SURVEY OF BRITISH ASSOCIATION OF SOCIAL WORK MEMBERS AND THEIR USE OF RELIGION AND SPIRITUALITY IN DIRECT PRACTICE

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INTRODUCTION

"Everyone is influenced by religion and religious practices whether they are believers, agnostics or atheists. Social service users are no exception. Yet religious cultural practices, group and individual spirituality, religious divisions and religion as therapy have had no place in social work education and practice even though social work has its origins in religious philanthropy. Ever the invisible presence in modern social work, its place should be recognized and taken into account in the work of the profession" (Patel, Naik, & Humphries, 1998, p ii).

Interest in spiritual and religious matters has come to the fore due to the implications of the Children Act of 1989 which includes religious persuasion along with racial origin and cultural and linguistic background in the placement considerations of every child in foster care or adoption services (Patel et al 1998, Seden 1995). Legal mandates are also found to include religion in the NHS and Community Care Act (1990) and the Criminal Justice Act (1991).

Unfortunately, as earlier studies also indicated, this study showed that only 23% received content on spirituality or religion in their social work education. Nearly 57% (n=448) felt that social workers in general do not possess the skill to assist clients in religious/spiritual matters. Another 57% (n=448) also felt that social workers should become more knowledgeable about spiritual matters. These results are significant, especially in light of the fact that social workers in the UK were split concerning whether social work with a spiritual component could empower clients (38% n=297 felt that it could, 30% n=240 felt that it could not, and 31% n=242 were neutral on the subject) (Hunter 1998).

In 1998, the Central Council for Education and Training in Social Work sponsored the conference "Faith, Communities and Social Work" to emphasize the European Year against Racism, Xenophobia, and Anti-Semitism. The key points of this conference concentrated on the need for information and awareness regarding different faiths and cultural values in student training and in practice. Social work education and continued training should support students from different faith stances, help clarify a social worker's own values, and provide training to avoid assumptions and generalizations regarding religious/spiritual beliefs and diverse cultures (Patel & Amin 1998).

The need for this kind of training is crucial in the United Kingdom due to the multiracial nature of British society and its inherent cultural and spiritual diversity (Patel & Amin 1998). Dealing with cultural and spiritual/religious differences in the public domain can provoke tensions between social worker and client and sometimes between social worker and whole communities. The complex nature of this issue is only now beginning to unfold and it will take time to analyze and draft new strategies for training social workers.

Consequently, during the spring of 2000, a survey of social workers in the United Kingdom regarding religion and spirituality in social work practice was undertaken.   This study was based on a 1997 companion study in the US of National Social Work (NASW) members in direct practice (Canda & Furman 1999). Both studies attempted to better understand the extent to which practicing social workers incorporate religion and spirituality in their practice and to explore their views of the appropriateness of religion and spirituality in social work practice.   It is hoped that the results would further enhance training in social work education and practice regarding religion and spirituality.

DEFINITION OF TERMS

To clarify definitional issues for respondents, the questionnaire began with operational definitions of what was meant by spirituality and religion.   Specifically, *Religion* was defined as "an organized structured set of beliefs and practices shared by a community related to spirituality," whereas *Spirituality* was defined as "involving the search for meaning, purpose, and morally fulfilling relationship with self, other people, the encompassing universe, and ultimate reality, however a person understands it." It was explained that spirituality can be "expressed through religious forms, but is not limited to them."   Furthermore, the respondents were informed that some questions addressed spirituality in both religious and non-religious forms.   When all forms of spirituality were intended, both spirituality and religion were used in the question.

SURVEY INSTRUMENT

The survey instrument was developed in the United States for a 1997 national survey of social workers who were members of the National Association of Social Workers and who were in direct practice.

The questionnaire was shortened and adapted for use in the United Kingdom. It consisted of 63 items that included demographic, education, and practice information.   Items concerning past and current religious or spiritual affiliation and/or involvement were used.   A scale separating religion from spirituality was also employed to assess practicing social workers' agreement with raising the topic of religion and spirituality for differing client needs. In addition, there were items exploring conflicts between religion and spirituality with the social work

mission and the British Code of Ethics.

Finally, items regarding forgiveness and referral to clergy were included.

METHODOLOGY

A stratified-random sample of 5,500 practicing social workers was selected from the 11,000 member mailing list for the British Association of Social Workers (BASW) Newsletter. Surveys were included in every other BASW Newsletter.   This survey population reflected half of the 8,000 BASW members and half of 3,000 others who subscribed to the newsletter.   From this number, 802 responded to the questionnaire, and only 13 were not BASW members.   For the purpose of collecting data from BASW members only, these 13 were eliminated before statistics were calculated.

The service area of British Association of Social Workers spanned four countries: England, Scotland, Wales, and Northern Ireland.   Of the 4,000 BASW member questionnaires mailed, 789 were returned, representing a 20% overall response rate. (See Table 1)

Table 1.   Regional Survey Response Rates

Region	Returned	Total Mailed	Response Rate (%)	Total Returned (%)
England	638	3135	20	81
Scotland	63	462	14	8
Wales	49	194	25	6
Northern Ireland	20	195	10	3
Multiple Regions	8	---	---	1
Region Unidentified	11	---	---	1
Total	**789**	**3986**	**20**	**100.0**

FINDINGS

Sample Characteristics

Comparison of this survey findings with recent   BASW member demographics was only compiled for gender   This 2000 survey closely reflects the gender demographics for the 1998 BASW membership. Respondents were 69.7% female and 29.8% male; 1998 BASW members were 69% female and 31% male.   The age range for this survey was 21 to 85 years old, with the average age of the respondents as 49 years.

See Table 2 below for additional sample characteristics.   Table 3 reports the spiritual and religious orientations of the respondents.

Table 2. Sample Characteristics

Demographic Indicator	Category	Frequency	Percentage (%)
Gender	Female	550	70
	Male	235	30
	Not Reported	4	<1
Race/Ethnicity	African	5	<1
	Chinese	1	<1
	Indian	5	<1
	European (UK)	577	73
	Pakistani	2	<1
	Caribbean	5	<1
	European (Other)	146	19
	Other (White & Black)	38	5
	Not Reported	10	1
Areas of Practice	Child/Family Welfare	370	47
	Hospital Social Work	108	14
(Respondents were asked	Mental Health	223	28
to select as many practice	Day Care	57	7
areas as appropriate)	Fieldwork	184	23
	Residential Work	83	11
	Learning Difficulties	162	21
	Elderly	170	22
	Physical Disability	166	21
Primary Work Setting	Statutory	584	74
	Voluntary	106	13
	Private	47	6
	Multiple Settings	18	2
	Other	3	<1
	Not Reported	31	4
Location of Practice	Rural	162	21
	Suburban	143	18
	Urban	383	49
	Multiple Locations	60	8
	Not Reported	41	5
Employment Level	Full Time	520	66
	Part Time	201	26
	Both	4	<1
	Not Reported	64	8
Highest Level of Education	GCSE or equivalent	55	7
Held by Respondent	Advanced level or equivalent	133	17
	Degree	190	24
	Post Graduate Qualification	398	50
	Not Reported	13	2

Table 3 Spiritual Orientations of Social Workers (mutually exclusive categories)

	Affiliation/Orientation	Frequency (n=789)	Percentage (%)
Singular Religious Affiliations and Orientations	Christian Catholic	80	10
	Christian Protestant	261	33
	Christian Non-denominational	46	6
	Christian Unspecified	57	7
	Subtotal (Christian)	**444**	**56**
	Jewish Liberal	3	<1
	Jewish Orthodox	3	<1
	Jewish Reform	5	<1
	Subtotal (Jewish)	**11**	**1**
	Buddhism	11	1
	Hinduism	1	<1
	Muslim	5	<1
	Goddess Religion	1	<1
	Spiritism/Shamanism	5	<1
	Other	27	3
	TOTAL RELIGIOUS	**505**	**64**
Singular Non-Religious Affiliations and Orientations	Jewish Non-affiliated	3	<1
	Agnosticism	59	8
	Atheism	51	7
	Existentialism	10	1
	TOTAL NON-RELIGIOUS	**123**	**16**
	TOTAL SINGULAR RELIGIOUS AND NON-RELIGIOUS AFFILIATIONS	**628**	**80**
No Affiliation / Orientation or Not Reported	No Affiliation/Orientation	73	9
	Not reported	9	1
	GRAND TOTAL SINGULAR ORIENTATIONS	**710**	**90**
Multiple Religious Affiliation / Orientation	Any religious orientation in combination with any other religious orientation (e.g. Christian and Buddhist)	42	5
Multiple Non-Religious Affiliation / Orientation	Any combination of atheist, agnostic, existentialist, and Non-affiliated Jewish)	37	5
	GRAND TOTAL MULTIPLE ORIENTATIONS	**79**	**10**
	GRAND TOTAL SINGULAR AND MULTIPLE ORIENTATIONS	**789**	**100**

Practice Issues

It is no longer a matter of whether the social work profession should address the topic of religion and spirituality.   It is already happening.   The question now is how we can address religion and spirituality in a manner consistent with professional values and purposes. This dilemma was explored in depth in 22 questions concerning the appropriateness of social workers raising the topic of religion or spirituality with clients dealing with issues such as bereavement, substance abuse, sexual abuse, etc. BASW social workers in our study believed that it is appropriate to raise the topic of spirituality in a nonsectarian manner with clients only regarding terminal illness, substance abuse, foster parents, those suffering a natural disaster, and with the bereaved.   The introduction of religion with specific practice issues was even more limited. Terminal illness, foster parents, and the bereaved were the only practice issues with over 50% of respondents agreeing that these were appropriate topics.

With the exception of issues related to foster parents, fewer respondents believed it was appropriate to raise the subject of religion rather than spirituality in any practice area. These findings indicate that many social workers recognize the importance of spirituality and religion while also making a distinction in applying them to practice.

Unfortunately, as earlier studies also indicated, this study showed that only 23% received content on spirituality or religion in their social work education. Nearly 57% (n=448) felt that social workers in general do not possess the skill to assist clients in religious/spiritual matters. Another 57% (n=448) also felt that social workers should become more knowledgeable about spiritual matters. These results are significant, especially in light of the fact that social workers in the UK were split concerning whether social work with a spiritual component could empower clients (38% n=297 felt that it could, 30% n=240 felt that it could not, and 31% n=242 were neutral on the subject).

Table 4 Appropriate to Raise Topic of Religion/Spirituality by Client Issue

It is appropriate for a social worker to raise the topic of . . . when dealing with a client . . .	*Religion*			Spirituality		
	% Agree	**Mean**	**SD**	**% Agree**	**Mean**	**SD**
Who has a *terminal illness*.	66	3.63	1.11	76	3.91	1.09
Who has a *substance abuse disorder*.	18	2.66	1.01	40	3.13	1.11
Who is preparing to become a *foster parent*.	73	3.82	1.10	68	3.73	1.12
Who is recovering from *sexual abuse*.	23	2.76	1.04	42	3.16	1.12
Who is or has experienced *partner violence*.	20	2.70	1.03	39	3.09	1.12
Who is suffering the effects of a *natural disaster* (i.e. flood) or *catastrophe* (i.e. airline/train crash)	44	3.18	1.11	55	3.39	1.12
Who is bereaved.	67	3.64	1.08	74	3.81	1.06
Who is suffering from a chronic *mental disorder*.	19	2.64	1.05	33	2.96	1.12
Who is suffering from a *loss of job*.	16	2.62	1.01	32	2.96	1.09
Who is experiencing *difficulty in family relations*.	22	2.76	1.02	38	3.09	1.10
Who is involved in the *criminal justice system*.	19	2.66	1.03	29	2.93	1.08

Note: Percentages, means, and standard deviations are based on valid responses. Missing cases are excluded.

Ethical Guidelines for Using Spiritually Based Activities

The survey identified a wide range of spiritually oriented helping practices employed by social workers. These interventions are listed in order of decreasing probability of use and are found in Table 5.

Table 5.   Spiritually-Oriented Helping Activities

Helping Activity	Have Personally Done with Clients		Is an Appropriate Helping Activity (Intervention)	
	Frequency	**%**	**Frequency**	**%**
Help clients consider ways their religious/spiritual support systems are helpful.	592	75	654	83
Discuss the role of religious or spiritual beliefs in relation to significant other.	458	58	557	71
Use non-sectarian spiritual language or concepts	456	58	504	64
Help clients reflect on their belief about what happens after death.	446	57	557	71
Pray privately for a client.	357	45	359	46
Help clients consider ways their religious/spiritual support systems are harmful.	345	44	523	66
Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).	339	43	464	59
Meditate to prepare for clients	335	43	56	444
Help clients consider the spiritual meaning and purpose of his or her current life situation.	334	42	461	58
Recommend participation in a religious or spiritual support system or activity.	327	41	397	50
Use religious language or concepts.	314	40	362	46
Assist clients to reflect critically on religious or spiritual beliefs or practices.	310	39	435	55
Use or recommend religious or spiritual books or writings.	208	26	322	41
Participate in client's religious/spiritual rituals as a practice intervention.	157	20	269	34
Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.	129	16	354	45
Pray with a client.	105	13	205	26
Help clients assess the meaning of spiritual experiences that occur in dreams	98	12	197	25
Touch clients for "healing" purposes.	52	7	66	8

It is interesting to note that a higher percentage of respondents indicated it is appropriate to use a spiritually-oriented activity than those who actually did use it. For all but eight activities (pray with a client, pray for a client, touch for healing purposes, help assess client's dreams, encouraging journal keeping, participate in client's rituals, use religious language, and recommend religious/spiritual books), more than half of the respondents believed it is appropriate to use them.

Only four activities were used by more than 50% of the respondents. They were helping clients with beliefs about death, discussing religion/spirituality regarding significant others, using spiritual language, and helping a client find ways that their religion/spirituality is helpful. These activities were also deemed highly appropriate for social workers to use. These findings show that most social workers recognize the usefulness and ethical appropriateness of some spiritually-oriented practices and use them accordingly. The least approved practices are most directive and intimately involved with a client's personal life space and boundaries, so it is understandable that workers would be cautious about them. Our findings in the area of ethical guidelines reflect these concerns.

Religious and Spiritual Practices of Respondents

The more a person participated in religious community services as a child did not necessarily guarantee active participation in religious services as an adult. Seventy-five percent (n=594) of the respondents participated daily to once a week as a child but only 29% (n=229) participated as much as an adult. Nearly 40% (n=320) went to services once a year or less. However, private participation was keenly divided between daily to once a week (44.1% n=348) to those who participated once a year or less (30.4% n=240).

A majority of respondents also reported that they did not feel negative about their childhood religious (60% n=473) or spiritual (65% n=510) experiences nor did they feel negative about them today as adults for religious experiences (59% n=467) and for spiritual experiences 77% n=608). Even so, only 43% (n=340) reported some involvement with an organized religion or spiritual support group, with 20% (n=160) stating they had high involvement. Conversely, 30% (n=240) reported no involvement or a negative reaction to religion or spiritual tradition.

Referral of client to clergy or spiritual leader

Over 52% (n=415) of responding social workers had referred a client to a clergy person or other religious spiritual leader and 55% (n=432 and n=436) answered two questions regarding reasons for failure to refer clients. Of that 55%, however, 39% (n=308) felt that the social worker's lack of trust or confidence in religious/spiritual leaders prevented referrals while 30% (n=239) felt that differences in beliefs or values between social workers and religious/spiritual leaders prevented referrals.

Forgiveness Issues

Two questions were asked that dealt with forgiveness issues. Although only 36% (n=285) felt that it was an important part of social work practice to help clients with forgiveness issues, 45% (n=355) actually did use forgiveness techniques in sessions. This puzzling result calls for a reminder of the importance of assessment and matching a helping technique to the client's preference.

Intake Issues

It was clear that the social workers in this survey did not feel that informing clients about their own belief systems when establishing the helping relationship was important; 69.3% (n=547) disagreed that it was important.

When asked whether taking a client's religious history or a spiritual history should be part of intake and assessment, only 41.5% (n=327) of the social workers in the study agreed that a religious history should be taken and only 38.1% (n=300) believed that a spiritual history should be taken. This indicates that the respondents felt that taking religious or spiritual histories were not significant to a client's treatment plan.

BASW Code of Ethics

Although 76% (n=599) of the respondents felt that spirituality is a fundamental aspect of being human, only 46.8% (n=369) felt that integrating religion and spirituality in social work practice did not conflict with social work's mission and 45.3% (n=358) did not feel it interfered with the BASW Code of Ethics. It should be noted that 31.4% (n=248) of the respondents were neutral about conflicts with the social work mission and 36.5% (n=288) were neutral about conflicts with the BASW Code of Ethics.

Definition of Terms by Respondents

This survey also explored ways that social workers understand the three common terms: *spirituality*, *religion*, and *faith*. We initially offered our own definitions of spirituality and religion so that respondents would have common meanings of the terms in mind when completing the survey. At the conclusion of the questionnaire, we asked people to identify the descriptors (e.g. meaning, purpose, belief) that they relate to the terms *spirituality*, *religion*, and *faith*, aside from our definitions. Respondents clearly saw a close relationship between these terms, as nearly every descriptor had some overlap for some people. However, a clear pattern of distinction between the terms emerged by comparing the top six descriptors for each. (See Table 6.)

Table 6   Top Six Descriptors Selected in Each Category

Religion	%	Spirituality	%	Faith	%
Belief	85	Personal	78	Belief	87
Prayer	80	Meaning	77	Personal	60
Scripture	71	Values	75	Personal Relationship with Higher Power	55
Ritual	71	Belief	70	Meaning	52
Organization	67	Purpose	63	Purpose	46
Values	66	Meditation	57	Values	44

Note: The percentages represent those respondents who selected a descriptor associated with a given term.

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