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FACTORS OF RESISTANCE: SPIRITUALITY AND RELIGION IN SOCIAL WORK PRACTICE

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Recommended Citation

Ramos, Nancy and Chavez, Jessica, "FACTORS OF RESISTANCE: SPIRITUALITY AND RELIGION IN SOCIAL WORK PRACTICE" (2019). *Electronic Theses, Projects, and Dissertations*. 870.
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FACTORS OF RESISTANCE:

SPIRITUALITY AND RELIGION IN SOCIAL WORK PRACTICE

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A Project

Presented to the

Faculty of

California State University,

San Bernardino

_____

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

_____

by

Nancy Ramos

Jessica Chavez

June 2019

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Approved by:

Dr. Thomas Davis, Faculty Supervisor, Social Work

Dr. Janet Chang, Research Coordinator

ABSTRACT

The discussion of spirituality and religion (S/R) in social work is a prevalent topic within the field. Literature suggests that social workers do not feel competent or comfortable discussing or utilizing S/R in practice. This study focused on identifying factors that may be causing resistance in social workers from the Inland Empire of Southern California towards addressing S/R with their clients. The researchers interviewed eight social workers from diverse areas of practice via telephone and in-person. Data was collected via audio-recording and later transcribed for thematic analysis. Participants were asked an array of questions including their own experience with their spirituality and current comfort level with asking their clients about S/R. Through the findings, it appears that social workers' comfort level stems from various aspects including a sense of unease regarding their knowledge on various belief systems. The results indicated that once clients are asked about their spiritual and/or religious beliefs, clients are able to engage in a discussion about their definition of their own beliefs and determine the direction of the topic.

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CHAPTER ONE

INTRODUCTION

Problem Formulation

In the field of social work, there is great emphasis on being skilled in working with a diverse population and seeking further education to be culturally aware in working with clients, including their spiritual and religious (S/R) beliefs. Spirituality and religion are often used interchangeably. Spirituality is defined as an individual's search for truth through a transcendent reality to serve as a framework for their sense of meaning and set of beliefs (Oxhandler & Pargament, 2014). Religion is defined as an integration of religious activities and practices done by individuals (Graham, Furr, Flowers, & Burke, 2001). When individuals face significant trauma and/or life adversities, they may turn to S/R as a coping mechanism. For instance, S/R contributes to individual's ability to cope when they suffer from illnesses, such as mental and/or physical conditions (Poston & Turnbull, 2004). There is a strong correlation between S/R association and individual's well-being; thus, it would be appropriate for social work practitioners to implement S/R into practice as a strategy to assist clients through treatment (Koenig, 2012; Ivtzan et al., 2013). Oxhandler and Pargament (2014) concluded that there is a need in the social work field to understand clinicians' views on implementing S/R in practice.

Research has demonstrated that social workers may feel that they lack the knowledge and skills needed to integrate S/R into their practice with clients

(Baskin, 2002; Oxhandler & Pargament, 2014; Harris, Yancey, Myers, Deimler, & Walden, 2017). During practice, if social workers are excluding the S/R dimensions, then they are not thoroughly immersing into the lives of their clients to help meet their needs, which contradicts to the standards of the National Association of Social Work (NASW) Code of Ethics (2017). Per the NASW Code of Ethics (2017), social workers are held responsible for promoting and encouraging client's culture by being inclusive in the topic S/R. Baskin (2002) reported that some clients feel intimidated and/or are unable to discuss their spiritual experiences with social workers because of fear that they will be negatively criticized. Hence, this becomes a problem in social work practice. Daniels and Fitzpatrick (2013) support the relationship between S/R and individual's well-being, which also highlights the importance of broadening theories to include S/R.

In addition, the lack of implementation of education may lead to be a challenge for practitioners to incorporate S/R in the field. In order to understand what is contributing to social worker's resistance in integrating S/R in practice, it is important to examine the factors that are leading towards their resistance. A previous research study conducted in Minnesota regarding social workers' attitudes toward S/R focuses on Licensed Clinical Social Workers' (LCSW) perspective on how S/R impacts them and their clients (Allick, 2012). The study concluded that there is a need for S/R to be integrated in the curriculum as a part of social work programs. This study will focus on the extent of social workers not

addressing S/R with their clients within the Inland Empire of Southern California. For some practitioners, putting S/R into practice within the social work field has been exceedingly beneficial and valuable while servicing clients (Baskin, 2002).

S/R is a guiding force in many client's lives and can influence their resilience during times of adversities. Leaving that aspect of a client's life unacknowledged can potentially cause many micro ramifications. A social worker is taught to understand an individual through a person-in-environment perspective but may overlook a client's S/R for many reasons and that may possibly affect the worker-client relationship.

Purpose of the Study

The purpose of this study is to examine the factors hindering practitioners from discussing the topic of S/R with their clients. The implementation of S/R into practice has been an ongoing issue; it is known that clinicians are now being called to be inclusive in all aspects of individuals' life (Daniels & Fitzpatrick, 2013). In order to begin addressing this issue, research should to be conducted as a guiding source to best address the particular factors leading social worker's resistance in applying S/R into practice. Once those factors are known, current and future social workers will be better equipped in achieving client satisfaction.

Due to the lack of research conducted on this issue, the proposed study will use an exploratory study design in order to gather more information as to why social workers are hesitant on the topic of S/R as it pertains to their practice with

clients. This study will use a qualitative design to enhance the accuracy of data that is being collected. One benefit of utilizing a qualitative study design is conducting one-on-one interviews that will allow participants to be transparent in their responses by offering personal interpretations and leaving opportunity for elaboration. In addition, the intent of qualitative research is to comprehend individuals' social perspective in their natural setting. Participants of the study will be gathered using a snowball sampling technique. Participants will be asked open-ended questions in an effort to explore and understand their perspective on this issue. The interviews will also allow researchers to analyze information conveyed verbally and non-verbally that otherwise would not be captured if done utilizing another method.

Significance of the Project for Social Work Practice

The proposed study is needed to assist current and future social workers expand on their understanding of different factors that may positively impact their work with clients. Additional research on this topic is needed due to limited studies. The findings of this study can help impact social work practitioners and agencies. Additionally, findings can also impact graduate programs by implementing curriculum on S/R. The results of this study can convey awareness to this issue and can potentially result in implementation of S/R in assessments conducted by social workers, as well serve as interventions that can be utilized.

The study will contribute to social work practice by presenting factors that prevent social workers from discussing what may be an important aspect in

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helping clients. The findings will assist in identifying ways to address this problem that appears to hinder social worker's ability to work with clients who may be spiritual or religious. Identifying the factors that may be triggering resistance will offer suggestions on what may need to be implemented in the field of social work. The findings of the study can serve as a reference for future research on this topic. The proposed study will utilize interviews collect data on this limited topic in research to assess the factors hindering the implementation of S/R in social work practice. The question the research study will address is: What factors impact social workers' resistance towards discussing issues of spirituality and religion with their clients?

CHAPTER TWO

LITERATURE REVIEW

Introduction

The role of S/R in individuals' lives has been a continuous topic in society. As a result, many professionals have taken interest on S/R. In terms of religiosity, California has been ranked the 35th most religious state in the United States with 49% of adults reporting to be highly religious (Lipka & Wormald, 2016). Graham, Furr, Flowers, and Burke (2001) reported that individuals live healthier lifestyles when they are connected to their spiritual identity and self-worth. S/R appears to offer individuals a meaning and purpose in life, and sense of peace and comfort.

When receiving counseling services, there are many clients who may not want to discuss S/R. In contrast, there are clients who may want to discuss their personal beliefs and implement them as part of their treatment (Harris, Randolph, & Gordon, 2016). Thus, social workers have the responsibility to meet the needs of their clients, meet their clients where they are, and abide by the client's right to self-determination. Per the NASW (2017), it is social workers ethical responsibility to be respectful and promote the client's self-determination when discussing treatment. Social workers are also ethically expected to work towards and partake in furthering their education to obtain cultural competence (NASW, 2017).

Avoiding the topic of S/R in treatment contradicts the professions respect of social diversity and competence (Senreich, 2013; Harris, Yancey, Myers, Deimler, & Walden, 2017). When a client enters a clinician's office, they bring along important aspects of their life which may be inclusive of their spiritual beliefs; therefore, one's spirituality is not something that can be left behind (Pargament, 2011). However, many clinicians are not well-equipped in dealing with this dimension of a client's life. Under the social work ethical guideline of cultural competence, social workers are not to be discriminatory towards a client's S/R and should, therefore, recognize their religious culture throughout the helping process (Oxhandler, Polson, Moffatt, & Achenbaum, 2017).

Impact of Spirituality and Religion in Mental and Physical Well-being

S/R influences both mental and physical health in a variety of ways. In regard to S/R, it is important for clinicians to have knowledge on how mental and physical health is associated with S/R and how it has the potential to have an impact on individuals' state of functioning and well-being (Seybold & Hill, 2001). The correlation between S/R and mental/physical well-being appears to be acknowledged due to be significant due to possible implications among a variety of helping fields which intersect with the social work profession.

Mental Health

S/R can have a direct correlation to mental health in many aspects, such as serving as a coping mechanism, providing resources and positively increasing individuals' mental health (Ellison & Lee, 2010; Elkonin, Brown & Naicker, 2012;

Daniels & Fitzpatrick, 2013). Religion can be a coping mechanism that

individuals lean towards when dealing with life stressors. S/R offers feelings of

connectedness with others and ultimately, leads individuals to offer social and

emotional support to one another during difficult life circumstances, and in turn

can help alleviate stress (Tirri & Quinn, 2010; Gerber, Boals, & Schuettler, 2011;

Koenig, 2012; Ivtzan, Chan, Gardner, & Prashar, 2013).

Although religion has many positive mental health effects, it is important to

note that there are also contrary negative effects. Religion can be used as a

justification for negative behaviors and can promote a sense of guilt (Ellison &

Lee, 2010). Those who feel like they are not living up to the standards and

expectations set by their religion may experience feelings of guilt. Feelings of

guilt as a result of religious violations with or without intent can potentially cause

anxiety (Behere, Das, Yadav, & Behere, 2013). Gerber et al. (2011) reported that

religion can potentially delay mental health care for individuals due to having a

poor and conflicted relationship with mental health providers. Social workers can

assist address and mitigate the negative effects that some individuals may

experience by providing assessments and services that can improve their well-

being.

<u>Physical Health</u>

In addition to S/R playing a positive role in mental health, S/R also has a

significant impact in physical well-being. Seybold and Hill (2001), and Aldwin,

Park, Jeong, and Nath (2014) reported that S/R is likely to benefit individuals'

physical health through social relations which can serve as motivation in maintaining a healthier lifestyle. In addition, Aldwin et al. (2014) identified other factors that encourage the relationship between S/R practice and physical health—it promotes healthier behavioral norms, regulates emotions through prayer and offers assets and resources. S/R promotes a healthier diet, physical activity, safer sexual activity, and decreasing health problems related to smoking and drinking (Koenig, 2012; Phelps, Lauderdale, Alcorn, Dillinger, Balboni, Van Wert, & Balboni, 2012; Ivtzan et al., 2013; Aldwin, et al., 2014).

Role and View of Spirituality and Religion in Social Work

The role of S/R in practice has become an increased topic of discussion among clinicians. In one study, social workers reported that many individuals use their S/R as an avenue to resources and as a way of coping with stressful situations and oppression (Furman, Benson & Canda, 2011). Historically, clients' culture in practice has not been inclusive of S/R and now clinicians are being called upon to integrate all aspects of a client's culture (Daniels & Fitzpatrick, 2013). The social work profession and many other helping professions have recognized that spiritual-based practices and assessments can be effective in practice for clients through their treatment journey (Furman et al., 2011). Discussing S/R during the time of assessment allows for clients to openly discuss this area of their lives and can positively affect the worker-client alliance rather

than feeling intimidated by the power differential between them and their therapist (Oxhandler & Parrish, 2018).

The application of S/R in practice can be a challenge to many. In an early study, Bullis (1996) noted that, often, social work practitioners dismiss the significance of S/R and ignore the usefulness and impact it has in practice. In the decades since this issue was noted, the problem has remained persistent and has been a continuous topic of interest in social work practice. In order to gain an understanding on how to effectively apply S/R into practice, clinicians require both personal and professional development (Daniels & Fitzpatrick, 2013). Social workers should feel comfortable and competent to discuss S/R while in practice and develop a mental picture of how it would come to play in the lives of clients who identify with their S/R (Barker & Floersch, 2010).

Factors Hindering Spiritual and Religious Approaches in Practice

In Barker and Floersch's (2010) discussion about implications for social work education, they noted one cannot conclude that all social workers have the proper education and language to practice S/R. Literature on S/R lacking in school curriculum is growing (Sue, Rasheed, & Rasheed, 2016; Kvarfordt & Herba, 2018). If proper implementation on S/R is not embedded in students' education, as they advance in their career, the hesitation and intimidation of implementing S/R in practice may slowly grow (Barker & Floersch, 2010).

Kvarfordt and Herba (2018) reported in their article that practitioners' desire to learn more on S/R due to feelings of incompetency (Sue et al., 2016; Oxhandler et al., 2017; Kvarfordt & Herba, 2018); thus, attention must be given to why students are not receiving S/R training. Canada and Ferman (2010) found that many social workers believed that spiritual interventions were appropriate, but few actually used spiritual interventions with clients. A national survey conducted on LCSWs, found that there were only few social workers who implemented S/R in their practice with only 13% having taken a course on S/R and 46% sought additional education which implied interest on the subject matter (Oxhandler, Parrish, Torres, & Achenbaum, 2015).

Kvarfordt and Sheridan's (2010) study revealed that practitioners held positive and genuine attitude on the important role S/R plays in the helping process. However, due to insufficient education received during their program, many practitioners sought outside resources to further their education on S/R (Kvarfordt & Herba, 2018). In addition to insufficient education, a determining factor of a clinician's integration of a client's S/R is their own personal beliefs, which may potentially influence their openness in including that dimension of their client's lives (Cummings, Ivan, Carson, Stanley, & Pargament, 2014; Oxhandler, 2017). Despite clinicians' own beliefs, as noted in one study on Christian social workers, social workers reported that S/R should be addressed with clients only when the client initiates the topic (Furman et al., 2011).

Implications and Gaps in the Literature

Allick (2012) argued that social workers appear to separate S/R from their practice. However, other literature continually highlights its importance. S/R may not be addressed in treatment, which may be serving as an impediment to potential successful treatment outcomes. A number of social work practitioners struggle to value S/R while in practice and move toward a more secular and professional approach and slowly distance themselves from the topic (Allick, 2012; Harris et. al, 2016; Sue et al., 2016). Per literature, it is critical for social workers to comprehend how avoiding S/R may affect clients (Allick, 2012; Pandya, 2015).

Literature addressing S/R in social work has not taken into account views from different sectors within the field of social work. The literature reviewed has a central theme of addressing education as a factor hindering social workers ability to implement S/R. However, it appears that there is a lack of further studies on additional factors that may contribute to the lack of implementing S/R in practice. Nonetheless, the discussion of S/R in social work holds implications for future social work students, practitioners, clinicians, and most importantly, clients. Though literature supports the belief of S/R being beneficial to clients, many may feel unequipped in effectively applying S/R as a result of the NASW and the Council of Social Work Education (CSWE) not incorporating guidelines on how to apply S/R into practice (Eun-Kyoung & Barrett, 2007).

Theory Guiding Conceptualization

For the purpose of the current research study, the question will focus on using the lens of a strength-based approach. The strength-based perspective plays a significant role in the field of social work; it promotes clients' abilities and builds on their self-efficacy (Gleason, 2007; Gray, 2011; William-Gray, 2016; Zastrow & Kirst-Ashman, 2016). The foundation of social work focuses on client assessment and understanding their current situation. Zastrow & Kirst-Ashman (2016) reported that although practitioners address client's issues, it is important to pinpoint their strengths, as that would provide a guide for how the client can improve on their situation. Saleebey (2013) noted principles in the strength-based perspective including—every community and environment has resources; humans help facilitate families, communities, and groups to nurture and care for one another; individuals, families, and communities all have the potential to change; and human adversity is challenging but can also bring opportunity and resiliency.

For many individuals, S/R may serve as a source of strength, and as a result believe that it is an essential factor in their recovery (Harris et al., 2016). Individuals that are receiving treatment and are not asked about their S/R, may not be receiving the most effective individual care that they may need. As noted in literature, many clients are not asked about their spiritual beliefs during the initial assessment, and by disregarding a client's S/R, the clinician may have an inaccurate assessment which may not be inclusive of all the systems that are

representative of the client (Oxhandler et al., 2015). Per the NASW (2017), social workers are responsible to consider all systems that have the potential to impact their clients, which includes being culturally competent. Being culturally competent enables practitioners to confidently speak about S/R with their clients if they bring up the topic, as it may serve as a tool to empower them (Allick, 2012).

Summary

S/R has increasingly become a topic of discussion among the social work field. Literature has demonstrated that clients who identify S/R as significant, may want to implement their beliefs as part of their treatment. Research shows that S/R gives individuals a sense of belonging and self-worth, being that S/R can be a fundamental aspect of their life. Not taking client's beliefs into consideration would be contradicting to social workers' core value of cultural competency and diversity. The strength-based approach has been used as a resource to alleviate individual's burden and stress. It also assists individuals in boosting their resiliency and gives them permission to recognize their abilities and skills that they utilize. S/R has been a challenge to many practitioners; however, social workers have the duty of meeting clients where they are and seeking the most effective approaches of treatment for their clients' benefit.

CHAPTER THREE:

METHODS

Introduction

The purpose of this study was to address the factors that impact social workers resistance towards discussing issues of S/R with their clients. This chapter will discuss how the study will be conducted. The sections within this chapter will more specifically address the study design, sampling, data collection and instruments, procedures, and protection of human subjects.

Study Design

Due to the limited research on this topic and in order to get more accurate responses, this study used an exploratory study design. There is minimal literature on the factors hindering discussions among social workers applying S/R in practice within different sectors of the field. In addition, there is no literature studying this issue in the Inland Empire of Southern California. To further expand on social work and S/R research, it is crucial to address other factors leading towards resistance in other social work scope of practices.

This study sought to address these gaps in the literature by conducting qualitative, one-on-one interviews with MSWs and LCSWs within the Inland Empire of Southern California who represent different sectors in the field of social work. There were various strengths in conducting interviews for the study.

Utilizing interviews for this study encouraged dialogue and allow participants to elaborate on their responses. This study was representative of this issue throughout various areas of practice within social work, which was a potential strength of this study design. Researchers were also able to make verbal and nonverbal observations of the respondent's answers. Body language in response to questions being asked provided the researchers further data to analyze.

A practical limitation of the study design was the potential for participants to misinterpret the questions or for the researchers to misinterpret participant's responses as opposed to utilizing a quantitative approach. Due to the study being conducted by two different researchers, the data gathered was potentially interpreted differently when being transcribed. Another limitation of using a qualitative approach was that the results were not generalized to the population as a whole due to the limited sample size.

Sampling

Participants of the study were recruited from various sectors (e.g. mental health, child welfare, school-based and medical) within social work. Participants were selected utilizing a snowball-sampling technique based on the researcher's own professional network. The study recruited eight participants. Participants eligible for the study consisted of both female and male social workers. Participants must have obtained their MSW or LCSW and no age group or

ethnicity was required. The selected sample for the study was realistic in time and resources available to the researchers.

Data Collection and Instruments

The qualitative data was collected via one-on-one interviews and telephone interviews. It was anticipated that some participants were not available to meet in person; therefore, interviews via telephone was an alternative. The participants were asked open-ended questions as well as a set of demographic questions to observe basic demographic disparities. The demographic questions included the following: age, gender, ethnicity, degree, area of practice and religious affiliation.

The researchers created an interview guide that was utilized for this study. The questions aimed to address the following topics: experience utilizing S/R in practice, use of S/R during initial assessment, preparation/education, personal beliefs, and challenges. In addition to the structured interview guide, researchers also utilized probing questions and furthering responses as needed following the participant's responses.

Procedures

The researchers contacted the participants known through their own professional network, via telephone or email. Researchers educated the potential participants on the purpose of the study. Questions and/or concerns pertaining to

the study were addressed and clarified. If participants agreed to partake in the study, he/she was given an informed consent form to sign at the time of the interview. Participants that wanted to conduct the interview via telephone were provided a consent form via email that was then asked to be scanned and returned via email. If respondents requested to receive a copy of the informed consent, it was provided. With granted consent, participants' responses were recorded. Participants were informed of voluntary participation, risks and benefits of the study. Due to the nature of the study, there were no anticipated risks; therefore, a debriefing statement was not provided.

After respondents agreed to participate in the study, a time and location was determined to conduct the interview. The estimated time frame of conducting the interviews was approximately 20 minutes. If participants wanted to complete the interview via telephone, a time was specified. The face-to-face interviews took place in a suitable environment that was convenient to participants. The location required a secure and safe atmosphere where participant's responses were properly recorded and while maintaining their confidentiality.

Protection of Human Subjects

Researchers educated the potential respondents on the study to ensure that the respondents were informed on the purpose of the study. After potential respondents decided to partake in this study, an informed consent form for their involvement was provided to assure participants that their identity and responses

would remain confidential. The recorded responses were on a saved file in the researcher's telephones which was password protected. In addition, any notes that researchers took during the interviews were transferred to an electronic document that was also password protected to ensure respondent's confidentiality. After transcribing the data, the files were deleted from the cell phones and all documents were shredded. Participants names were coded to protect confidentiality.

Overall, safety concerns were not likely. There were no potential risk factors identified in this study. Psychological, physical, and social risks were not anticipated due to the nature of this study. At any time during the interviewing, participants were free to revoke their consent and/or refuse to respond to a given question.

Data Analysis

The study sought to explore factors leading social work practitioners towards resistance from implementing S/R in practice. It was anticipated that respondents would provide insightful responses throughout the interview. In order to analyze the interviewee's responses, thematic analysis was utilized. Thematic analysis allowed researchers to gather a clear understanding of the transcribed text and helped identify underlying themes.

It was expected for respondents to have distinct responses due to their unique experiences. However, some common themes were expected to emerge.

For example, not having sufficient education and/or training, lacking adequate skills, feeling incompetent, and feeling uncomfortable. Anticipated variables included the following: education, competence, preparation, and biases. A set of demographic questions were utilized for descriptive analysis. For example, gender, age, ethnicity, degree, area of practice, and religious affiliation. These additional variables allowed the researchers to understand how the respondents fit within the general population.

Summary

This study sought to explore factors that may hinder social workers from applying S/R as a part of their practice. Conducting interviews allowed both the researchers and the participants to gather a better understanding on this topic. Although this study was not generalizable to the field of social work as a whole, the sample was representative of different social work sectors that created a more versatile application on this issue. Utilizing a qualitative method for the intended study was appropriate in addressing this under-researched topic.

CHAPTER FOUR

RESULTS

Introduction

After interviewing eight professional social workers in their respective fields regarding their views and implementation of S/R in practice, there were many relevant themes that emerged. In seeking to understand each interviewee's and their client's perspective on the definition and importance of S/R, this study has identified various themes. Themes that were identified as components of S/R are categorized as the following: items, people, places, and ideas. The themes that were mentioned throughout the interviews are components of S/R and will be referred to as such. The demographic information that was gathered from all respondents will be listed as well as the components of S/R.

Analysis

Table 1 demonstrates statistical data based on the demographic information of each participant. The researchers categorized participant's ages as the following: 25-30, 41-50, 51-60, and 60 and above. The average age in this study was the range of 41-50 years old. There were seven females and one male who participated in this study. Five of the eight participants identified as Hispanic and three identified as White. Participant's highest degree obtained, area of practice, and their own affiliation with a faith-based organization was also noted. All of the respondents have their MSW degree, with four being LCSWs. The

participants' areas of practice were as followed: Mental health, child welfare, school-based setting, medical field, high risk children/youth/families, mild/severe mental disorders, substance abuse, trauma, forensic, and macro.

Tables 2-6 demonstrate the various themes that emerged which were categorized by items, places, people, and ideas. These components resulted by reviewing the interview transcriptions and utilizing thematic analysis. The themes were organized into tables to display the results of this study. Through the use of thematic analysis, significant themes from each category previously mentioned were selected as the following: ideas, assessments, clients, and trainings. Direct quotations from the interviewees are listed in some of the tables to provide insight of their detailed responses.

The Absence of Spirituality and Religion in Schools of Social Work

One common theme from the category of 'ideas' that was presented by most respondents is the idea that there is an absence of education and training of S/R in schools of social work. Regarding the implementation of S/R in education, most respondents reported that the topic of S/R was not emphasized and would only be discussed vaguely, as stated by one respondent, "I think in the instruction piece when you're in school, I think that needs to get a lot better" (Personal Communication, Participant 1, February 2019).

Social Workers' Own Disposition Impacts their Practice

Another emerging theme in this study is how social workers' own disposition of S/R impacts their practice. This theme can suggest that opening the door to S/R may be difficult, but it may initiate with a social workers' own feelings and beliefs. This notion implies that social workers' current level of comfort impacts their comfort level in addressing S/R with their clients. The social workers in this study appear to be mindful and aware of their own S/R beliefs. One common theme among the respondents was how they had to come to terms and be comfortable with their own spirituality in order to be comfortable discussing it with their clients. As one respondent said, *"I think it's given me now better understanding of what spirituality means for me, and how that may differ from what I knew growing up, and how that may differ completely from people I'm working with"* (Personal Communication, Participant 5, January 2019).

Spirituality and Religion is Significant to Some Individuals

The social workers that were interviewed also commonly recognized that their client's religious beliefs can be impactful in their work together. This might suggest that if a social worker is not asking the question about an individual's religion or spirituality, then they might be ignoring a powerful coping method for their clients. Identifying client's S/R may serve as a coping mechanism that can lead the social worker to explore alternative coping strategies and potential treatment options. As some of the respondents alluded to S/R being significant to

some of their clients', one respondent summarized it in the following manner, "I see it as it can be a strength, it can be a source of support in the community, it can be part of an individual's recovery" (Personal communication, Participant 5, January 2019).

Promoting Client's Self-Determination

The social workers in this study all alluded to the idea that the client serves as the driving force in initiating the conversation of S/R. Most of the respondents stated that they proceed with the topic of S/R only after listening to the clients' response and their decision to continue. As stated by one participant, "It really depends on the client and how they answer that and there's some that might say it's not important at all" (Personal Communication, Participant 5, January 2019). This approach promotes the clients' self-determination and empowers them to be the one to lead throughout the assessment process. This belief suggests that the clients are the gatekeepers in exploring S/R.

Assessments

An assessment was an artifact that was commonly mentioned among the interviewees. Some interviewees stated that the question of S/R is already being addressed in their agencies and believe that it is an important element that should undoubtedly be included as part of an assessment. As said by one interviewee, "I think what we should do is incorporate the client's spirituality and

religious practice if they have any, so that should actually be like a question in our assessments or when we make first contact with clients" (Personal communication, Participant 3, February 2019).

Clients

The term 'client' was also commonly mentioned among respondents throughout the interview. This element is categorized under the content of 'people'. Due to its recurrent use, there appears to be a significance to the word 'client' throughout the interviews. The social workers interviewed appear to uphold some belief that clients themselves are the point of access in addressing S/R.

Trainings

Another commonality among the interviewees was the mention of trainings. Some respondents suggested that further trainings on the topic of S/R are needed for social workers. Some of the interviewees stated that they have attended some trainings that resulted beneficial, while others reported that their current place of employment does not offer the opportunity. One respondent stated, "My job does offer cultural trainings but not about specific religions" (Personal Communication, Participant 7, February 2019).

Table 1. Participant's Demographics

DEMOGRAPHICS

Age: 25-30, 25-30, 41-50, 41-50, 41-50, 51-60, 60 or above, 60 or above

Gender: Male, female, female, female, female, female, female, female

Ethnicity: White, White, White, Hispanic, Hispanic, Hispanic, Hispanic, Hispanic

Degree: MSW, MSW, MSW, MSW, LCSW, LCSW, LCSW, LCSW

Area of Practice:
Mental health, child welfare, school-based setting, medical field, high risk children/youth/families, mild/severe mental disorders, substance abuse, trauma, forensic, macro

Affiliation with a Faith-Based Organization:
No, no, no, no, yes, yes, yes, yes

Table 2. Theme: Items-Concrete

CONTENT

- Bible

- Hijab

- Book

- Book called "The Five Languages of Love"

Table 3. Theme: Items-Abstract

CONTENT

- Treatment planning

- Culture/ethnicity/beliefs/faith

- Bio-psychosocial-spiritual assessments

- Suicide assessments

- Theology

- Interventions

- Therapy

- Consultation

- Theory

Table 4. Theme: Places

CONTENT
• Government and county
• DBH, SB County, County of Riverside
• Prison and state hospital
• APU, Loma Linda, Catholic University, Seventh Day Adventist School, Berkeley, USC
• Trainings, panels, mental health panels
• mental health agencies, agencies
• Southern CA
• Church
• Library
• Administration

Table 5. Theme: People

CONTENT
• Baptist/Jehovah Witness/Islam/Christian/Catholic
• Jesus, God, Savior, Lord
• Women, girl, teenager
• Mom, uncle, grandparents, parents
• Pastors, youth leaders
• Doctorate
• Colleague, coworker, friends
• Interns, students
• Therapist/clinician
• "devil worshiper"
• Clients, families
• Social worker
• Supervisors
• Fellowship with members of the church
• Professors
• Christian author
• Trump
• Theologian
• Marriage counseling

Table 6. Theme: Ideas

CONTENT

(Personal Communication, Participant 1, February 2019)

- "…I think just having a little bit more training and a little bit more exposure would really help us feel more comfortable."

- "I've gotten to the point where I'm okay having my own form of spirituality and being okay with that and be content with that but also helping other clients or helping clients with how they feel about it."

(Personal Communication, Participant 2, February 2019)

- "There was actually other times in my education, graduate education, where I was discouraged to talk about it in any of my, you know, my papers; so, I appreciate the fact that it was in some of the literature."

- "Sometimes I feel like my faith is part of what gives me some of the elements in my skills, you know, my empathy, my insight…"

- "…I think, because it is a positive thing for me, I'm really supportive and encouraged that for my clients."

(Personal Communication, Participant 3, February 2019)

- "…I did develop that perspective I just gave you based upon some of my education, but it wasn't necessarily a big portion of it."

Content

- "…I feel like this kind of place that I'm in has allowed me to be open to a lot of different clients too, because they, I find that there's a lot of people who are in a similar space."

- "…spirituality and religious practices can be complex for some people and it It's not black and white…"

(Personal Communication, Participant 4, February 2019)

- "I mean there was like a slight diversity class, but just touched upon."

(Personal Communication, Participant 5, January 2019)

- "I see it as it can be a strength, it can be a source of support in the community, it can be part of individuals recovery is to incorporate you know something larger than themselves, something outside themselves that whole idea…"

- "…we shouldn't push it or assume that it's necessarily a strength or a positive but we also shouldn't assume, like I shouldn't assume because my own experiences that it's a bad thing. It's really finding out what it means to the client."

(Personal Communication, Participant 6, February 2019)

- "…And I like to utilize it as if it's important to the person. I think it's been valuable to do that. I have a client recently whose religion was something I knew absolutely nothing about. But I was able to engage

Content

and assess how important it was in her life, and then kept bringing her

back to whether that was something that could be considered as a

strength that she could utilize in a positive way."

(Personal Communication, Participant 7, February 2019)

- "…we can't like judge them or say anything bad about whatever they

  believe we just kind of have to put ourselves aside and be open minded

  to what they believe…"

- "In the beginning it is hard because you want to help other people and

  pray but you can't really do that unless like those people ask for like

  advice and you kind of help them personally. But of course, not

  written…"

(Personal Communication, Participant 8, February 2019)

- "Very minimum. Actually, that I can remember, may three times during

  my master's degree…"

- "…I was working with client, who was going through depression and I

  asked her if she believes in God because I want to introduce the

  spiritual part. She reported that she doesn't, so I stopped."

CHAPTER FIVE

DISCUSSION

Introduction

With the emerging themes that were identified, this chapter will further discuss the significant findings from each category: items, people, places, and ideas. A proposed meaning of each component will be presented along with direct quotations from the respondents for clarity. This section will focus on themes selected from the tables which correspond to one of the categories as mentioned above: ideas, assessments, clients, and trainings. The ideas presented have been compiled into four topics: absence of education and training of S/R in schools of social work, social workers' own disposition impacting their practice, significance of S/R to some individuals, and promoting clients' self-determination.

The Absence of Spirituality and Religion in Schools of Social Work

The purpose of schools of social work is to educate and form a foundation for individuals seeking to become competent social workers. Ethically, social workers are expected to pursue cultural competency. Noting that some individual's S/R is part of their culture, it would be beneficial for social workers to have education on S/R throughout their time as students to gain knowledge on the topic prior to entering their intended fields of practice. The absence of

education might suggest that schools of social work may not entirely view the value and importance of S/R in social work practice.

If schools are not including S/R as a part of the curriculum, then they might be implicitly averting students from the topic. This may propose that the social work profession has already determined that S/R is not relevant to the field. This determination can have several implications for current and future students as it can leave them ambivalent to the topic of S/R. Their ambivalence leaves them having to search for knowledge and training on the topic from other avenues aside from their professional educational programs. As one interviewee put it, "I think just having a little bit more training and a little bit more exposure would really help us feel more comfortable" (Personal Communication, Participant 1, February 2019).

This theme also appears to imply that there are too few faculties that have expertise to be able teach the subject of S/R. It suggests that MSW graduates and licensed practitioners do not have the adequate preparation to integrate this topic. Social work educators might have negative feelings against S/R, triggering them to refrain from bringing up the topic. One can imply that social work educational programs are simply not hiring professional educators that are knowledgeable in teaching social work students about the use of religion and/or spirituality in their work with clients. Engaging in this topic has the potential to advance students' cultural awareness and social diversity. Therefore, this can be an opportunity for schools of social work and CSWE to seek different avenues for

social workers to be able to receive the required education on this important element of clients' lives.

The absence of education on S/R implies that there is a lack of use of a client-centered approach in practice. Per the core values of social work, practitioner's primary mission is to promote human well-being and pay particular attention to the needs of individuals. This leads to question whether the lack of S/R is due to the social workers' self-interest or bias as opposed to the clients' needs. The lack of training appears to lead practitioners to ignore a significant element of individuals' lives, specifically to those who have positive attitudes concerning S/R. However, social work practitioners are accountable to meet clients where they are.

The data gathered related to the lack of education and training on S/R might suggest that social workers are not utilizing S/R appropriately. That is to say, social workers' competence to assess and discuss this topic is limited and/or absent. The misuse of S/R in practice has the potential to create client tension if the social worker has inadequate knowledge on the topic or does not know how to appropriately address the topic. Applying S/R wrongly would not be supporting the professional mission of endorsing cultural competence. This implies that social workers must have the education and/or training needed to be able to recognize and utilize clients' values regarding S/R properly throughout the helping process.

Social Workers' Own Disposition Impacts their Practice

Based on the participants' common responses, one can infer that practitioners' self-acceptance of their own S/R is essential. The theme of social workers' own disposition on S/R and how it impacts their practice might imply that social workers do not only need an understanding of their own S/R but must also be able to separate their beliefs with the beliefs of their clients. Some respondents from this study reported that they are self-aware of not projecting their own beliefs onto their clients; rather, they seek to understand their clients' own journey with S/R and explore further if it is identified as important in their life. Some of the respondents appeared surprised after they were asked about the question concerning their own S/R. Based on the respondents' reactions, it appears that the topic of religion is flammable in nature.

This may also suggest that clinicians have deep insight into the curative nature of S/R and understand how that might be helpful to some clients. Social workers' own disposition of S/R might enable them to utilize diverse modalities and approaches due to their openness of incorporating clients' beliefs. Per literature and data gathered, the worker-client relationship enhances the treatment process. This theme appears to imply that there is a difference among social workers who have life experience with their own beliefs as opposed to those who solely gain knowledge through literature and education. Therefore, social workers who have personal life experience concerning S/R are likely to fully immerse and engage with their clients.

Social workers also seem to act as a quite advocate due to their own prior disposition. Practitioners who have had previous positive encounters with their own religious beliefs appear to believe that it can also be something positive for their clients as well. As stated by one of the respondents, "I sort of feel that it supports me in my own life. And so I know that can be true for my clients as well. Therefore, it's very powerful in terms of helping them with their stability, and during times when they're going through some difficult things" (Personal Communication, Participant 2, February 2019). This suggest that a workers' own beliefs may serve as a tool to promote this potential empowerment source for their client.

Spirituality and Religion is Significant to Some Individuals

Disregarding the topic of S/R may instill a lack of confidence on the practitioner from the client. When a worker engages a new client, their attempt is to build rapport and a form a trusting relationship upon their first few encounters. Throughout the assessment process, the social worker is gathering all relevant information pertaining to the client's life. If the worker bypasses what might be a crucial element of an individual's life, then the clients' treatment plan may not be fully representative of their values and beliefs; which in turn may lead to a lack of interest or motivation. A lack of communication about significant aspects of a clients' life can affect the therapeutic relationship as stated by one social worker in this study, "...realize like how that can help benefit the therapeutic relationship

and how it can help their benefit them achieving their goals" (Personal

Communication, Participant 1, 2019). This might imply that if a social worker

does not cover the topic of S/R, it may have the potential to create a barrier

among themselves and their clients.

This theme also appears to imply that practitioners may not be

acknowledging other dimensions of a client's life. In order for a social worker to

effectively establish the morals of the profession, workers must identify all

dimensions of a client. An assessment that does not include the question of S/R

may implicit that the assessment may not be fully gathering an individual's

multidimensional information. One can imply that the practitioner may be failing

to address other questions in the assessment (i.e. trauma, support systems,

history or current substance use, etc.). Consequently, the worker is left with

limited information regarding the client on the assessment.

<center>Promoting Client's Self-Determination</center>

Based on the participants responses on their own personal beliefs

regarding S/R, it might also imply that a social worker must acquire an acute

sense of awareness to help restrain from wanting to address S/R as something

that they believe has the potential to be beneficial to their client. If a client states

that S/R is not significant to them, then the social worker must have a sense of

respect to no longer proceed on that subject. For that reason, social workers

should take practical steps to ensure clients make their own decisions without the

<center>38</center>

workers personal influence as stated by one participant, "And while in practice, I'm really focused on the clients journey and not my own" (Personal Communication, Participant 2, February 2019). A worker's self-awareness is imperative to prevent their own biases from creating barriers in the helping-process.

Most of the participants reported that they focus on their clients' journey with S/R and let them decide whether or not it is important to them. This then might imply that promoting clients' self-determination allows the social worker to view the client through a person-centered and holistic approach. Utilizing this approach enables the client to discover their own resolutions to their identified problems without the worker attempting to redirect the client in anyway. Hence, allowing the client to be the expert of their life as exemplified by one of the interviewees, "If they have found it helpful or something that they want to incorporate or has helped them in the past, then I try to draw it in as a support for them and strength (Personal communication, Participant 5, January 2019)." This further confirms that the practitioner should permit clients' own experience be the most imperative factor throughout the helping-process. The role of the social worker is to primarily to accept and support the client rather then pass judgment. This suggests that a social must ask about S/R in the assessment process and a lack in doing so may mean that they are not utilizing a true holistic approach.

Assessments

The interviewees that spoke about assessments alluded to the idea that the question itself is logical to include as a part of the assessment. Therefore, in order for a social worker to know if their client affiliates with any faith-based organizations, then the question must be asked. As mentioned in the literature review, 49% of adults in California identify as being religious. This infers that there is a high probability that social workers will encounter religious clients throughout their careers (Lipka & Wormald, 2016). Per literature on the use of S/R by social workers including the literature used in this study, it is evident that S/R is significant and has the potential to be beneficial for many individuals. With religion being prevalent in California and throughout literature, one can imply that having an assessment that includes the topic of S/R is current with today's society and consistent with current literature review.

If the question regarding a clients' potential religious affiliation is not incorporated in the assessment, then this theme may also suggest that the agencies themselves may be restrictive towards the topic of S/R. Thus, agencies may serve as barriers towards implementing S/R as it pertains to the assessment process. One might implicit that this is a systemic issue that may need to be addressed prior to exploring social workers' own perspectives on this topic. By viewing this issue from a macro level standpoint, social workers may then become well-equipped to integrate spirituality and religion in practice once addressed as a systemic issue.

The topic of S/R is, often times, a subject that many individuals avoid or are reluctant to touch upon. A majority of the interviewees disclosed their approach in asking clients about their religion. They appeared to be self-aware to assure that no judgement is perceived when inquiring about their clients' religious preferences. One interviewee alluded to this by stating the following, "One thing I've noticed is if a client is feeling perhaps guilty or spirituality has been very important to them in the past and isn't any more, sometimes clients can get guarded about the questions because it kind of pulls on a certain string" (Personal Communication, Participant 1, February 2019). This suggests that the approach the social worker takes in asking the question may have an effect on their clients' response. Therefore, a guilt free assessment is needed for clients to feel comfortable disclosing their personal beliefs.

Clients

This theme might suggest that the client is the driver throughout the treatment process rather than the social worker. If social workers empower their clients and create a safe environment for them; subsequently, their clients will feel comfortable in leading their discussion. This gives the impression that there is a need for social workers to promote clients' self-determination in discussing their personal beliefs. The practitioners, therefore, should allow their clients to define S/R in their own words as it pertains to them. Fostering clients to define S/R grants them permission to be the focus of the treatment. As one respondent

stated, "...whatever the client defines it as and really using it as a sense of support and a sense of strength" (Personal Communication, Participant 5, January 2019). This gives the impression that a core tenet of the term 'client' is enabling clients to discover their answers and resolutions that they are seeking. The benefit of allowing clients to establish their definition to this element is the opportunity for their self-efficacy to advance.

This may imply if the client is the expert of their own S/R, then they should have the right to self-interpret as they wish. Consequently, permitting the client's wishes to be respected while promoting their autonomy. Viewing the client as the expert of their own religious beliefs entitles them to predict prospective outcomes of the treatment; thus, client's perspective is vital in accepting and promoting. Though the worker is not the facilitator, they should yet demonstrate unconditional positive regard. Valuing the client as the skilled person of their life appears to enhance the client's engagement in the process. While doing so, the social worker is acting in the best interest of the client, which follows the profession's ethical standards.

Trainings

This theme appears to imply that there is lack of training on S/R at the worker's employment. The absence of training gives the impression that agencies may not acknowledge the value of S/R in social work practice. As a

result, practitioners may not feel competent in addressing and discussing clients' beliefs.

However, based on the prior theme concerning clients and the notion that they are the experts, it might imply that social workers may only need to be familiar with different religions. Therefore, only minimal training may be necessary. As noted in the element categorized under the content of people, clients are the experts of their religious beliefs. This was mentioned in the following response, "I think the biggest challenge to me is like, I like feel like I kind of need to know what I'm talking about when I'm in session...I felt like I needed to know a lot about the person. But then I realized I just need to guide them on how to use them for themselves and letting them explain to me" (Personal Communication, Participant 6, February 2019). The definition of S/R is subjective to all clients which infers that it might not be significant for social workers to have expertise in this area, rather allow their clients to enrich their knowledge on that particular religion. Therefore, it would not be vital for practitioners to be the experts of their client's religious beliefs, as that role would correspond to the client.

With the notion of the client being the expert and educator on their own beliefs, this issue may be easier to address than one may think. Based on the research gathered, it is evident that social workers education, their own disposition, its significance to clients, and clients' self-determination are components that are essential to this topic. However, the issue may lie within the

question itself. The responses from the interviewees all suggest that once the question is asked, then the client is responsible in leading the direction of the topic. The clients are responsible for determining whether or not S/R is significant; educating the social worker on their beliefs; and sharing how it may impact their lives. Once this is addressed, the responsibility lies back on the social worker to effectively implement S/R for the benefit of the client. Although trainings and education are important in formulating interventions to appropriately utilize S/R in practice, social workers may have to modify their conceptualization of being the expert on S/R. Once social workers realize that they are not the expert, then they can feel more at ease in addressing S/R with clients.

Recommendations for Social Work Practice, Policy, and Research

Practice

Per the researchers' findings in their study, social workers should promote client's self-determination throughout the treatment process. While doing so, practitioners are exploring their client's belief systems and are allowing their clients to self-define spirituality and religion. Practitioners must be self-aware and mindful that S/R may be an important aspect in their client's life. Social workers, therefore, do not require to be biblical or theological scholars nor be spiritual or religious to effectively treat their clients. As mentioned in the research, clients are the experts of their own life and have the right to self-interpret the meaning of spiritual terms as they wish. The role of the social worker is to oblige to the

ethical standards of the profession, as a result they are developing their personal professional development.

Policy

Based on the findings regarding the lack of educational implementation on the topic of S/R and its noted significance to many individuals, one recommendation for policy would be to include the topic of religion and spirituality to formal social work educational programs. Through efforts by NASW and CSWE, religion and spirituality can be a standardized area of practice throughout all schools of social work. The NASW (2017) and CSWE acknowledge the importance of the profession of social work to promote and embrace cultural competence in practice with their clients. An individual's cultural is inclusive of their religious and spiritual beliefs, so if social workers disregard this aspect of a client's life then they are not truly upholding social work values and it may have an impact on the social workers' effectiveness.

Research

This study attempted to identify factors that may be hindering social workers from discussing and implementing S/R with clients. In doing so, researchers interviewed eight social workers currently practicing in their respected fields. However, future research should be conducted on this topic to highlight the significance of addressing and including the topic of S/R with clients

so that it can become standard practice in the field of social work. Although the study conducted is not generalizable due to its limited participants, its findings are still significant because it illustrates the need for social workers to discuss this topic. Therefore, future research should seek to interview an array of participants which cover a larger geographical area.

Another recommendation for further research on this topic is having the interviews conducted in-person rather than via telephone. Half of the interviews conducted in this study were via telephone, and so researchers were unable to observe participants' verbal and nonverbal expressions during their responses as they had proposed earlier in the research. Future research should also include practitioners' years of experience in practice as part of the demographic questionnaire. The researchers believe that the number of years in practice may have an influence on the participants' responses. Consequently, social workers' responses to the questions may differ.

Based on the findings from this study, future research with a focus on this topic on a macro level may be something that should be looked into. Due to the question of S/R not being included as part of the assessment, responses suggested that the agency where a social worker practices can serve as a barrier in addressing S/R. Therefore, future research can further explore this issue by interviewing those in administration who have an influence on the agencies policies.

Conclusion

The inclusion of spirituality and religion in social work practice can be significant to many individuals. Evidenced-based literature and data has supported the notion that social workers may have resistance towards addressing religion with their clients. This study sought to identify the factors that may be causing this resistance. This study supports existing literature which identified lack of education and training as two factors that influence social workers' contentment on discussing the topic of S/R with clients. The results of this study also suggested that social workers' journey with their own spirituality may have an impact on their comfort level in addressing S/R. In turn, practitioners are aware of the potential benefits that S/R may have on some individuals. In becoming comfortable with asking clients about their personal spiritual beliefs, social workers encourage the client's autonomy by allowing them to be the expert of their own beliefs and determine if it is significant in their lives, consequently alleviating the social worker from the role as an expert on this topic. Social workers must give their clients the opportunity to determine the importance of S/R and should not shy away from discussing this topic during the assessment. A client's belief system can be an empowering coping mechanism, serve as a source of motivation, and can provide them with a sense of belonging in the midst of life adversities. The advantages of discussing S/R with clients is evident; and therefore, S/R should be addressed and accepted in social work practice.

APENDIX A:

EMAIL SOLICITATION

The researchers utilized the following format to solicitate participants for this study:

"Good morning [Potential Interviewee Name],

Our name is Jessica Chavez and Nancy Ramos, MSW Students at California State University of San Bernardino. We are currently working on our research project that has been approved by the Institutional Review Board. In order to conduct our study, my partner and I will be coordinating one-on-one interviews with our participants. Participation in this study is completely voluntary and confidential.

We believe you are a fine candidate to participant in our study because of your social work title and unique experience. We recognize that you are extremely busy, but we would greatly appreciate your participation.

Our research project question is the following: What factors impact social workers resistance towards discussing issues of spirituality and religion with their clients?

Please advise as soon as possible if you are willing to partake in this study. We thank you in advance for your time and consideration."

APENDIX B:

DEMOGRAPHIC SURVEY AND INTERVIEW GUIDE

Demographic Survey

1. Which category below includes your age?

      A. 25-30

      B. 31-40

      C. 41-50

      D. 51-60

      E. 60 or above

2. What is your gender?

      A. Male

      B. Female

      C. Other _____

3. What ethnicity do you relate to?

      A. White/Caucasian

      B. African American

      C. Hispanic/Latino

      D. Asian

      E. Native American

      F. Other _____

4. What is the highest degree you have obtained? *(Circle all that apply)*

      A. MSW

      B. LCSW

      C. Ph.D.

5. Do you affiliate with any faith-based organizations; however, you understand those?

Interview Guide

6. What is your understanding of low utilization of spirituality and religion in social work practice?

7. How well did your education from your social work program prepare you in addressing spirituality and religion with clients?

8. How comfortable do you feel discussing spirituality and religion in practice?

9. Can you share your experience with asking clients about spirituality and religion during the initial assessment and throughout the helping-process?

10. What is your personal experience with your own spirituality?

11. Have any challenges or barriers emerged while discussing spirituality and religion with your clients?

12. What factors have helped or hindered in preparing you to include client's spirituality and religion in treatment?

APENDIX C:

INFORMED CONSENT

Academic Affairs
College of Social and Behavioral Sciences
School of Social Work

CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO
5500 University Parkway, San Bernardino, CA 92407

909.537.5501 | fax: 909.537.7029
https://csbs.csusb.edu/social-work

INFORMED CONSENT

You are invited to join in this research that is seeking to identify factors that may be hindering social workers from implementing spirituality and religion with clients in practice. This study is being conducted by Nancy Ramos and Jessica Chavez, Masters in Social Work graduate students, under the supervision of Dr. Thomas Davis, Professor in the School of Social Work at California State University, San Bernardino (CSUSB). This study has been approved by the Institutional Review Board Social Work Sub-committee at CSUSB.

PURPOSE: The purpose of this study is to identify factors that are hindering social workers from implementing spirituality and religion in practice.

DESCRIPTION: Participants will be asked a few questions regarding implementation of spirituality and religion in practice. As well as participant's personal experience with spirituality and religion.

PARTICIPATION: Your participation in the study is completely voluntary. You may refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALLY: The study will have no identifying information and your responses will remain confidential.

DURATION: The estimated timeframe of conducting the interviews will be approximately 20 minutes.

RISKS: There are no anticipated risk concerns in this study.

BENEFITS: There will not be any direct benefits to the participants

CONTACT: If you have any questions about this study, please feel free to contact Dr. Davis at (909) 537-3839.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2019.

****

I agree to be audio recorded: _____ YES _____ NO

This is to certify that I read the above and I am 18 years or older.

California State University, San Bernardino
Social Work Institutional Review Board Sub-Committee
APPROVED_ / 23/2019 VOID AFTER_ / 22/2020
IRB#_ SW1933_ CHAIR

_____   _____
Place an X mark here   Date

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ASSIGNED RESPONSIBILTIES

This was a two-person project where authors collaborated throughout. However,

for each phase of the project, certain authors took primary responsibility. These

responsibilities were assigned in the manner listed below.

1. Data Collection:

     Joint Effort by Nancy Ramos and Jessica Chavez

2. Data Entry and Analysis:

     Joint Effort by Nancy Ramos and Jessica Chavez

3. Writing Report and Presentation of Findings:

     a. Introduction and Literature

          Joint Effort by Nancy Ramos and Jessica Chavez

     b. Methods

          Joint Effort by Nancy Ramos and Jessica Chavez

     c. Results

          Joint Effort by Nancy Ramos and Jessica Chavez

     d. Discussion

          Joint Effort by Nancy Ramos and Jessica Chavez

     n for references.