



Moral Case Deliberation in Dutch Prisons: Experienced Outcomes and the Moral Learning of Prison Staff

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Abstract

We present a study about an ethics support instrument, Moral Case Deliberation (MCD), which is used to support and further professionalize Dutch prison staff. MCD can facilitate prison staff in dealing with moral dilemmas from practice. We present an embedded mixed-methods study on the experienced outcomes of 16 teams participating in both *single* and in *series* of MCD sessions. Prison staff and MCD facilitators completed evaluation forms ($n=871$ by staff, and $n=122$ by facilitators) after participating in a single MCD session ($n=131$). Staff filled out another evaluation form ($n=149$) after participating in a series of 10 MCD sessions. Our multilevel quantitative analyses show overall positive outcomes, with significant differences between professional disciplines. Prison staff, e.g., reported a better understanding of the discussed moral dilemma and the related perspectives of colleagues. The qualitative thematic content analysis of the experienced outcomes of single MCD sessions resulted in 8 outcome categories, e.g., improved moral awareness, awareness of responsibilities and limitations in decision-making, and feeling empowered to address issues. The experienced outcomes of MCD provide some insights in the process of fostering moral learning of prison staff; staff gained moral awareness, and improved their perspective-taking and the ability to better control their frustrations and emotions. Further research should focus on studying the impact of MCD on moral decision-making in the day-to-day practice of prison staff and on what the organization can learn from the MCD sessions.

Keywords Prison staff · Ethics · Moral learning · Outcomes · Good performance · Mixed methods

Introduction

Prison work can lead to high levels of job stress (Finney et al., 2013), based on the volatile environment and the value conflicts prison staff experience in their practice (Liebling et al., 2011, pp. 63–64). Value conflicts arise, i.e., when the two central objectives of prison

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work, “security and rehabilitation,” are pursued at the same time, or when personal values conflict with the requested policies. It is indeed known that the context of working in prison can lead to many challenging situations (Schmallegger & Smykla, 2014; Van Dijk et al., 2023); often these are situations with moral components (White et al., 2014). Morally challenging situations e.g. involve dilemmas around how to handle suspicions of integrity breaches by colleagues, or whether or not to deviate from protocols when deviating seems to be in the best interest of the situation of the prisoner, or sometimes based on the hierarchy within the prison system, staff may doubt to carry out an assignment given by their superior, when they do not think it would be the proper act (Schaap et al., 2022).

For good performance, correctional institutions rely heavily on their staff (Lambert et al., 2005). The Dutch Custodial Institutions Agency (DCIA) wanted its prison staff to be more aware of and able to constructively reflect upon moral dilemmas in their practice (DCIA, 2016), and wanted to train them in this, to support them in the complex environment they are working in. Moral dilemmas, a specific category of moral challenges, occur when conflicting values raise doubts regarding the right action (Maclagan, 2003). One report stated Dutch prison staff need support in developing their ability to recognize moral dilemmas and to be trained to avoid acting on improper intuitions (Van Houwelingen et al., 2015, p. 41). It advised DCIA to implement a specific instrument for moral learning: Moral Case Deliberation (MCD) (Van Houwelingen et al., 2015, pp. 62–63). From 2017 onwards, DCIA offered MCD in their training program to further professionalize staff.

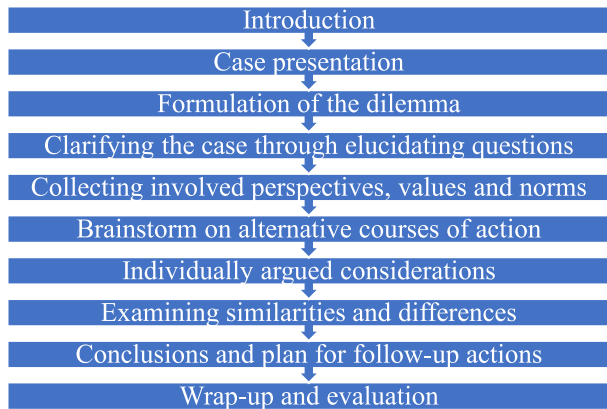
In this article, we aim to provide insights into prison staff’s and MCD facilitators’ experienced outcomes of the implemented MCD sessions at DCIA: what are the experiences of prison staff in MCD and what do they learn from the sessions? Looking at the outcomes, what kind of moral learning process does MCD fosters? For the first time, MCD was implemented and researched in the context of prisons. Other related articles of our study analyze more in-depth the evaluation of the MCD sessions and the impact of MCD to the moral craftsmanship of prison staff. Current existing literature on MCD and its outcomes is mainly based on healthcare professionals. In general, the ethics of prison work is an understudied field in empirical research (White et al., 2014). More specifically, there is a lack of research on how to support prison staff in dealing with moral challenges. By analyzing self-reported outcomes, we give a voice to staff in the assessment of the value of MCD for prison work.

Before presenting our “Methods” and “Results,” we will first provide an introduction on the concept of MCD and moral learning. Then we present data on the experienced outcomes of participating in single and series of MCD sessions. In the “Discussion,” we will reflect on whether the reported MCD outcomes show a moral learning process of prison staff, and address related implications for the ethics support of prison staff.

Moral Case Deliberation

MCD is an instrument that fosters joint moral reflections in a stepwise approach (Fig. 1 and Appendix 2) by means of a dialogue (Molewijk et al., 2008; Weidema et al., 2013). The approach of MCD is embedded in the philosophy of pragmatic hermeneutics, which is based on the idea that experiences are an important source for learning, and that making moral judgments requires a full understanding of a situation and its context and specific circumstances (Inguaggiato et al., 2019a, 2019b; Widdershoven & Molewijk, 2010). The focus on personal experiences, instead of making use of hypothetical cases and abstract

Fig. 1 The steps of the Dilemma Method for Moral Case Deliberation



moral concepts, is expressed in the fact MCD participants always reflect on a personal experienced case—meaning, from their own practice—in which they experienced a moral doubt or disagreement. Pragmatic hermeneutics also focuses on the joint investigation of why participants conceive something as moral or as a moral challenge within a concrete situation. In other words, it is not beforehand determined by external criteria what a moral challenge or moral dilemma is, and cases during MCD are never initiated or told by facilitators but are always part of the own practices of the participants. During MCD, trained facilitators (Stolper et al., 2015) use a conversation method to enable a joint moral learning process in which knowledge is co-created by all involved in the case (Inguaggiato et al., 2019a, 2019b). There are several conversation methods for MCD; in this study, we used the Dilemma Method (Fig. 1 and Appendix 2, Stolper et al., 2016). This method with its structured approach focuses on the reflection of moral dilemmas and our hypothesis was that it would fit the mentioned aim of DCIA to start with MCD and would fit to the practice of prison staff and the moral issues they encounter. Moral dilemmas are situations that “always consist of two options that mutually exclude one another and where each action has negative consequences.” In such cases, “formulating explicitly the negative consequences makes clear what is at stake for the case presenter” (Stolper et al., 2016). Within MCD, professionals learn to recognize and deal with such situations, which may lead to new courses of action (Metselaar et al., 2015). Studies of MCD in healthcare report positive results regarding the collaborative learning processes and improved team cooperation (De Snoo-Trimp et al., 2020; Weidema et al., 2013) indicating e.g. MCD participants’ increased awareness and understanding of perspectives on the discussed case (Haan et al., 2018; Hem et al., 2015). However, such outcomes do not provide information about the potential moral learning during MCD.

Moral Learning

There is a long tradition and ongoing debate about how to understand moral learning, how it evolves, and how it can be stimulated. For example, some experts position the start of moral development in the exploration of standards of right and wrong (Gibbs, 2014; Kohlberg, 1976; Piaget, 1965; Rest, 1979). Moral learning processes show “transformations that occur in a person’s form or structure of thought” (Kohlberg & Herish, 1977, p.

54). Transformations occur because the “rules of moral reasoning [...] are reinterpreted and contextualized because of the moral complexities of adult life” (Brookfield, 1998). Additionally, Gilligan (1982) emphasizes that relational aspects and caring for others influence moral judgements, e.g., when determining how decisions will affect others. Brookfield (1998) mentions that moral learning can also be considered becoming “critically reflective,” e.g., through awareness of the contextuality of reasoning, learning about moral limitations, and being self-reflective on one’s reasoning. Hence, there is no consensus on what the moral learning of professionals entails (Brookfield, 1998; Railton, 2017).

Based on the pragmatic hermeneutic approach on ethics and ethics support (Widdershoven & Molewijk, 2010), we consider the following aspects relevant for moral learning: (1) Making good moral judgments requires a profound understanding of the contextuality of morally challenging situations. (2) Understanding in general, and more specifically in moral learning, emerges from joint moral inquiry into each other’s experiences and “meaning giving processes” in concrete situations (Inguaggiato et al., 2019a, 2019b; Widdershoven & Molewijk, 2010). (3) To create meaningful insights for practice, moral reflections should therefore pay attention to concrete ethical problems, which can lead to new ethical knowledge during an antidogmatic joint moral inquiry (Inguaggiato et al., 2019a, 2019b). As Paterson (1979, p. 128) states, we assume the moral learning of adults entails the “extending and deepening of the understanding of the subject-matter of our moral choices [...] and sharpening awareness of [...] the values and validities [...] which supply the content of our moral judgments.” A realistic view of responsibilities is an important element, as this helps define the scope and limits of one’s moral agency (Brookfield, 1998; Walker, 2007). The “practices of responsibilities”—an understanding of which responsibility belongs to whom—are essential (Walker, 2007, p. 17). Hence, since the understanding of ethics is always socially situated, moral learning needs a collaborative learning process (Walker, 2007, p. 94) and concerns relational aspects of all involved in the situation (Gilligan, 1982). Based on our pragmatic hermeneutic viewpoint on ethics, ethics support, and moral learning for professionals, we wondered in which way MCD can foster elements of moral learning for prison staff.

Methods

Study Design

In this study, we investigate the experienced outcomes for prison staff of *single* MCD sessions and following a *series* of sessions, as reported by both *participants* and *MCD facilitators*. We additionally reflect on whether our results show if and how MCD fosters a moral learning process of prison staff. We followed 16 teams of prison staff participating in MCD sessions at three Dutch prisons between fall 2017 and spring 2020. Data collection ran until September 2020. We collaborated with the DCIA Educational Institute—responsible for the implementation of educational programs—to select locations that did not yet offer MCD or similar reflection methods to their staff and were willing to introduce MCD. This information was based on data provided by the DCIA Educational Institute, whom offered and had an overview on all trainings provided to all Dutch prison locations and had conversations with prison managements to find out about their training needs. Together with a local coordinator per prison, we selected teams representing all professional disciplines (see Table 1). MCD sessions lasted 120–180 min, and 18 trained facilitators were involved. The facilitators were deployed by the

Table 1 Professional disciplines of involved participants and their abbreviations

-Security guards	SG
-Correctional officers	CO
-Correctionals officers for repeat offenders	OR
-Labor instructors	LI
-Healthcare professionals	HP
-Case-managers reintegration services	CR
-Backoffice reintegration services	BR
-Middle management	MM
-Management team	MT

DCIA Educational Institute and were all certified facilitators of MCD. To assure consistency in the process and methodical approach of MCD, all facilitators additionally followed—prior to the start of the research—a short training program of the Department of Ethics, Law and Humanities of the Amsterdam UMC (Stolper et al., 2015). During the series, multiple peer meetings for the MCD facilitators were organized to discuss and improve issues they faced. At the start of each MCD session, confidentiality about the discussed content was agreed upon, as part of a precondition and to stimulate a safe and open space for dialogue (Abma et al., 2009). With regard to a safe space for an open dialogue—and based on experiences during a short pilot with MCD in one prison location—the involved local coordinators, the Educational Institute, and researchers decided that team managers joined MCD sessions only at the request of the team.

Inspired by Responsive Evaluation approaches in research (Abma et al., 2009), creating shared ownership during the implementation of MCD was an important focus. We—researchers together with the DCIA Educational Institute—therefore formed a Steering Committee at each location, consisting of participants from the teams, local management, a coordinator from the Educational Institute, and two researchers. The aim was to facilitate and monitor the research and implementation process of MCD together with all stakeholders involved.

To measure the experienced outcomes of MCD and to increase understanding of both the qualitative and quantitative data, we used an embedded mixed-methods design (Creswell, 2014, p. 44). We regulated some conditions for MCD, i.e., (1) set locations with team-based MCD sessions, (2) having a fixed set of facilitators for each of the participating teams, (3) using only one type of MCD conversation method for all sessions, i.e., the Dilemma Method (Fig. 1 and Appendix 2, Stolper et al., 2016), and (4) a 12–18-month timeframe for all teams to conduct 10 MCD sessions. This helped to create consistency in the organization and process of MCD, and prevented changing session circumstances from influencing our analyses of outcomes too much. This study is part of a broader research project regarding the development of the questionnaires on the evaluation and impact of MCD; more evaluation results are presented in other articles. We used three self-developed questionnaires, of which only the items and answers with a specific focus on experienced outcomes are used in this study.

Data Collection

A single MCD session-evaluation form was filled out immediately after each MCD session. There was one version for participants (for this study we used the answers to three closed and three open items), and one for facilitators (of which we used answers to one closed and one open item). We added facilitators' evaluation forms; they could act as informants,

based on their expertise on ethics and MCD, and they might add different perspectives to the evaluations and experiences of the participants in MCD. In the participant version, two items inquired whether the MCD provided more insight into the discussed moral dilemma and the views and opinions of their direct colleagues. Items were scored on a 5-point Likert scale or rated an overall score between 1 and 10. We asked participants to formulate as concretely as possible any personal considered result of the MCD session and whether they could translate the insights into practice. The facilitators' questionnaire asked the facilitators, *How did participants perceive the Moral Case Deliberation? What did it bring them? What did they say about this themselves?* Finally, the survey after the MCD series was only for the participants and was administered per team in the weeks after the conclusion of the series of 10 MCD sessions. From this questionnaire, we used the responses to (1) one closed item, *How satisfied are you with the actions taken following the MCD sessions?*, and (2) an open-ended item asking the participants to formulate reasons for the earlier scored satisfaction level of MCD (with the answer options of positive, neutral, or negative). Other items of the survey after the MCD series are used in a study about MCD evaluations (forthcoming), or on the article on the impact of MCD specifically on "moral craftsmanship" (Huysentruyt et al., 2023).

Data Selection

Of the initial 17 participating teams, we included 16 teams: one team stopped because they preferred more general team meetings above MCD sessions. Therefore, we excluded the data of 4 of the 148 single MCD sessions. Furthermore, in 2018, the Ministry of Justice and Security announced the closing down of one of the participating prisons. We excluded data from 3 MCD sessions after the announcement was made, as those sessions were dominated by frustrations related to the closing down instead of focusing on reflecting on a moral dilemma. Furthermore, we excluded MCD sessions that showed to use another conversation method other than the Dilemma Method ($n = 10$).

Data Analyses

For a broad understanding of the outcomes of MCD, we first performed quantitative analyses of closed items from the evaluation forms. All quantitative analyses were conducted using Statistical Package for Social Sciences (SPSS), version 26. For the mean scores of participants per single MCD, we ran a multilevel analysis in which we made corrections for (a) multiple participants evaluating the same MCD session, (b) multiple sessions of the same team, and (c) multiple teams that were part of the same professional discipline. The quantitative analyses of the survey after the series consisted of frequency descriptions, with bar charts to show percentages. In addition, we used ANOVA tests with crosstabs in which items were plotted against participants' discipline to determine whether differences in outcomes were experienced based on the different prison staff disciplines.

To gain in-depth knowledge about the outcomes, we used an embedded mixed method; we added qualitative analyses conducted using MAXQDA® software, version 2020. Via an inductive process, the open-ended items from the participant and the facilitator versions of the single MCD evaluation forms received open codes separately (Ryan & Bernard, 2003). We constantly compared indicators, codes, and researchers' interpretations (Green & Thorogood, 2014). The coding was independently performed by at least two researchers, who eventually reached consensus on the final codes. In case of disagreement or doubt,

we consulted a third researcher. We categorized all participants' outcomes using thematic content analysis, which "summarizes the variation and regularities in the data" (Green & Thorogood, 2013). We made a categorization map using MindMeister. After several rounds, all researchers agreed on the final version. Finally, we compared the results with the qualitative answers of the outcomes reported by MCD facilitators, to determine similarities and differences. Our qualitative analysis of the item *Please formulate reasons for your satisfaction judgment about this MCD* from the survey after the series resulted in two groups of answers (positive and negative). The two subdivided lists of reasons—for positive and negative experiences—were also open coded in MAXQDA®.

Results

From the included 131 MCD sessions in 16 teams, we received and analyzed 871 single MCD evaluation forms of participants. Six participant forms were missing, and 85 of these 871 returned questionnaires of participants (91%) had no information in any open-ended items. As regards the single MCD evaluation forms of the 18 facilitators, we received and analyzed 122 forms from the 131 MCD sessions (93%). Furthermore, the closed item from the survey after the series was answered by 149 of the 167 respondents of MCD participants (89%); their descriptive data are included in Appendix 1. The one open-ended (satisfaction) item about participants' general experience with MCD was answered by 143 of the 167 respondents (86%).

First, we will present the overall outcomes of MCD sessions as experienced by prison staff. Secondly, we present quantitative results after the series, concerning the satisfaction of participants about the translations of the outcomes of MCD to their practice. Next, we show the differences in experienced outcomes among the professional disciplines of prison staff. Then, we present a categorization of participants' reported outcomes to gain in-depth insights into what prison staff learned via MCD, and last, we show the differences and similarities on the reported outcomes of staff by the MCD facilitators.

Overall Outcomes of MCD for Prison Staff

After *single* MCD sessions, participants rated the three items in Table 2. The item referring to overall outcome (results or insights) of MCD for their practice was rated 7.4 out of 10. In the other two items, participants rated whether the session led to more insight into the case and to a better understanding of their colleagues; both scored 3.9 out of 5.

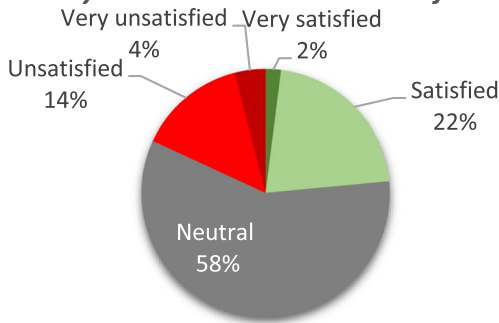
After the MCD *series*, we presented one item to participants about their satisfaction with integrating insights to practice. Figure 2 shows that most participants (58.4%) responded in the answer-category of "neutral," whereas 22% are satisfied and 14% unsatisfied.

After the MCD *series*, prison staff who responded positively on the satisfaction item about their MCD participation mentioned in the related open item how it made them "talk differently than in daily practice." They state that topics were discussed and analyzed more profoundly than they were accustomed to. Prison staff reported that MCD creates more awareness of one's actions and a better understanding of colleagues, "i.e., it provides better insight into their motives." Other participants reported an overall negative experience and mentioned in the related open item that they saw no added value to MCD. They mentioned, "e.g., that their team functions well or that they already have constructive talks about dilemmas during team meetings." Others said the

Table 2 Scores per single MCD, by participants, on a 5- or 10-point scale

	Mean by MCD-participants	Valid/missing N=
How do you rate this conversation's outcome (results or insights) for your own work?	7.4/10	851/20
The session led to a better understanding of the case	3.9 /5	851/20
The session led to a better understanding of my colleagues	3.9 /5	852/19

How satisfied are you with the actions taken following MCD sessions?

**Fig. 2** Score of one closed item, after the MCD series

sessions “lacked true impact on practice.” An explanation, mentioned by several participants, was a “lack of positive changes being made by others after the MCD series.”

Quantitative Outcomes per Professional Discipline

We analyzed all quantitative items, differentiated per professional discipline (see Table 1). The data per *single* MCD shows a statistically significant ($p \leq 0.05$) trend, in which the following disciplines score differently than the averages as seen before in Table 2 on all items: (1) the lowest scoring disciplines, although still with positive scores, are security guards (SG) and case managers of the reintegration services (CR); and (2), the disciplines with the most positive scores are correctional officers (CO), healthcare professionals (HP), middle management (MM), and management teams (MT). Additionally, Table 3 shows average scores per professional discipline for the item *How do you rate this conversations' outcomes (results or insights) for the work practice?* This is the only item that generated additional data from facilitators. MCD facilitators score the impact on practice differently than participants, with a lower score by MCD facilitators for security guards (SG) and higher scores for managerial positions (MM, MT). The data on the impact on practice (Fig. 2) show that most scores are in the answer category “neutral”; hence, we do not see many differences based on professional disciplines.

Table 3 Averages scores on one item, single MCD sessions, per professional discipline

Professional discipline	How do you rate the outcome (results or insights) of this conversation for your own work / for the work practice?	
	As experienced by MCD participants means / <i>p</i> -value	As viewed by MCD facilitators means / <i>p</i> -value
CR	6.6 / 0.000 ¹	7.0 / 0.000 ¹
SG	6.8 / 0.583	5.7 / 0.004
BR	7.3 / 0.076	7.3 / 0.527
LI	7.4 / 0.057	7.5 / 0.225
OR	7.5 / 0.028	7.1 / 0.718
CO	7.6 / 0.005	7.4 / 0.316
HP	7.7 / 0.003	7.7 / 0.053
MT	7.7 / 0.002	8.0 / 0.004
MM	7.7 / 0.002	8.2 / 0.002

¹During the multilevel analysis, the discipline of case-managers reintegration services was chosen as the reference group because this group had the highest number of participants

Fig. 3 Overview of outcomes after single MCD sessions experienced by participants

1. Scope of influence
2. Case-related actions
3. Communication and dialogue
4. Mutual understanding and team spirit
5. Self-development and empowerment
6. Moral awareness
7. Significance of MCD
8. Lack of (relevant) outcomes

Categorized Qualitative Outcomes of MCD by Prison Staff

Based on the analysis of prison staff answers to two open-ended items after *single* MCD sessions (*Did this MCD session bring you anything?* and *What do you take from this MCD session to your workplace?*), we constructed a categorization of experienced outcomes (Fig. 3).

In the first category *Scope of Influence*, participants mentioned increased insight into their responsibilities and limitations. They related their feeling of a lack of influence—to be able to make changes in practice—to their marginal (hierarchical) position. One participant mentioned that “the complexity of the dilemma is beyond the level of responsibility of my position.” Other related quotes include “Often the solutions lie outside our scope of influence” and “I can’t change much myself, it has to come from my superiors.” Furthermore, insights were mentioned related to a feeling of restricted by existing rules and procedures; MCD made them more aware of this, which generated two types of reactions. First, participants showed a deeper understanding of their attitude towards the meaning and use

of guidelines and protocols. For example, they stated that protocols should not always prevail; a more tailored approach and attention to the situation of prisoners is often required. The second type of reaction shows participants sharing and scaling up their experienced dilemma earlier in the process, also to the appropriate level in the organization.

In the second category *Case-related Actions*, participants indicate an increased clarity. Most frequently mentioned are new insights from MCD for their practice, with agreed-upon plans about who takes action on what. Often participants expressed that “we now know how to achieve and implement improvements or changes,” or “I can proceed in a more nuanced way.” Participants report increased awareness about the need to take responsibility in creating improvements. Furthermore, case-related insights help staff in future situations, or as one participant said “I will think of these offered solutions in similar situations in the future.” Sometimes staff mentioned the agreement that the case needs further exploration after MCD, or further discussion in regular team meetings or with their team manager, director, or other departments: e.g., in a case in which there was a need to “re-open the discussion on the related guideline/protocol.” This was with the intention to add more perspectives to the dialogue, instead of “scaling up” and making others decide on the issue. In some instances, MCD yielded the insight to “get the director involved more quickly in a similar situation.”

In the third category *Communication and Dialogue*, participants indicate an improved cooperation between colleagues. They mentioned, e.g., raising issues more often, speaking up more often, seeking more help from each other when solving difficulties, sharing responsibilities with colleagues more rapidly, and trying to pause and reflect more often when making decisions. Prison staff stated they had learned from MCD how vital openness and proper communication are for their practice, e.g., the relevance of “addressing unacceptable behavior sooner.” Furthermore, participants mentioned that their dialogical skills had improved through MCD. However, they also stated a need for further development of those skills for themselves and their colleagues. According to MCD participants, prison staff should (a) *listen* more and better to others and postpone judgments while listening, and (b) *ask* more (neutral and open) questions. Prison staff intend to give more room to other opinions or dissenting views of colleagues. One person said: “I am working on my impatience, learning to initiate dialogue instead of discussion.” Another participant indicated to “ask for reasons instead of giving orders more often.”

The fourth category MCD results in a strengthened *Mutual Understanding and Team Spirit*, e.g., illustrated by improved recognition of each other’s dilemmas. Furthermore, participants stated a better insight into each other’s points of view, resulting in more mutual respect. MCD created more “unity in variety” within teams of prison staff; staff came to understand the importance of exchanging views, which resulted in more unity. MCD helps prison staff better understand the points of concern in the organization and how their issues often affect others. Prison staff reported an improvement in communication and how this contributed to a better understanding of colleagues; hence, MCD improves team spirit. Some even mentioned a safer environment within the team after MCD. Most experienced a stronger mutual connection, or as one participant said “We trust each other and each other’s decisiveness. We all feel we can continue on this path together.”

The fifth category *Self-development and Empowerment* shows a supporting role of MCD in helping individuals deal with emotions and better understand the role of emotions. Multiple participants mentioned an increased self-awareness or more self-control, e.g., by learning about “hidden emotions that still turn out to be present” or because “I know now how to engage in the conversation without getting caught up in my irritation.” MCD sometimes helps to process difficult situations, or as one participant mentioned “a feeling of

guilt disappeared.” One participant said “it helped to see that it can happen to anyone.” Often prison staff indicated a feeling of being acknowledged, e.g., by being heard. Many participants mentioned outcomes that reflect individual prison staff being empowered by MCD. As one participant said: “I feel more confident about this subject,” and another expressed: “I feel more secure about my rights and duties.” Others stated that MCD helped them feel stronger or more confident in general, e.g., “standing behind my decisions and trusting myself” or “asserting your opinion more often.” Often prison staff feel more comfortable voicing their opinions after MCD; “dare to ask questions,” to “stand up for myself” or to “show more loyalty to myself.” A specific aspect of this category is a raised awareness among prison staff of the importance of better self-care and self-protection, e.g., regarding their “assertiveness and self-protection not to become overworked” or to “think more about my own physical safety.” Often prison staff mentioned that MCD taught them to (a) give themselves more time (e.g., for rest, reflection, informal collegial conversations) and (b) indicate limitations more clearly to others (e.g., limitations regarding task responsibility).

In the sixth category *Moral Awareness*, prison staff indicated gained such awareness through MCD. They mention to have learned that every situation with moral dilemmas has downsides and consequences, and there are no clear-cut answers available; to know and understand what the morally “right” action is, each situation requires careful considerations and contextual thinking. Some MCD participants said that they had learned about the influence of values in daily practice, either personal or organizational, and gained a better understanding of those values. Prison staff became more aware and gained a better understanding of their dilemmas, and realized how such moral challenges are part of their practice. Moreover, hearing about the dilemmas of others gave participants a broader view of the moral challenges that occur within the organization.

Some participants mentioned having learned about *the significance of MCD*, the seventh category. Most indicated that MCD contributes positively to their practice because “you reflect on real and urgent work content,” and the discussed cases are the ones “we do not often talk about.” Furthermore, prison staff mentioned that MCD helped them to reflect on how to act, given the main values of prison work: “the higher purpose of the job is part of the conversation.” Some participants expressed the wish to continue with MCD because “it helps to explore dilemmas calmly and thus to arrive at well-considered decisions.” Another participant mentioned that MCD helped “not to assume what is good by only looking at what is customary.” Prison staff stated that MCD had broadened their view, were often surprised by the many alternative ways to handle specific situations, and how they learned from colleagues’ explanations *why* they believe a particular action is best.

In the final category *Lack of (relevant) Outcomes* from MCD sessions, a few participants reported a lack of relevance of the discussed case, others that MCD does not add anything new because the case was already discussed sufficiently, or the deliberation did not result in new insights. Or they stated “I will keep doing what I already did.” Most participants in this category mentioned the issue or dilemma still existed *after* an MCD; MCD did not solve it, as they had hoped.

Qualitative Outcomes as Perceived by MCD Facilitators

Based on the single MCD sessions, most of the facilitators’ answers—when asked about the outcome of the MCD for participants or how it was perceived by participants—were in line with the participants’ answers. For example, the facilitators also mentioned an improved cooperation and mutual understanding of team members. More explicitly than

participants, the MCD facilitators mentioned the importance for participants of “being seen” and “being heard,” as an outcome of MCD. Furthermore, facilitators reported that participants experienced MCD as a moment of “tranquility and peace” during intensive days. Facilitators added that participants felt “liberated or relieved” by the opportunity to share difficulties from practice. One facilitator mentioned that “the case presenter found it pleasant to calmly transform anger and frustration into thoughtful reflections on possible courses of action.” Another facilitator described how the exchange of perspectives during MCD made some staff realize what it feels like to be bullied or discriminated against, and why speaking up is often challenging. In another case, the exchange during MCD made participants become aware of the need for clearer agreements and the existing differences in views or actions among themselves:

It became apparent the team had not made sufficiently clear agreements on how to deal with and care for this prisoner since everyone had different ideas on what the agreements meant exactly. Moreover, the conversation indicated differences of opinion on how this prisoner should be treated. This revealed new dilemmas.

Sometimes clarity on the course of action resulted in strong motivation, e.g., “the two members of the management team who will work on it were noticeably eager and enthusiastic to move forward based on the new insights.” However, the opposite also happened, as one MCD facilitator observed that when “the case presenter said he heard nothing new, this was a letdown since it did not do justice to the collective moral inquiry.”

Discussion

Almost all data about MCD and its outcomes were positive. We found an average overall score per single MCD session of 7.4 out of 10. Similar to studies in healthcare, our data shows MCD fosters awareness of moral dilemmas and that participants learn from different perspectives, resulting in improved insight into case content and a better understanding of colleagues’ perspectives (De Snoo-Trimpp et al., 2020; Haan et al., 2018; Hem et al., 2015). We will relate our data to literature about moral learning, and hence, reflect and gain insights on how MCD helped prison staff in the development of their moral and reflective professionalism. Based on our data, we will add reflections on how MCD creates a deeper understanding of (the role of) emotions, as an important part of moral learning. Furthermore, we will reflect on the value of MCD and its outcomes for prison work in general. We will conclude with implications for DCIA specifically.

Moral Learning Process of Prison Staff by Means of MCD

In this study, we examined the experienced outcomes of prison staff participating in MCD. Positive evaluations or ratings of participants might initiate an impact in terms of a learning process, and vice versa: because one learns something and therefore values it positively. However, one cannot automatically conclude that participants’ positive evaluations of MCD have led to developments in moral learning. It is possible that participants appreciate MCD without them learning anything. In this paragraph, we investigate more in-depth the concept of moral learning and how it relates to the specific outcome results of this study on MCD.

As stated in the “Introduction,” the concept of moral learning includes developing a more profound understanding of a concrete situation and its moral aspects, and awareness of values and their validities when making moral judgments (Paterson, 1979, p. 128). An essential element is having a realistic view of responsibilities and defining the scope of your moral agency (Brookfield, 1998; Walker, 2007). Morality refers to a “shared understanding of who gets to do what for whom and who is supposed to do what for whom” (Walker, 2007, p. 17). In our data, MCD participants show an improved understanding of their roles and responsibilities, as reflected in, e.g., the qualitative data in the category *scope of influence*. In some cases, prison staff gained a better understanding of the complexity of a situation, which may surpass their (individual) professional roles and responsibilities. Participants learned that it is sometimes necessary to scale up—involve superiors or ask for help (at an earlier stage)—since they cannot influence all situations themselves. The hierarchy at DCIA and the focus on following protocols and guidelines may limit staff’s own initiative (Van Houwelingen et al., 2015). Our results show that prison staff did experience limitations regarding their level of influence. We noticed that staff tried to make changes based on insights gained from MCD, but that they also felt restricted in their practice in doing so. Awareness of these limitations and constructively addressing critical issues, on an individual level or on a more organizational level, requires an understanding of where the various responsibilities for these critical issues belong. This is part of a collective moral learning process. Some participants became more aware of the experienced restrictions to improve practice (e.g., hierarchy, protocols, and guidelines) and sometimes therefore mentioned a lack of outcomes of MCD. They experienced a dependence on superiors to be able to make decisions or changes based on the lessons learned from MCD. Hence, our data reflects a moral learning process concerning the awareness of how to address responsibilities and deal with limitations. In order to increase prison staff motivation for and engagement with improving practice, it is necessary to further explore, discuss, and research the role of experienced restrictions and how to make better use of the insights and outcomes of MCD. Ultimately, this could create more possibilities to increase the experienced relevance and outcomes of MCD, and above all, contribute to a greater impact on improving practices by means of MCD.

There is a potential lack of moral awareness among Dutch prison staff (Paanakker, 2020, pp. 151, 158; Van Houwelingen et al., 2015, p. 81). Strengthening moral awareness is therefore an essential part of moral learning for prison staff. Paterson (1979, p. 128) points out that understanding the subject matter of moral choices is crucial. Our data shows that MCD helped prison staff better understand *their* moral dilemmas (including differences between professional and personal levels) and organizational challenges. MCD made prison staff focus on moral aspects of their profession and talk more in-depth than they usually do. MCD helps prison staff to look beyond what is customary and reflect on it in an antidogmatic manner. As stated in the “Introduction,” one needs the perspectives of others to better contextualize a situation. Improving the understanding of the context of each situation is important during MCD, since moral learning emerges from joint reflections on experiences from concrete situations (Inguaggiato et al., 2019a, 2019b; Widdershoven & Molewijk, 2010). For this, you need to be capable of “perspective-taking” (Kurdek, 1978), meaning that you are able to take the perspective of another person in a situation to better understand other viewpoints, instead of just looking at situations from your perspective. Prison staff learned during MCD to look beyond their own interpretations of situations, and to see the relevance and value of learning from others.

We did not yet mention the role of emotions within the process of moral learning, as we did not see it in many of the literature on moral learning or moral development. However,

emotions are an important ingredient of reflection processes. Emotions generally strongly influence people's considerations, and so play a pivotal role in moral decision-making. Hence, also in moral learning processes attention should be given to emotions. Via our emotions we can learn what is important; they can contribute in several ways and be the source of new insights (Spronk et al., 2022). Emotions can help to guide our thinking and actions, and our thinking can also guide our emotions (Molewijk et al., 2011). To come to constructive decision-making, one needs to be aware of emotions to eventually act consciously (McManus, 2021). During MCD, if a facilitator observes that a participant is touched—e.g., angry or sad—about something that happened in the case, the facilitator can ask what it is that makes the participant feel this way: “what is at stake for you, which value is threatened?” Even though MCD is an instrument with a focus on rational reflections, MCD should make use of the knowledge that comes along with our emotions (Molewijk et al., 2011). Our data shows that prison staff during MCD better recognized and understood their emotions and the role of their emotions in complex situations, e.g., to see what is at stake for them. MCD helps prison staff improve their self-awareness with respect to the presence of emotions; some even mention more control of both their emotions and expressions of frustrations. This is in line of what Spronk et al. (2022) showed in their research about the role emotions in MCD and how the facilitator can make use of emotions in different phases of MCD. Sometimes emotions are too intense and might interfere or even obstruct the reflection process. However, the MCD facilitator can facilitate the reflection process in which participants become more aware of their (strong) emotion(s) and learn to identify their underlying ideas which often show their values that are at stake (Spronk et al., 2022). Our results show that prison staff learned through MCD how to use emotions constructively during moral decision-making, instead of seeing them an obstacle or only experiencing frustrations about situations.

Implications for Future Ethics Support for Prison Staff

There is no consensus on what a good MCD or a sufficient MCD outcome entails (Hartman, 2020, pp. 14–15; Schildmann et al., 2013). However, this is not necessarily problematic. Our outcomes overview may help prison institutions, and mostly DCIA, to reflect on what they perceive as desired MCD outcomes for prison staff. Our data also explains some of the less positive experiences with MCD, e.g., participants mentioning a lack of impact on practice. This creates an opportunity for DCIA to improve the use of Ethics Support methods or the organization of MCD series in the near future, for example, by developing specific thematic Ethics Support tools which address moral issues and can contain insights and MCD outcomes in a more practical way (such as “building a thematic moral compass,” Snoo-Trimpp et al., 2022). Addressing some of the experienced obstacles regarding MCD will improve the conditions for fostering moral learning.

The challenging context of prison work may influence staff's (moral) decision-making, e.g., by basing practices on what is customary or on improper intuitions (Liebling et al., 2011; Van Houwelingen et al., 2015). Our results show that MCD facilitates in-depth reflections about how to implement the core values of prison work, taking into account possible limitations of prison staff's scope of influence. The intervention of MCD can help move towards a culture where staff feel safe to openly and constructively mention what could be improved in their institution. The reflection during MCD helps prison staff to feel more empowered to address critical issues, e.g., about work conditions or potentially unsafe situations. Based on the ever-challenging context of prison work and the results of

our research, we observe a need for ethics support services on a structural basis. Structural ethics support will help prison staff to deal with the moral aspects of their profession. We recommend that prison institutions, and particularly DCIA, (continue to) implement MCD sessions for this purpose. MCD proves to be a suitable training method for moral learning of prison staff.

Strengths and Weaknesses

This study is unique in its empirical research on the outcomes of ethics support for staff in prisons. By analyzing experienced outcomes of a large number of sessions, we gained new insights into how MCD can foster moral learning, thereby showing its value for prison staff and prison institutions. This is the first study that relates an explanation of what the moral learning of professionals entails, to the experienced outcomes of participants of MCD, and thereby showing by empirical data how MCD fosters a moral learning process in participants. On a critical note, we mainly asked staff about outcomes immediately after sessions instead of observing or asking weeks later. What is *experienced* as an outcome of MCD does not automatically imply an *actual impact* of MCD on practice. Further research into that impact, a lack of experienced outcomes, or even negative outcomes would be worthwhile to learn how to further improve the implementation and shared ownership of MCD. More attention could also be given to organizational learning based on insights and lessons learned from MCD series (instead of only focusing on what individuals or professional teams learn). Openly communicating about challenges and possible changes seems to be difficult in the prison setting. It also seems to be important to better research the safety dynamics within the teams and the prison institutions, and to find out which methods can help to further achieve an open reflective work climate. Since this research first looked into the experienced outcomes and later on added the question whether a part of those outcomes show moral learning, it would be interesting to start a research design by more explicitly looking into the moral learning of prison staff (without focusing on outcomes of MCD). To further foster and research impact on practice, one could consider using participative action research which can be a valuable method when developing learning processes in and with practices (Baum et al., 2006).

Conclusion

This article provides insight into the contribution of MCD as an Ethics Support Service in general and specific the process of moral learning, of Dutch prison staff. The experienced outcomes show how prison staff value MCD as an instrument for in-depth reflections on the moral aspects of prison work. Both the MCD conversation method (i.e., the Dilemma Method) and the MCD facilitators guided participants toward an increased understanding of the morally challenging situations they encounter. MCD helped prison staff to become more aware of their responsibilities and their limitations, and to involve others sooner in complex situations. Furthermore, this study revealed that MCD empowered prison staff to address challenging issues and involve others, and it increased their self-awareness and self-control. The results of this study show the value of MCD as an instrument to foster a process of moral learning of prison staff. Future research should focus on how to further maximize the potential of MCD, and create a wider impact on the individual, team, and organizational level of the prison institutions.

Appendix 1

Table 4 Characteristics of respondents

Survey-after-the-series by MCD-participants	
Work location	
Prison of Zwaag	36.5% (65)
Prison of Nieuwegein	33.7% (60)
Prison of Leeuwarden	29.8% (53)
Professional discipline	
Healthcare professionals	11.8% (21)
Correctional officers (for repeated offenders)	15.7% (28)
Case managers reintegration services	11.2% (20)
Office staff reintegration services	9.0% (16)
Security guards	11.2% (20)
Middle management	15.7% (28)
Labor instructors	14.0% (25)
Management team	11.2% (20)
Contact with prisoner	
No, never	2.2% (4)
Yes	96.6% (172)
Sex	
Female	38.3% (67)
Male	61.7% (108)
Age	
0–24 years	0.0% (0)
25–34 years	14.3% (25)
35–44 years	22.3% (39)
45–54 years	26.3% (46)
55–64 years	36.0% (63)
65 years or older	1.1% (2)
Highest completed education	
Primary	0.0% (0)
Pre-vocational secondary	8.0% (14)
Senior general secondary, pre-university	2.8% (5)
Secondary vocational	51.7% (91)
Higher professional, applied sciences	35.2% (62)
University	2.3% (4)
Years in service	
0–5 years	17.5% (30)
6–10 years	7.6% (13)
11–20 years	35.1% (60)
21–40+ years	39.8% (68)

Appendix 2

The steps of the Dilemma Method¹ of Moral Case Deliberation.

Introduction

Introducing moral case deliberation and its methodical approach, and discussing the objectives, expectations, and confidentiality of the session.

Presentation of the Case

Providing a description of the case by the case owner, specifically at the moment the moral question is most prominent.

Formulation of the Dilemma and the Underlying Moral Question

Identifying and formulating the two sides of the dilemma including the negative consequences, and the underlying moral question² or moral theme.

Clarifying through Elucidating Questions

Asking elucidating questions in order to empathise with the situation and to gain a clear picture of the situation.

Perspectives, Values, and Norms

Collecting the values and norms of relevant stakeholders involved and with respect to the dilemma.

Alternatives

Free brainstorm focused on realistic and unrealistic options to deal with the dilemma.

¹ Stolper M., Molewijk B., Widdershoven G. (2016). Bioethics education in clinical settings: Theory and practice of the dilemma method of moral case deliberation. *BMC Med Ethics*, Jul 22; 17(1), 45. <https://doi.org/10.1186/s12910-016-0125-1>

² For DCIA we made a slight adjustment in this Dilemma Method. Together with the facilitators we decided to mainly focus on the formulation of a dilemma, instead of as well including a “moral question.”.

Individually Argued Consideration

Making individually a choice in the dilemma, how one would act in the specific situation of the case. Formulating the value that support one's choice and the negative consequences of one's action(s). Including formulating how to limit negative consequences. Finally, attention for 'needs' that help to accomplish the choice made.

Dialogue about Similarities and Differences

Examining the similarities and differences in individual choices, argumentations and/or considerations.

Conclusions and Actions

Formulating conclusions with concrete actions or agreements regarding the discussed dilemma.

Wrapping Up and Evaluation

Evaluating the MCD session, with the focus on the usefulness of MCD and what to organise differently next time (e.g., steps of the method, selected day and timeframe, groups dynamics, facilitator etc.).

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Data availability The datasets generated and/or analyzed during the current study are available from the corresponding author on reasonable request.

Declarations The study was conducted and published after informed consent by all participants. The Medical Ethical Review Committee of the Amsterdam UMC confirmed that the Dutch Medical Research Involving Humans Act (WMO) did not apply. Additional approval was not required.

Conflict of Interest The authors declare no competing interests.

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