approach to thematic analysis, allowing us to identify and respond to themes as they emerged during the immersion in the data (Crosley, 2021). Using a reflexive thematic analysis better addresses the subjective nature of both the research that has been conducted and the data that has been collected (Crosley, 2021) and proved to be appropriate for an interpretive phenomenological study.

Ethical considerations

Three main ethical considerations needed to be addressed. Early preparatory conversations confirmed that participating in this study was potentially disadvantageous to participants should their data be revealed to colleagues, members of the public, or employees due to concerns that incorporating intuitive experiences into practice with clients would be considered unethical, unprofessional, superstitious, or illegitimate by other professionals, managers, or clients. For this reason, strict confidentiality was observed by removing identifying information from transcripts, allowing participants to add or detract from transcripts, and ensuring data was kept secure.

The second ethical consideration was potential bias. Both researchers experienced intuitive phenomena and have fairly extensive knowledge of the subject matter. As such, it was reasonable to consider research bias a risk. As bias can occur at any research stage (Pannucci & Wilkins, 2011), we attempted to reflect and check on this during the whole process.

The third one was about the power dynamics between the postgraduate student and a supervisor, and the necessity for a student to do independent work with suitable support and supervision. Our common interest in the topic and ability to hold clear boundaries and adjust them as our student/teacher relationship ended enabled the transition into a collegial relationship and a joint write-up of this article.

Further, the discussion of the ethics around this research was robust. When proposing this research, we received feedback to the effect that in Aotearoa,

the professional social work environment is expected to be inclusive of Te Ao Māori.² Te Ao Māori embraces concepts of spirituality and intuitive guidance that are sometimes ascribed to the voices of ancestors. One of the colleagues questioned whether this research was merely a projection of the researchers' insecurities around trusting our intuition. This feedback was thoroughly explored in supervision, and the decision was made that our personal positioning and keen interest would strengthen the research. Although some concern around trusting our intuition with our academic minds may be the issue, we believe that a dose of healthy skepticism can contribute to the validity of this research.

Diving into the findings

A thematic analysis of the transcripts produced six key themes, with 11 sub-themes. These findings are outlined below, alongside excerpts from the transcripts. Each finding is individually followed up with a discussion of what is intriguing about the finding, what the importance and implications of the finding are, how the finding relates to the existing research and what could have been done to further explore the outlined themes.

Theme one: Enhancement of personal well-being and professional practice

Participants unanimously claimed that their professional practice improved when intuitive abilities and experiences were integrated into their practice, specifically related to client outcomes. Participant #1 stated, "As a practitioner, my practice has enhanced . . . it has been really effective." Participant #2 was particularly passionate about integration, stating that intuitive practice is:

Huge in the spaces of building relationships of trust, rapport, and engagement with clients and with work colleagues. If you don't allow yourself the sense of what a person is really about, how do you truly authentically connect with them to build relationships and networks that we need to build? We can tune into the body language; we can hear what they're saying, we can see what's going on, but if we develop intuition, how much more can we learn? If you take the risk and be brave and courageous, like Brené Brown talks about, take the armour off; real differences can be made.

Participant #3 believed their reputation grew positively when they integrated their intuition into their practice, stating:

I got a reputation for being someone who, when [I come] on, for some reason, people get calm. But it wasn't me, like, it was the fact that I acknowledged the higher power or what it was and brought that energy. That's what I think it is.

This theme relates to being authentic and developing competence that integrates theoretical knowledge of social work and professional practice, but also intuitive and visceral reactions that can when used appropriately, can enhance not only the quality of social work practice but also the well-being of both the practitioner and the client, and the development of competence and

confidence of both. It seems that it was essential for participants to balance their inner knowing and presence with information coming from the client that did not need to be merely cognitive.

Practice beyond the models

Participants spoke passionately about moving beyond models to enhance their practice, as the current models and theories do not adequately educate about the effective use of intuition.

Participant #1 and Participant #2 spoke to this eloquently. Participant #1 stated, “There’s so much that social workers can offer the people that we work with that isn’t just Te Whare Tapa Wha,³ needs assessments, risk assessments, and stuff like that.” Participant #2 built upon this concept, stating:

I see all sorts of professionals looking for something that’s out of the norm that complements the bio-psycho-social model that they can put in their kete (basket of knowledge) as a resource they can draw on that’s personal to them. I mean, intuition - is that not the person-centred model? Do we not tune into ourselves and go? What do I really need? So, I think it’s a huge enhancement. It’s an opportunity for more resources, ideas, skills, and knowledge . . . Instead of tick boxing, sitting in the usual process, we step out and discover a lot more, which gains trust (hopefully). Or engagement . . . The real, deep, authentic connection that you can’t necessarily gain quickly and easily in the normal, usual social work space.

Participants expressed their yearning for more meaningful practices and flexibility in perceiving their clients in their context and expanding common, agency-prescribed ways of working. Understanding social work theories and models of practice is important, and so is the continuous expansion of ideas, suggestions, and meanings. Transcending the mundane can help in perceiving a problem from a different perspective and envisioning pathways that may not have been apparent. Intuition may be utilized as inner knowing without conscious reasoning, and then, when we apply conscious reasoning by testing its accuracy, it may prove useful.

Impact on personal well-being

Participants described detrimental effects on their well-being at times in their careers when they felt they had to either hide or suppress their intuitive experiences and abilities. The severity of these detriments among participants ranged from a sense of emotional unease to physical and mental unwellness. Participant #1 and Participant #4 described emotional stress and discomfort at times in their careers when their intuition felt stigmatized or they felt too afraid to integrate it into their practice. Participant #1 felt that their practice was not authentic when intuition was suppressed, and even now that they integrate their

intuitive abilities, they still feel they must “downplay” their experiences, which they feel is not helpful to their well-being or practice. Participant #4 stated that not having support to integrate their intuition into their practice from their manager was stressful and frustrating, leading them to question their decision to be a social worker. They added, “As you work longer in the social work field, you realise that not all people are nice, even social workers.” Participant #3 went deeper into exploring the physical and psychological effects suppression and fear of disclosure had on them, stating, “It f***ed with my head and my spirit, my energy. At times, I was even physically unwell, I certainly had periods of depression.”

The sense of coherence is one of the essential determinants of health (Antonovsky, 1987), and having to suppress intuitive knowledge continuously may require a lot of energy and insecurity. This does not mean that every intuitive thought needs to be acted upon in the same sense as not every professional intervention will suit every client, but careful consideration of all ways of knowing (Heron & Reason, 2005) can certainly enhance our relationships with clients and their well-being.

These findings are relevant for all human helping fields of practice. Participants genuinely critiqued the models used in the profession, posing that the extension and development of these models could drastically improve and enrich the services social workers provide. These findings relate to the research of Cook (2017), who found that intuition allows social workers to reach rapid decisions with incredible accuracy before facts are revealed, and Sicora et al. (2021) reported that excluding intuition from the decision-making process in favor of explicit rationale is excluding a central part of the human brain’s capability to make sound judgment calls. Nash and Stewart (2002) stated that confident, balanced, and safe practitioners are those who understand their approach to spirituality, and this is highlighted by the participants’ reports of lack of confidence and feelings of inauthenticity when they have not integrated it into their practice. The participants’ interest in further development of practice models to allow for the integration of intuitive experiences and capabilities is echoed by Welsh and Lyons (2001), who found that the exclusion of intuition is not always appropriate in the context of mental health and that encouraging social workers to integrate intuitive knowledge would better meet client needs. Enhancement and confirmation of these findings begin to fill the gap in the research identified at the beginning, which was to explore the impact of not integrating intuition into practice on social workers who are aware of their intuitive abilities and experiences and keen to further develop them. From these findings, we can see the impact is significant, especially related to the sense of inauthenticity, questioning the profession, unwellness, and depression that participants expressed. These

findings are of significance to management, workplaces, and the profession itself.

Theme two: fear of disclosure

Participants feared disclosing their intuitive experiences and abilities to colleagues, clients, and employers. Across data, this fear varied from being a past or present fear, and in its severity. Fear of disclosure was indicated by some participants before the interview had even taken place, and by other participants very early in the interview process, and it was unprompted.

Participant #2 and Participant #3 have been social work practitioners for several years and were able to reflect on the fear they experienced around disclosure in previous years of their careers. Both participants said disclosure of intuitive abilities or experiences puts social workers at risk of their mental stability being questioned. Participant #3 stated, “People will think you’re nuts,” and that even presently, as a well-established and respected member of the profession, Participant #3 advised that practitioners “still need to be really careful about what [they] put out there.”

Participant #2 delved into this fear further, stating that disclosure “tampered with the idea that you’re unstable mentally,” and integration was out of the question as “you might end up having a disciplinary action because you were acting a bit odd, or creating conversations that are out of the norm.”

What this data shows is that fear of disclosure and consequent dire impacts on credibility and status (if their intuitive experiences were revealed) is a fear that has been long-lived and held. These findings imply that in a profession concerned with social care, well-being, and safety, there are workers within the profession who experience genuine anxiety and a true sense of danger within their everyday practice, which is highly concerning. This finding relates to Wahbeh et al. (2021), who found taboo prevents transparent discussion of noetic experiences, and Canda & Furman (2020), who found that some social workers reported a belief that incorporating spirituality into professional practice is a breach of the International Federation of Social Workers Code of Ethics (2018). The data gathered from the transcripts around fear of disclosure warrants further intentional exploration to garner a greater image of the impact and implications.

Theme three: possible causes of stigma

Each participant indicated that there was a sense of being stigmatized when they disclosed their intuitive experiences in social work practice. They identified three possible causes: environments (predominantly exclusive focus on the medical model and the management style of some superiors), individual and societal fear of the unknown, and the influence of patriarchal ideas.

Participants, to varying degrees of detail, cited the medical environment, specifically hospitals, as environments in which intuitive abilities or experiences were stigmatized. Participant #1 stated that in medical environments, “I have definitely censored myself” and felt the need to practice intuitively in a way that was “sneaky.” Participant #2 stated that intuitive practice is “pretty far out and unheard of” in medical environments. Participant #3 stated that when they worked in a hospital, “there was no room at all” for intuitive practice. This is interesting as most child or drug abuse cases are discovered following the intuition of the practitioner, who then researches and finds data that either supports or disproves that hunch.

To varying degrees of detail, all participants cited management styles as a crux upon which intuitive abilities would either be accepted or stigmatized. Participant #1 specifically cited management in the government department they had worked in as the most stigmatizing environment they had encountered as far as openness to intuitive abilities went. Participant #3 shared the observation that a lot of management styles they experienced would “pathologise” intuitive experiences.

Participants agreed that lack of understanding leads to fear and that the fear of the unknown is behind their perceived stigma toward intuitive experiences and abilities in the social work setting. Participant #2 put it simply, “People are scared of the unknown.” Participant #1 stated, “That’s the element of fear . . . There’s no logical explanation or science-based explanation.” Participant #3 explored this idea further, saying:

People who don’t have the experience can’t get it . . . There’s a huge amount of ignorance . . . if you’ve never felt a spirit in a room, then you’ve got nothing to relate to it. You’ve got no context within which to ground that idea.

Participant #4 built on the ideas of Participant #3 and pointed to a lack of adequate research, stating, “As individuals of modern society, we like to label things to understand . . . otherwise we say if it doesn’t have a label, it’s not true.”

Participants, to varying degrees of detail, cited the influence of patriarchy on Aotearoa New Zealand society as causing the stigma surrounding intuitive experiences and practice. Most participants pointed to misogyny as a potential cause and discussed how anti-witch sentiment may still have a grip on the acceptance of intuition in society generally, let alone as a tool to be utilized in professional practice. The Tohunga Suppression Act in Aotearoa (New Zealand) criminalized the use of traditional Māori healing, which relied on intuitive knowing, spirituality, and a sense of Indigenous wisdom. Participant #2 spoke to this shared observation well, stating, “The whole witch thing, it hasn’t helped us . . . You speak your truth; you end up being burned at the stake.” Participants #2 and #3 also spoke to a perceived dominance of intuition

amongst women and indicated sexism as being an underlying issue. Participant #2 imparted the belief that a fear of women getting stronger sits beneath the stigma:

Because I think [women are] probably more intuitive than men. [Women are] more willing to be open today, and [women] might take more power back . . . Let's be really honest. We've got a society in New Zealand that has predominantly older, white males still running board meetings and boardrooms and making big decisions at higher levels.

Participant #3 supported this in their statement, saying, “There is something about the essence of the female makeup that makes [women] more susceptible to [intuitive abilities].”

The multitude of causes participants pointed to that were largely ideological and systemic is intriguing. The implication of this is that much deeper, larger-scale work would need to be done to address the stigma if organizations desired to provide safer working environments for social workers who experience the need to integrate intuitive knowledge in their practice. These findings support the work of Fox (2021), who found that Māori social workers find it difficult to integrate spirituality into everyday practice due to systemic issues, and Trevithick (2014), who found that managerialism prevents social workers from upholding or recognizing the central role of emotional and intuitive reasoning in social work practitioners. Welsh and Lyons (2001) also point to positivism in workplaces as the cause of negative impacts on practitioners' capabilities during clinical assessment. Pease's (2009) work theorizes that the best practice model for social workers encompasses tacit elements that do not currently fit within the evidence-based practice paradigm. As with the first finding around fear of disclosure, participants had so much to contribute to this area that allowing for a wider scope of study or focusing on this question specifically may allow for deeper exploration, particularly as to how organizations may begin approaching stigmatization and fear of being authentic and applying intuitive knowing professionally.

Theme four: modes of integration

The modes of integration varied between participants, each with a distinctly unique process. Participant #1 uses different “modalities,” sharing “they're often referred to as the hippie stuff . . . The main one is Reiki. And then I also do EFT and Hypnotherapy.” Participant #2 uses different modalities as well, stating:

I use [intuition] every day, all day. I do provide Mirimiri⁴ and Reiki with clients as well. So, I do holistic energy support as well. I tune very much into my clair-sense. So, I have a knowing about what's going on for a person, and generally, I'm right . . .

I'm following my gut, my intuition, my learning, trusting that I am supported by the universe, supported by a higher power. God, whatever I want to call it, my tūpuna [ancestors] are often at my shoulder, pushing me, screaming at me. I'm trusting them, I'm putting that forward and knowing that the information will be received the right way, and also tuning into the gut [to check] if it's not appropriate to say this to the client.

Participant #3 experiences their intuition in several ways, sharing one of the approaches they use:

I don't go to people and say, I'm doing this because I've got a spiritual feeling that I should do this, or my intuition is telling me to do this. Sometimes you can say, look, I've got a gut feeling, and people kind of respond to a gut feeling and, well, maybe we do that . . . I've accepted it, so while I don't go out and profess that, make a big noise about it . . . I do follow it in my own quiet way.

Participant #4 described their practical application, stating:

I tried to achieve the right balance, incorporating my organization's procedures, following everything, as well as my own intuition. And also considering and being mindful of social work values . . . There would be times when you should follow work processes, and sometimes it's very rigid. So, I would find a grey area where I can achieve both of what's expected from me at work and also apply my intuition . . . You just have to trust your gut, but also keep yourself safe by not breaking any work, social work, or ethical rules.

Discerning caseload

Participants shared that their intuitive experiences and abilities have been used to discern their caseload and social work practices, mostly in cases where they have felt it would be unwise for management to assign them to particular clients.

Participant #1 put simply, "I do believe not one size fits all. My approach isn't going to be for everyone." Participant #3 expanded upon this concept of caseload discernment, stating:

There have been clients where I've put my hand up and said, right, I'll take that on because I've had an intuitive feeling that this could be something that would be good. The connection between me and this person . . . And then there's been others where I've gone, actually, no, I don't really want to work with that person. Because whatever it is, I just don't feel that my energy and my vibration are going to work with them. I'm not allowed to say that out loud, of course. I would just say, "Look, no, my caseload's full, I can't take anyone on at the moment," but it does definitely drive my decision-making at that level.

These findings are intriguing as they illustrate the idiosyncratic application of each participant's intuition in their practice. An important observation is that participants use their intuition with clients to a significant extent, while still feeling compelled to keep it concealed from their employers. It also begins to address a gap in the literature concerned with precisely how

social workers self-report the application of the integration of their intuition. If organizations want to explore creating space for intuitive practice, it is essential to first understand how some social workers are already effectively and ethically applying their intuitive abilities. This research only identified 6 of the 12 Noetic Signature factors, these being inner knowing, visualizing to affect, inner knowing through touch, healing, knowing through dreams, and apparent communication with nonphysical beings (Wahbeh et al., 2022). Applications and experiences may likely vary a great deal further than what was ascertained in this study, and thus, further research would generate a greater understanding of this phenomenon.

Theme five: dealing with prejudices in professional environments

Participants were asked directly how they differentiated between their intuition and potential biases. Answers to this question were unanimous; they claimed to take personal accountability for their biases, trauma, and preconceived ideas. The ease with which they described this appeared to come with the length of their work experience. Importantly, they claimed to always balance intuition with evidence.

Personal accountability

Participant #1 described the personal accountability they took when managing their biases as fear-driven, stating, “I am pretty over the top mindful of it . . . because I don’t want to push what I believe onto others.” Participant #4 shared a similar sentiment, stating:

I guess if my biases come into play, I try to gauge that and be mindful of my own biases . . . For me, as long as you have good intentions, good purpose, not breaking any laws, as long as it’s ethical - do it, yeah, follow your intuition . . . I think everyone has biases, and you just have to be mindful and aware of them. Then, you practice safely.

Participant #2 had a slightly different view on personal accountability, stating, “The only way to have the knowledge of [biases] is to do the work, to heal, and then tune into the intuition.”

Balancing intuition and evidence

All participants confirmed that whenever integrating intuition into their practice, they held their intuitive insight up against evidence and evidence-based practice. They used it tentatively and in collaboration with clients. The transcripts showed that this was important for participants, both for personal and professional safety and for client safety.

Participant #1 stated, “I think being registered and coming back to the competencies and the stuff that we have to adhere to” was integral to the ethical integration of intuition. Participant #3 stated, “If I were in a position where it was a life-or-death situation, I wouldn’t just go on my gut; I would want to see some other factual backup evidence.” Participant #4 elaborated further on this, saying:

You take into account a lot of things, such as the tone of [a client’s] voice, their body language. Also, I guess, the history in their records . . . You just take into account all these things, as well as concrete evidence, specific incidents that happened to the clients, and you put them all together. Intuition is innate, and as long as your purpose is positive and good, you should use it in conjunction with evidence, theories, and practices, I guess.

The concern that bias may be mistaken for intuition has already been studied (Cook, 2017; Sicora et al., 2021; Welsh & Lyons, 2001). Similar to Carew’s (1987) findings, this risk should not be mitigated by excluding intuition, but by following a clear process upon the reception of intuitive knowledge we observe, form a hypothesis, verify, and take action.

Participants in our research have taken the steps recommended above, and this is reassuring to all who may be concerned about bias enactment through the guise of intuitive practice.

Theme six: hope

Participants indicated two areas in which they have hope that the way intuitive practice is perceived is changing: Kaupapa Māori environments, and a desire for open-mindedness in work environments.

Across the data, Kaupapa Māori environments were cited as one area in which social workers encounter some flexibility in mind-set about intuitive practice. Participant #2 had experience working in Kaupapa Māori environments and shared:

In Kaupapa Māori agencies there are elements that are incorporated, not the Reiki and Mirimiri as such . . . In my experience . . . [intuition] wouldn’t be spoken about, I wouldn’t think, or acknowledged and would be considered inappropriate . . . I think that would differ in Kaupapa Māori organisations.

Participant #3 echoed this when discussing the time in their career when Māori and Pasifika services started to emerge, stating, “They did us a great favour because they brought prayer, karakia,⁵ into the tikanga⁶ of what we did, and suddenly, it became a conversation you were allowed to have.”

Desire for open-mindedness

Participants were unanimous in their desire for open-mindedness in the social work profession toward intuitive practice. Participant #1 expressed their hope that the profession would soon adopt “an openness to do what works for people that we work with.” They went further to say, “In terms of social work practice, we take people’s views into account and their beliefs and their backgrounds, all those kinds of things. Why can’t intuition be part of that?” Participant #2 was similarly minded, stating:

I think we, as a profession, should be using those extra senses for those safety aspects as well. Nowadays, you know, we might visit homes with two people, we might have safety bracelets, we might, uh, have people that are going to check up on us and know that we should come back from the appointment, or we just don’t go into homes anymore. But if we were developing intuition and really developing our energy and vibration, things might be different.

What these findings show is that participants quite clearly and articulately describe their desire for a different social work landscape, and they hope a shift may come. It is intriguing to examine these perspectives to better understand how this small group of practising social workers currently views their own professional cultures. Further exploration of this area of subject matter would be useful to explore where shifts in the profession may be taking root. What is intriguing about participants citing Kaupapa Māori environments as being the location where they recognize shifts occurring. This supports the findings of Phillips (2016), who found that in such environments, social work students report positive experiences of spiritually integrated practice. Additionally, the ANZASW Code of Ethics (2019) expects this sort of space to be held under the ethical principle of “wairuatanga,” so the participants’ hopes are not without foundation.

Instead of a conclusion – new openings

This research cannot be generalized to broader populations due to the small sample, subjectivity, and uniqueness of experiences brought to the interviews. As such, it is reasonable to state that the findings of this research may only be true for the participants who were interviewed in the process. It would be wise to also caution against any assumptions of causality. The cause-and-effect relationships participants discussed, and which are reflected in the findings, cannot be assumed to be absolute or accurate, as this was not a study concerned with identifying linear cause and effect.

However, this research has identified several areas that require further exploration. Predominantly, the existing gaps in understanding the impact of excluding intuition from the professional practice of social workers, and how social workers integrate intuition into their professional practice. This

research has begun an exploration of these gaps, uncovering that exclusion of intuition imposes significant emotional, mental, and physical impact on social workers' well-being, and additionally revealing how the social workers integrate their intuitive abilities and experiences into their practice. This research is small in scope, and it was beyond its capacity to further explore these gaps, particularly the gap of intuitive application. Participants shared that some of them used their intuition through holistic modalities and to discern caseload, however, of the Noetic Signature Inventory (Wahbeh et al., 2022), only 6 of the 12 identified factors were reflected in participants' interviews, indicating there may exist a much greater range of applications yet to be explored in the social work context.

This research introduced, through the participants' voices, areas that may need improvement:

- (1) Further exploration of the ideological and systemic roots of stigma toward intuitive practice within the professional setting.
- (2) A critical reflection of solely evidence-based theories, models, and practice.
- (3) Raising awareness of the damage of managerialism, positivism, patriarchy, and the fear of the unknown
- (4) A call for a greater systemic and ideological shift is required within organizations and the profession to create a safer, more inclusive working environment.
- (5) The necessity of including intuitive abilities in social work practice, in keeping with several social work models (particularly Indigenous social work models) that would lead to a greater enhancement of professional social work practice.
- (6) The serious psychological impact of stigmatization and the rigidity of some social work environments preventing social workers from practicing authentically and coherently.
- (7) Including discussions on intuitive ways of knowing in social work education and in professional development courses, as well as familiarizing students with safe use of intuition in professional practice.

Finally, this research found that the social workers interviewed expressed a deep desire and hope for expansion and growth within the profession when it comes to integrating and embracing tacit knowledge and intuitive experiences. Kaupapa Māori environments were highlighted by participants as a space in which acceptance of this subject area was appreciated and growing, and this gave participants hope that this growth would spread into non-Māori environments.

Following this research, several recommendations emerged for social work management and organizations, as well as for research. For

organizations looking to better accommodate diverse intuitive experiences and embrace the intuitive abilities of social work practitioners, exploration of what may be contributing to individual social workers' internalized stigma would be recommended, specifically, where the societal influence of patriarchy and fear of the unknown may be entering the professional environment. A review of management culture is also recommended, and a query into whether environments are overly positivist or managerial, and whether this may be leaving employees feeling stigmatized. This research calls for more education in the form of professional development courses related to the safe inclusion of intuitive ways of knowing, as well as an exploration of intuitive experiences in professional supervision and lifelong learning of social work practitioners.

Notes

1. Māori customs, beliefs, and principles that guide practice and wellbeing.
2. Māori worldview which includes a deep respect for nature and a holistic understanding of the interconnectedness between humans and the environment, visible and invisible, material and ethereal.
3. Te Whare Tapa Wha is an Indigenous, holistic Māori model of human health and wellbeing most commonly used in Aotearoa (New Zealand) proposed by Sir Mason Durie, professor of Māori studies and a research academic.
4. Mirimiri means natural gift and it is the traditional holistic healing method of the Māori, the indigenous people of Aotearoa (New Zealand). It is steeped in Māori customs and culture, encompassing whanau ora (family health), tinana ora (physical health), hinen-garo ora (mental health) and wairua ora (spiritual health). Mirimiri is used for healing the physical and spiritual elements of a person's life which is in contrast to Western massage techniques primarily focused on physical health (Natural Therapy Pages, 2024).
5. Karakia is Māori incantation similar but not the same as a prayer used. In Aotearoa (New Zealand) it is commonly used to invoke spiritual guidance, protection, enhance the spiritual goodwill of the occasion as well as the likelihood of a favorable outcome. Different karakia are recited as openings and as closings of the meeting followed by an appropriate waiata (song).
6. There is no direct translation for the term Tikanga, but it refers to societal lore within Māori culture, how things are done and have been done for generations, rooted in knowledge and common sense. It is based on experience and serves the purpose of viable coexistence within a group or society.

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