Final Executive Report of the Project on

International Study of Religion and Spirituality in Social Work Practice

1997 - 2020

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CHAPTER ONE

Introduction

Edward R. Canda

Background of the Project on the International Study of Religion and Spirituality in Social Work Practice (ISRSSWP)

In 1997, we (Dr. Leola Dyrud Furman and I) conducted the first national survey of members of the US National Association of Social Workers in direct practice regarding their ideas about engagement with religion and spirituality in their professional work with clients (Canda & Furman, 1999). We replicated the study in 2008 (Canda & Furman, 2010). We also worked with colleagues to adapt and replicate the study in the United Kingdom [2000], Aotearoa New Zealand [2006], and in Norway twice [2002 and 2011]. Dr. Leola Furman has been the Principal Investigator throughout this project.

The purpose of our project was to better understand the extent to which practicing social workers incorporate religion and spirituality in their practice and to explore their views regarding the appropriateness of addressing religion and spirituality in social work practice and education. The national and cross-national research surveys expanded the knowledge base with empirical data regarding the global interface of spirituality and religion in social work. Executive Reports about the surveys in the four countries were originally presented in a website for the ISRSSWP, supervised and edited by Dr. Leola Furman. That website no longer exists and Dr. Furman and I are now retired. Therefore, in order to encourage additional research by others, we are making our survey instruments and Executive Reports available open access to any scholars who would like more information about the studies or who would like to use the survey instruments for their own studies.

Dr. Furman and I are especially grateful to Dr. Perry Benson who was our statistical and research methods consultant and co-author on the studies.[1] We also have great appreciation for all our collaborators in the participating countries who are listed as authors in the publications below. Their innovation and leadership for the surveys within their countries have been crucial to the success of this transnational research project.

The next section gives the wording for researchers to use when indicating our permission for using the survey instruments.

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[1] Dr. Benson is Teaching Assistant Professor at the University of North Dakota.

Permission to Use the Survey Instruments

We (Associate Professor Emerita Leola Furman and Professor Emeritus Edward Canda) give scholars permission to use, adapt, and translate the survey instruments developed by us on The Role of Religion and Spirituality in Social Work Practice under the following condition.

Anyone who uses our survey instruments must give acknowledgment in any oral or written presentations based on our survey instruments, using the following statement:

Thanks to Leola Dyrud Furman, PhD (Associate Professor Emerita, University of North Dakota) and Edward R. Canda, PhD (Professor Emeritus, University of Kansas) for permission to use, adapt, and translate their survey instrument on The Role of Religion and Spirituality in Social Work Practice. Drs. Furman and Canda thank Dr. Michael Sheridan for permitting them to build on her pioneering survey work in developing their survey instruments.

Note that our permission for use of our instruments and other information in this monograph is contingent on the creative commons copyright indicated on the title page for this monograph.

The survey instruments for the 2000 study in the UK and the second national study in the US and are included in Appendices One and Two.

The Executive Reports in this monograph are intended to provide convenient access to summarized preliminary information. See our book, Spiritual Diversity in Social Work Practice (Canda & Furman, 2nd edition, 2010 & Canda, Furman & Canda, 3rd edition 2020, published by Oxford University Press) and our previously published articles listed below for definitive information about the surveys' findings and methodology.

Publications for Further Information

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CHAPTER TWO

Executive Report for the 2000 Survey in the United Kingdom

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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CHAPTER THREE

Executive Report for the 2006 Survey in Aotearoa New Zealand

SURVEY OF AOTEAROA NEW ZEALAND SOCIAL WORKERS ON THE ROLE OF RELIGION AND SPIRITUALITY IN DIRECT PRACTICE

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INTRODUCTION

Currently Social Work is being challenged to consider the role of spirituality and religion in practice and education as the profession has witnessed an expanding interest in the integration of spirituality, motivated by the recognition of spiritual diversity as an important component of human experience, cultural competency and anti-racial social work practice.

In contemporary ANZ social work, attention to spirituality has been increasing due to refugee influx (Briggs, 2001); recognition of religious diversity in the ANZ social work Code of Ethics (ANZASW, 1997); and most significantly, in recognition of the importance of spirituality pervasive through life for the indigenous Maori and other Pacific Islands peoples (Barlow, 1996; Marsden, 1992; Nash, 2001 a & b & 2002). Social workers in New Zealand have a specific obligation to indigenous people to undertake culturally competent practice as a requirement of the 1840 Treaty of Waitangi (ANZASW, 1997).

Until very recently, however, interest in the integration of spirituality within social work practice and education has seldom been addressed in ANZ, with the exception of Maori and Pacific Island social workers who have made substantial efforts to integrate religion and spirituality in their practices (Autagavaia, 2001; Muliato-Lauta, 2000; Rawhiu & Rawhiu, 2005). There have been no published empirical studies on this subject in ANZ (Nash, 2002). Some discussions have occurred professionally and nationally within the ANZ Association of Social Workers (ANZASW). Two social work educational institutions offer modules on the topic and others address it in the context of cultural diversity and Maori world view. In response to this lack of research, workers were queried in 2006 to investigate the professional role of religion and spirituality in ANZ social work. The study replicated a survey of British Association of Social Workers (BASW) conducted in 2000 (Furman, Benson, Grimwood & Canda, 2004).

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 UK survey instrument, which was based on a US questionnaire (Canda &Furman, 1999), contained 82 fixed-choice items and one open-ended item that invited additional commentary on the subject of religion and spirituality.   Individual items that pertained exclusively to the US were removed and some were replaced by questions pertinent to the UK (Furman *et al.*, 2004). The original US survey instrument was comprised of 102 fixed choice items and three open-ended items that invited commentary on the inclusion of religion and spirituality in educational programs, and the appropriateness of religion and spirituality in direct practice.   Questions removed from the US survey instrument included items on the constitutional principle of the separation of church and state, the frequency which social workers worked with service users for whom religion and spirituality were either detrimental or helpful in problem solving, the use of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV), issues involving lack of trust and conflicting values between social workers and clergy, multiculturalism and the inclusion of religion and spirituality in subject areas offered in social work curricula, religious and spiritual ideological positions on the concepts of God and transcendent reality, and continuing education.   The ANZ survey instrument was adapted from the UK questionnaire and modified for specific cultural differences and demographic characteristics (e.g., race/ethnicity; educational degrees).

METHODOLOGY

A random sample of 500 social workers was selected from the ANZASW membership list, which consisted of 1847 full members (ANZ European/Tauiwi=1509; Maori=338) at the time of sampling in March 2006 (ANZASW, 2006).   Potential respondents were mailed the survey instrument and an invitation to participate in the study.   A total of 162 questionnaires were returned by ANZASW members, representing a 33% response rate.

Efforts were made to examine the validity and reliability of the initial US instrument, as many of these items were included in the instrument for the first time. A number of exploratory analyses were conducted to initiate the process of establishing reliability and validity data. For example, the religion and spirituality items were subjected to Principal Components Analysis (PCA) to construct scales that would measure practitioners' attitudes and practices.   The questionnaire was also subjected to content validity, criterion-referenced concurrent validity, and

discriminant validity (Canda & Furman, 1999; Furman et al., 2004). Modifications of the US instrument for use in ANZ were kept to the minimum, in order to allow for replication while ensuring appropriateness to national context, based on advice from colleagues in each country.

Steps were taken to ensure that data were entered accurately by checking the data entry process twice. Also, a multinational team from the US, UK and ANZ was used to guard against cultural bias in the design and adaptation of the survey instruments and in the interpretation of the findings.

FINDINGS

Sample Characteristics

In the ANZ sample, 82% of the respondents were women and 18% were men. The frequencies and percentages for the following variables are reported in Table 1: Age, gender, race/ethnicity, areas of practice, employment level and education. A large majority of the respondents in ANZ (77%) were age 40 or older. Caucasians (72%) comprised a majority of the respondents. The ANZ sample also included respondents from both Maori (7%) and Pacific Island (4%) backgrounds. Also a number of Maori chose to identify themselves as both Maori and other ethnic backgrounds (9%) and are included in the Multi-Racial/Biracial category. At the time of sampling, 22% of the ANZASW membership was Maori.

In New Zealand (53%) reported their primary work setting to be in the statutory/public sector. A larger number in ANZ worked in private settings (20%) and 18% worked in Christian social services. In ANZ a larger number worked in urban (62%) and suburban (27%) settings. A majority of the ANZ (74%) social workers were employed full time.

Respondents were asked to identify their current spiritual affiliations, including religious and nonreligious (see table 2). A slight majority of ANZ (53%) respondents identified as Christian. Overall, a majority of ANZ (73%) respondents reported a single religious affiliation. Atheists and agnostics represented 10% of the ANZ respondents.

Table 1. Sample Characteristics (N=162)

Demographic Indicator	Category	Frequency	Percentage (%)
10-Year Age Groups	20-29	10	6
	30-39	27	17
	40-49	49	30
	50-59	62	38
	60 and older	14	9
Gender	Female	132	82
	Male	29	18
	Not Reported	1	<1
Race/Ethnicity	Caucasian	117	72
	Cook Island	1	<1
	East Indian	4	3
	European (Other)	5	3
	Maori	12	7
	Multi-Racial/Bi-Racial	14	9
	Other	4	3
	Samoan	4	3
	Tongan	1	<1
Professional Qualifications	National Diploma/DipSW	38	24
	Degree in Social Work	50	31
	Other Professional Qualifications	33	20
	Post Qualifying/Advanced Award	34	21
	None/Not Reported	7	4
Areas of Practice	Child/Family Welfare	92	57
	Corrections	9	6
(Respondents were asked to	Hospital Social Work	23	14
select as many practice	Mental Health	39	24
areas as appropriate)	Day Care	1	<1
	Fieldwork	7	4
	Residential Work	1	<1
	Elderly	14	9
	Physical Disability	12	7
	Other	37	23
	Vulnerable Populations	12	7
Primary Work Setting	Private	33	20
	Voluntary	18	11
	Statutory/Public	86	53
	Christian Social Services	18	11
	Not Reported	7	4
Location of Practice	Rural	13	8
	Suburban	44	27
	Urban	100	62
	Not Reported	5	3
Employment Level	Full Time	120	74
	Part Time	36	22
	Not Reported	6	4
Highest Level of Education	School Certificate	14	9
Held by Respondent	University Entrance	17	11
	Degree	51	32
	Post Graduate Qualification	68	42
	Not Reported	12	7

Table 2   Spiritual Orientations of Social Workers (mutually exclusive categories)

	Affiliation/Orientation	Frequency (n=162)	Percentage (%)
Singular Religious Affiliations and Orientations	Christian Catholic	17	11
	Christian Protestant	37	23
	Christian Non-denominational	9	6
	Christian Unspecified	17	11
	Latter Day Saints	3	2
	Maori Christian	3	2
	Subtotal (Christian)	86	53
	Jewish Unspecified	1	<1
	Hinduism	1	<1
	Goddess Religion	1	<1
	Spiritism/Shamanism	6	4
	Other	23	14
	TOTAL RELIGIOUS	**118**	**73**
Singular Non-Religious Affiliations and Orientations	Agnosticism	9	6
	Atheism	7	4
	Existentialism	2	1
	TOTAL NON-RELIGIOUS	**18**	**11**
	TOTAL SINGULAR RELIGIOUS AND NON-RELIGIOUS AFFILIATIONS	**136**	**84**
No Affiliation / Orientation	No Affiliation/Orientation	15	9
	GRAND TOTAL SINGULAR ORIENTATIONS	**151**	**93**
Multiple Religious Affiliation / Orientation	Any religious orientation in combination with any other religious orientation (e.g. Christian and Buddhist)	8	5
Multiple Non-Religious Affiliation / Orientation	Any combination of atheist, agnostic, existentialist, and Non-affiliated Jewish)	3	2
	GRAND TOTAL MULTIPLE ORIENTATIONS	**11**	**7**
	GRAND TOTAL SINGULAR AND MULTIPLE ORIENTATIONS	**162**	**100**

Five percent of social workers indicated that they had a religious affiliation plus at least one other religious or nonreligious spiritual orientation (for example, Christianity and Buddhism or existentialism). Another 2% in ANZ selected multiple non-religious affiliations (i.e. any combination of Atheist, Agnostic, non-affiliated Jewish, existentialist). The percentage of

respondents who described themselves as atheist, agnostic, non-affiliated Jewish, existentialist, no affiliation or a combination was 27%.

Practice Issues

How can we 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. Fewer than 50% of ANZ social workers believed that it is appropriate to raise the topic of spirituality in a nonsectarian manner with clients suffering from a chronic mental disorder, unemployment, or involvement with the criminal justice system. On the other hand, terminal illness, foster parents, and the bereaved were the only practice issues with over 50% of respondents agreeing that these were appropriate sectarian topics.

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.

Table 3 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*.	60	3.46	1.18	81	4.01	0.97
Who has a *substance abuse disorder*.	32	2.89	1.11	57	3.47	1.11
Who is preparing to become a *foster parent*.	59	3.48	1.15	64	3.68	1.04
Who is recovering from *sexual abuse*.	30	2.85	1.12	58	3.47	1.13
Who is or has experienced *partner violence*.	31	2.87	1.16	54	3.39	1.12
Who is suffering the effects of a *natural disaster* or *catastrophe*	40	3.05	1.13	60	3.52	1.13
Who is bereaved.	63	3.47	1.12	80	3.99	0.92
Who is suffering from a chronic *mental disorder*.	23	2.69	1.10	46	3.20	1.18
Who is suffering from a *loss of job*.	24	2.75	1.11	45	3.26	1.13
Who is experiencing *difficulty in family relations*.	34	2.87	1.14	52	3.39	1.10
Who is involved in the *criminal justice system*.	27	2.81	1.13	46	3.29	1.16

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

This study showed that over half (52%) of the respondents received content on spirituality or religion in their social work education. Half (n=81) of the respondents felt that social workers in general do not possess the skill to assist clients in religious/spiritual matters. Another 63% (n=102) also felt that social workers should become more knowledgeable about spiritual matters. These results are significant, especially in light of the fact that nearly half (49%, n=79) of social workers in ANZ believed that social work with a spiritual component could empower clients..

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 4.

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 three activities (meditate with a client, touch for healing purposes, and help assess client's dreams), more than half of the respondents believed it is appropriate to use them.

Only five activities were used by more than 50% of the respondents. They were helping clients develop rituals, recommending participation in religious/spiritual groups, 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.

Table 4.   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.	126	78	135	83
Use non-sectarian spiritual language or concepts	100	62	115	71
Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).	84	52	116	72
Discuss the role of religious or spiritual beliefs in relation to significant other.	82	51	110	68
Recommend participation in a religious or spiritual support system or activity.	82	51	110	68
Help clients reflect on their belief about what happens after death.	77	48	110	68
Pray privately for a client.	75	46	87	54
Help clients consider ways their religious/spiritual support systems are harmful.	73	45	105	65
Use religious language or concepts.	72	44	85	53
Help clients consider the spiritual meaning and purpose of his or her current life situation.	70	43	95	59
Assist clients to reflect critically on religious or spiritual beliefs or practices.	69	43	92	57
Use or recommend religious or spiritual books or writings.	58	36	93	57
Pray with a client.	53	33	87	54
Participate in client's religious/spiritual rituals as a practice intervention.	52	32	83	51
Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.	40	25	99	61
Help clients assess the meaning of spiritual experiences that occur in dreams	24	15	47	29
Meditate privately with a client	16	10	54	33
Touch clients for "healing" purposes.	10	6	23	14

Religious and Spiritual Practices of Respondents

The more a person participated in religious community services while in one's childhood did not necessarily guarantee active participation in religious services as an adult. Nearly 49% (n=79) of the respondents participated daily to once a week as a child but only 24% (n=39) participated as much as an adult. Over 42% (n=69) currently attend services once a year or less. However, over 49% (n=80) reported participation in private religious services on a daily to weekly basis. Participation in private spiritual practices was even higher (54%, n=87).

A majority of respondents also reported that they did not feel negative about their childhood religious (64% n=104) or spiritual (67% n=109) experiences, nor did they feel negative about them today as adults (64% n=103 for religious experiences and 83% n=134 for spiritual experiences). Even so, only 47% (n=76) reported some involvement with an organized religion or spiritual support group, with 19% (n=30) stating they had high involvement. Conversely, 24% (n=39) reported no involvement or a negative reaction to religion or spiritual traditions.

Referral of client to clergy or spiritual leader

Over 63% (n=103) of responding social workers had referred a client to a clergy person or other religious spiritual leader. A large majority (82%, n=133) believed that it is appropriate to involve religious and spiritual leaders at least occasionally in their work with clients. Half (n=81) of the respondents indicated that lack of trust or confidence in religious leaders at least occasionally prevented referrals; another 40% (n=64) responded similarly regarding spiritual leaders. Also, differences in beliefs or values between social workers and religious leaders (60%, n=94) and spiritual leaders (58%, n=89) at least occasionally prevented referrals.

Forgiveness Issues

Two questions were asked that dealt with forgiveness issues. Although only 40% (n=65) felt that it was an important part of social work practice to help clients with forgiveness issues, 43% (n=69) 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; 67% (n=108) 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 33% (n=53) of the social workers in the study agreed that a religious history should be taken and only 43% (n=70) believed that a spiritual history should be taken. This indicates that the respondents felt that taking religious or spiritual histories were not a significant aspect of a client's treatment plan.

ANZ Code of Ethics

A large majority (86%, n=139) of the respondents felt that spirituality is a fundamental aspect of being human, another majority 61% (n=98) felt that integrating religion and spirituality in social work practice did not conflict with social work's mission, but only 40% (n=64) did not feel it interfered with the Code of Ethics. It should be noted that 24% (n=39) of the respondents were neutral about conflicts with the social work mission and 32% (n=51) were neutral about conflicts with the Code of Ethics.

Definition of Terms by Respondents

This survey also explored ways that social workers understand the two common terms: *spirituality* and *religion*. Definitions of spirituality and religion were offered at the beginning of the survey so that respondents would have common meanings of the terms in mind when completing the survey. At the conclusion of the questionnaire, respondents were asked to identify the descriptors (e.g. meaning, purpose, belief) that they relate to the terms *spirituality* and *religion*, aside from the given 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 5).

Table 5   Top Six Descriptors Selected in Each Category

Religion	%	*Spirituality*	%
Prayer	78	Values	83
Belief	77	Personal	82
Organization	75	Meaning	82
Scripture	73	Belief	81
Faith	73	Purpose	72
Fellowship	72	Hope	69

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

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CHAPTER FOUR

Executive Report for the 2008 Survey in the USA

THE INTEGRATION OF RELIGION AND SPIRITUALITY INTO SOCIAL WORK PRACTICE AND EDUCATION

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INTRODUCTION

The present study, conducted in 2008, followed a similar protocol used in the 1997 national study of National Social Work (NASW) members in direct practice regarding religion and spirituality (see the 1997 US Executive Report). Its purpose, then and now, is to better understand the extent to which practicing social workers on a national level incorporate religion and spirituality in their practice and to explore their views of the appropriateness of religion and spirituality in social work practice. The 2008 findings are included in the second edition of *Spiritual Diversity in Social Work Practice: The Heart of Helping,* by Dr. Edward Canda and Dr. Leola Dyrud Furman.

From its humble beginnings in the settlement houses and religious charitable organizations, social work has been involved with all areas of the human condition, including religion and spirituality. During the twentieth century, however, scientific discourses and practices were transformed into institutionalized disciplines, and the process of secularization privatized the cultural domains occupied by religion and spirituality. As a result, human experience has been dissected and analyzed via empirically-based, non-sectarian theories and practices that have often ignored and/or discounted human subjectivity. Profound changes in the profession have occurred in the 21st century, however. Religiously- and spiritually-sensitive social work practice is no longer just a special interest of some professionals. It has become a necessary component of 21st century practice, given the strong influences that religion and spirituality can have on the construction of both individual and group identity.

In addition to the current national interest, there has also been a global resurgence of professional interest in religion and spirituality. The 2008 US National Survey is also a component of a larger international study that includes research from the UK, Norway, and New

Zealand. Cross-national research has allowed social workers to investigate and to compare the attitudes and practices of practitioners from various parts of the world to determine which aspects of religion and spirituality in social work practice are universal, which religiously-based and spiritually-based practice issues can be applied in a therapeutic way, and how specific practice interventions are used across cultures.

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 relation 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 available in both paper and on-line formats. The on-line version retained the wording and design layout of the paper version. The questionnaire consisted of 126 items that included demographic, education, and practice information. Items concerning past and current religious or spiritual affiliation and/or involvement were used. As in 1997, the questionnaire contained a scale separating religion from spirituality that assessed practicing social workers' agreement with raising the topic of religion and spirituality for differing client needs. Some items were drawn from Dudley and Helfgott's (1990) study, and Sheridan et al's (1992 & 1994) scales. Also, modified items were used from Bullis' Doctoral dissertation (1993). The instrument also included a new scale that assessed raising the topic of religion and spirituality for client issues related to gender, sexual orientation, older adulthood, political beliefs, religious beliefs, disability, and poverty.

In addition, there were items exploring conflicts between religion and spirituality with the social work mission, code of ethics, and separation of church and state. Respondents were asked to report on the use of and the ethical appropriateness of spiritually based helping interventions. The instrument also contained questions related to childhood and adulthood participation in religious and spiritual services and practices, and respondents' attitudes toward religious and spiritual experiences.

Finally, items regarding forgiveness, referral to clergy, and respondents' definitions of the terms *religion, spirituality,* and *faith* were included, as well as two open-ended questions that invited respondents to provide commentary on the topic of religion and spirituality in social work practice and education.

METHODOLOGY

A stratified-random sample of 8,000 practicing social workers was selected from the National Association of Social Workers (NASW) membership lists. This survey population was limited to social workers in the following professional practice areas: Aging, Child/Family Welfare, Criminal Justice, Medical/Health Care, Mental Health, Occupational SWK-EAP, School Social Work and Other. These practice areas identified the professional orientation of the service which the NASW member was providing, regardless of place of employment or role in that service.

Table 1. Regional Survey Response Rates

Region	Returned	Total Mailed	Regional Response Rate (%)	Margin of Sampling Error (+/-)	Total Returned (%)
Northeast	355	2000	18	5.2	19.7
South	458	2000	23	4.6	25.4
Midwest	435	2000	22	4.7	24.1
West	543	2000	27	4.2	30.1
Region Unidentified	13	---	---		0.7
Total	**1,804**	**8000**	**23**	**2.3**	**100.0**

Based upon the U.S. Census Bureau Regional Divisions, the population was stratified by state into four regions: Northeast, Midwest, South, and West. Two thousand questionnaires were mailed to each area in February 2008. A replacement survey was sent to those who had not returned the survey at the end of April 2008. Of the 8,000 questionnaires mailed, 1,804 were returned, representing a 23% overall response rate (+/- 2.3% at the 95% confidence interval) (See Table 1).

Respondents had two options to complete the survey. The completed paper survey could have been returned by folding the questionnaire in half so that the postage-paid return mailing cover was exposed, and closing it with adhesive or cellophane tape; or respondents could complete the survey online rather than returning it via postal service. Respondents were directed to go to www.spiritualityreligionsurvey.com and click on the survey link on the homepage and then enter their access code (found on the cover letter and the mailed survey instrument) to begin the online survey process.

FINDINGS

Sample Characteristics

The sample was composed of 72.6 percent (n=1,309) women, and 26 percent (n=469) men (see Table 2 below). The data for gender were missing on 1.4 percent (n=26) of the surveys. The average age of the respondents was 58 (standard deviation of 10.7) with a range of twenty-three to eighty-nine. There were forty questionnaires missing data pertaining to age. Most of the 2008 respondents were Caucasian/Euro-American (87.1 percent, n=1,572). The rest of the sample were African American 4.2 percent (n=75), Latino/Hispanic American 3 percent (n=54), Asian American/Pacific Islander 1.5 percent (n=27), Native American (First Nations) 0.3 percent (n=5), mixed heritage/bi-racial 1.3 percent (n=23), and other 1 percent (n=18). Missing data accounted for 1.7 percent (n=30).

The participants were also requested to indicate their current primary religious or spiritual orientation (see Table 3 below). Not surprisingly, by far the largest percentage of the respondents related that they were Christian (56.8 percent). Adherents to various forms of Judaism (20.2 percent) formed the second largest religious category. There is also a wide variety of other religious orientation affiliations, most notably Buddhism, Goddess religion, spiritism or shamanism, traditional First Nations and Native Hawaiian, and Unitarian. In addition, about 14 percent of participants indicated a nonreligious orientation as their primary affiliation.

After selecting a primary affiliation, participants were then asked to indicate if they have only one primary religious or spiritual affiliation, a multiple religious orientation (combinations of at least one religion and any other religious or spiritual orientation), or a multiple non-religious orientation (any combination of atheist, agnostic, existentialist, nonaffiliated Jewish, and none) (see Table 4). Among Christians, 6 percent indicated they have a multiple religious orientation. Among those with a primary nonreligious spiritual orientation, 1.6 percent indicated that they have a multiple religious orientation, and 6.8 percent have a multiple nonreligious orientation. Overall, 5.9 percent of the sample indicated a multiple religious orientation, and 1.2 percent indicated a multiple nonreligious orientation. As mentioned earlier, in 2008 we asked participants to select one current primary religious or nonreligious spiritual orientation that aligned with their current worldview, and then to indicate if they subscribed to more than one religious or nonreligious spiritual affiliation.

Table 2. 2008 National NASW Survey Sample Characteristics

Demographic Indicator	Category	Percentage (%)	Frequency
Gender	Male	26.0	469
	Female	72.6	1,309
	Not Reported	1.4	26
Race/Ethnicity	African-American	4.2	75
	Asian American/Pacific Islander	1.5	27
	Caucasian/Euro-American	87.1	1,572
	Latino/Hispanic American	3.0	54
	Multi-racial	1.3	23
	Native American/Alaskan	0.3	5
	Other	1.0	18
	Not Reported	1.7	30
Primary Area of Practice	Administration/Government	1.1	19
	Aging	8.4	151
	Child-Family Welfare	6.8	122
	Community Organization	0.7	13
	Criminal Justice	1.4	25
	Higher Education	1.8	33
	Medical Healthcare	10.8	194
	Mental Health	50.3	908
	Occupational SW—EAP	0.8	15
	Pastoral Care	0.1	1
	School SW	5.0	91
	Substance Abuse	1.7	31
	Vulnerable Populations	3.0	55
	Other—Unspecified, Retired	5.4	98
	Not Reported	2.7	48
Primary Work Setting	Private	55.8	1,006
	Public	39.7	716
	Not Reported	4.5	82
Practice Location	Rural	16.0	289
	Suburban	35.3	637
	Urban	43.0	776
	Not Reported	5.7	102
Education Level	BA	0.4	8
	BSW	1.2	21
	MS/MA	1.5	27
	MSW	83.1	1,499
	PHD	9.3	167
	Post-Doc	1.3	23
	Not Reported	3.3	59

Table 3 2008 National NASW Survey: Religious and Spiritual Orientations of Social Workers

	Percentage	Frequency
Primary Religious Orientations and Affiliations		
Buddhism	4.8	86
Christianity:		
Protestantism	26.9	486
Catholicism	17.8	321
Nondenominational	5.8	105
Unspecified	5.6	101
Latter-Day Saints	0.2	3
Eastern Orthodox	0.4	8
Subtotal Chrisitan	**56.8**	**1,024**
Goddess Religion	0.1	1
Hinduism	0.2	3
Judaism:		
Reform	16.2	293
Conservative	2.3	42
Unspecified	1.2	21
Orthodox	0.5	9
Subtotal Jewish	**20.2**	**365**
Islamism	0.1	2
Spiritism/Shamanism	0.7	13
Traditional Native American (First Nations)	0.4	8
Traditional Hawaiian	0.1	1
Unitarian Universalism	0.7	13
Wicca	0.2	4
Religious Others [1]	0.5	9
Total Religious	**84.8**	**1,529**
Primary Nonreligious Spiritual Orientations		
Agnosticism	6.5	117
Atheism	2.9	53
Existentialism/Humanism	1.5	27
Nonaffiliated Jewish	3.0	54
Total Nonreligious	**13.9**	**251**
Other		
None (No spiritual affiliation)	0.1	2
Other—Unspecified	0.6	11
Not Reported	0.6	11

Note: [1] Religious others includes unspecified multifaith/interfaith (6 responders), Buddhism/Christianity (1 responder), Zen/Taoism/Episcopalian (1 responder), and Buddhism/Shamanism/Existentialism (1 responder).

Table 4 2008 National NASW Survey:
Singular and Multiple Religious and Spiritual Orientations of Social Workers by Primary Affiliation

	Total	Singular Primary Affiliation Only		Multiple Religious Orientation in Addition to Primary		Multiple Non-Religious Orientation in Addition to Primary	
	(n)	(%)	(n)	(%)	(n)	(%)	(n)
Primary Religious Orientations							
Buddhism	86	90.7	78	9.3	8		
Christianity:							
Protestantism	486	95.3	463	4.7	23		
Catholicism	321	94.1	302	5.9	19		
Nondenominational	105	90.5	95	9.5	10		
Unspecified	101	92.1	93	7.9	8		
Latter-Day Saints	3	66.7	2	33.3	1		
Eastern Orthodox	8	100.0	8				
Subtotal Christian	**1,024**	**94.0**	**963**	**6.0**	**61**		
Goddess Religion	1	100.0	1				
Hinduism	3	66.7	2	33.3	1		
Judaism:							
Reform	293	99.3	291	0.7	2		
Conservative	42	97.6	41	2.4	1		
Unspecified	21	81.0	17	19	4		
Orthodox	9	100.0	9				
Subtotal Jewish	**365**	**98.1**	**358**	**1.9**	**7**		
Islamism	2	100.0	2				
Spiritism/Shamanism	13	84.6	11	15.4	2		
Traditional Native American (First Nations)	8	100.0	8				
Traditional Hawaiian	1	100.0	1				
Unitarian Universalism	13	15.4	2	84.6	11		
Wicca	4	100.0	4				
Religious Others [1]	9			100.0	9		
Subtotal Primary Religious Orientations	**1,529**	**93.5**	**1,430**	**6.5**	**99**		
Primary Nonreligious Spiritual Orientations							
Agnosticism	117	94.0	110	1.7	2	4.3	5
Atheism	53	92.5	49			7.5	4
Existentialism/Humanism	27	74.1	20	7.4	2	18.5	5
Nonaffiliated Jewish	54	94.4	51			5.6	3
Subtotal Primary Nonreligious Spiritual Orientations	**251**	**91.6**	**230**	**1.6**	**4**	**6.8**	**17**
Other							
None (No primary religious/spiritual affiliation)	2	50.0	1	50.0	1		
Other—Unspecified	11	45.5	5	27.3	3	27.3	3
Not Reported	11	81.8	9			18.2	2
Total Sample	**1,804**	**92.8**	**1,675**	**5.9**	**107**	**1.2**	**22**

Note: [1] Religious others includes unspecified multifaith/interfaith (6 responders), Buddhism/Christianity (1 responder), Zen/Taoism/Episcopalian (1 responder), and Buddhism/Shamanism/Existentialism (1 responder).

In general, as would be expected, those who claimed a religious affiliation were likely to have an average to high level of involvement in religious or spiritual activities, such as prayer and attendance at religious services. In contrast, atheists and agnostics were likely to have a low to average involvement in religious or spiritual activities.

Among those who indicated their level of religiosity (n=1760), 33.4% (n=587) were not at all religious, 48.1% (n=847) were somewhat religious, and 18.5% (n=326) were very religious. Among those who indicated their level of spirituality (n=1763), 3.7% (n=65) were not at all spiritual, 40.7% (n=718) were somewhat spiritual, and 55.6% (n=980) were very spiritual. In Table 3.6, 15.6 percent of the sample is both very religious and very spiritual. On the other hand, only 2.8 percent of respondents are neither religious nor spiritual.

Table 5 2008 National NASW Survey: Level of Religiosity by Level of Spirituality

	Not Spiritual % (n)	Somewhat Spiritual % (n)	Very Spiritual % (n)	Total % (n)
Not Religious	2.8 (49)	16.0 (279)	14.6 (255)	33.4 (583)
Somewhat Religious	0.6 (11)	22.1 (387)	25.5 (445)	48.2 (843)
Very Religious	0.2 (4)	2.6 (46)	15.6 (272)	18.4 (322)
Total	3.7 (64)	40.7 (712)	55.6 (972)	100% (1748)

Note: Fifty-six respondents did not indicate their level of religiosity and/or their level of spirituality.

Practice Issues

Twenty-two questions in the survey explored 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 (see Table 6). Most social workers in our study believed that it is appropriate to raise the topic of spirituality in a nonsectarian manner with clients on every issue we explored, but especially regarding terminal illness, bereavement, substance abuse, and suffering effects of a natural disaster.

Most respondents also believed that it is appropriate to raise the topic of religion in cases of terminal illness, substance abuse, bereavement, foster and adoptive parenting, and suffering the effects of a natural disaster. But for every issue, fewer believed it was appropriate to raise the subject of religion rather than spirituality. 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, our national survey showed that nearly 65% did not receive content on spirituality or religion in their social work education. A majority of the responders agreed that social workers should become more knowledgeable about spiritual matters (66.1%, n=1,167) and religious matters (51.3%, n=906). Nearly 25% however, agreed that workers do not have the skill to assist clients in religious and spiritual matters. It appears

from this that many social work practitioners do not feel adequately prepared to address religion or spirituality, even though they recognize its importance.

Table 6 Appropriate to Raise Topic of Religion/Spirituality by Client Issue

Raise topic of religion/spirituality with ...	Religion			Spirituality		
	% Agree	$\bar{x}$	S	% Agree	$\bar{x}$	s
Terminal illness	74.9	3.81	1.06	86.1	4.15	0.92
Substance abuse	53.1	3.37	1.10	72.8	3.84	0.99
Foster parent	56.8	3.43	1.09	63.6	3.66	1.03
Adoptive parent	58.2	3.45	1.10	64.7	3.67	1.03
Difficult child or adolescent development	37.5	3.09	1.06	55.2	3.51	1.02
Sexual abuse	46.6	3.24	1.11	64.6	3.67	1.05
Partner violence	44.4	3.20	1.09	61.9	3.62	1.04
Suffering effects of natural disaster	56.3	3.43	1.08	71.2	3.78	1.02
Bereaved	72.1	3.75	1.03	81.9	4.05	0.91
Chronic mental disorder	36.5	3.06	1.08	52.2	3.45	1.06
Loss of job	37.1	3.08	1.06	54.0	3.48	1.05
Difficulty in family relations	43.7	3.19	1.05	59.6	3.56	1.01
Criminal justice	37.5	3.09	1.07	52.8	3.46	1.03

Note: A t-test of means showed a significant difference between religion and spirituality with clients presenting the same problem, with $p < 0.001$. Respondents were significantly more likely to believe it is appropriate to raise the topic of nonsectarian spirituality than religion.

Table 7 Appropriate to Raise Topic of Religion/Spirituality with Vulnerable Populations

Raise topic of religion/spirituality with ...	Religion			Spirituality		
	% Agree	$\bar{x}$	S	% Agree	$\bar{x}$	S
Race, ethnicity, or national origin	42.7	3.18	1.09	59.2	3.56	1.03
Gender	40.6	3.13	1.09	56.1	3.51	1.05
Sexual Orientation	45.2	3.21	1.11	59.8	3.56	1.06
Older adulthood	42.7	3.17	1.11	60.1	3.58	1.04
Political beliefs	34.6	3.03	1.07	50.7	3.41	1.05
Religious beliefs	79.8	4.00	1.01	82.2	4.05	0.93
Disability	40.7	3.14	1.10	58.5	3.55	1.05
Poverty	39.3	3.10	1.10	55.9	3.51	1.03

Note: A t-test of means showed a significant difference between religion and spirituality with clients presenting the same issue, with $p < 0.001$, except for religious beliefs ($p < 0.05$). Respondents were significantly more likely to believe it is appropriate to raise the topic of nonsectarian spirituality than religion.

Social workers in the 2008 National Survey were also asked to indicate their level of agreement regarding the appropriateness of raising the topic of religion and spirituality with clients from vulnerable populations (see Table 7). A majority of respondents agreed that it is appropriate to raise the topic of spirituality with clients who are dealing with oppression. Although fewer believed it was appropriate to raise the subject of religion than nonsectarian spirituality, a large majority of respondents agreed that it is appropriate to raise the topic of religion and of spirituality with clients who are experiencing religious oppression.

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 Table 8.

Table 8 National NASW Survey: Practitioners' Views on Spiritually Oriented Helping Activities

Question	Have Personally Done with Clients		Is an Appropriate Social Work Helping Activity (Intervention)	
	(%)	(n)	(%)	(n)
8. Use or recommend religious or spiritual books or writings	55.8	985	76.5	1,308
9. Pray privately *for* a client	56.4	1,003	68.3	1,168
10. Pray privately *with* a client	27.1	478	44.8	750
11. Meditate to prepare *for* a client	66.3	1,175	86.3	1,478
12. Meditate *with* a client	30.5	539	60.4	1,020
13. Use religious language or concepts	66.0	1,169	73.3	1,265
14. Use nonsectarian spiritual language or concepts	84.2	1,491	90.7	1,581
15. Recommend participation in a religious or spiritual support system or activity	77.2	1,373	85.3	1,485
16. Touch clients for "healing" purposes	14.1	250	22.3	382
17. Help clients develop religious/spiritual rituals as a clinical intervention (e.g., house blessings, visiting graves of relatives, celebrating life transitions)	57.8	1,030	77.1	1,333
18. Participate in a client's religious/spiritual rituals as a practice intervention	17.5	311	32.3	553
19. Encourage clients to do regular religious/spiritual self-reflective diary keeping or journal keeping	51.1	905	78.8	1,371
20. Discuss role of religious or spiritual beliefs in relation to significant others	75.3	1,332	88.2	1,536
21. Assist clients to reflect critically on religious or spiritual beliefs or practices	57.4	1,009	73.2	1,253
22. Help clients assess the meaning of spiritual experiences that occur in dreams	40.6	714	67.9	1,155
23. Help clients consider the spiritual meaning and purpose of their current life situations	69.3	1,224	81.9	1,417
24. Help clients reflect on their beliefs about what happens after death	71.1	1,258	88.1	1,526
25. Help clients consider ways their religious/spiritual support systems are *helpful*	92.2	1,621	96.2	1,667
26. Help clients consider ways their religious/spiritual support systems are *harmful*	65.5	1,150	82.0	1,403
27. Refer clients to a clergy person, or other religious/spiritual helpers or leaders	74.8	1,319	89.5	1,551
28. Collaborate with a clergy person or other religious/spiritual leaders	59.2	1,045	85.9	1,473

Note: Valid percentages and frequencies are reported; missing cases have been excluded.

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 four activities (pray with a client, meditate with a client, touch for healing purposes, and participate in the client's religious/spiritual rituals as a practice intervention), more than 2/3 of respondents believed it is appropriate to use them. Also, except for the four least-approved activities above and dream assessment, more than half of respondents have actually used these helping activities. These findings show that most social workers recognize the usefulness and ethical appropriateness of a wide range of spiritually-oriented practices. The four 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 while in elementary school or adolescence, the more s/he will participate in organized religion or spiritual support groups as adults. A large majority of the respondents (85.1%, n=1,521) had attended religious services at least once a month during childhood. In adulthood, a majority of respondents (50.9%, n=902) participated in religious services at least once a month, and a larger majority (81.1%, n=1,443) participated in private religious and/or spiritual practices at least once a month. Only a small minority of respondents felt negative about their childhood religious experiences (16.5%, n=293) and spiritual experiences (6.3%, n=114). Respondents were even more positive about their adulthood religious and spiritual experiences. Only 13.6% (n=242) felt negative about their current religious experiences, and 2% (n=36) felt negative about their current spiritual experiences.

NASW Code of Ethics

Overall, a minority of responders agreed that "integrating religion and spirituality in social work practice conflicts with the NASW Code of Ethics" (12.5%, n=220) or "social work's mission" (13.2%, n=232). Over 84% (n=1,511) of responders believe that church-state separation does not prevent them from dealing with religion in practice. Over 91% (n=1,636) believe it does not prevent them from dealing with nonsectarian spirituality in practice. This confirms that most social workers are likely to feel that dealing with spirituality and religion in practice is consistent with professional values.

Referral of Client to Clergy or Spiritual Leader

Among those who responded in 2008, 74.8% (n=1,319) had actually referred clients to a clergyperson or other religious or spiritual leader. Another 89.5% (n=1551) indicated that referring clients to clergy was an appropriate helping activity. Over 59% (n=1,045) among those who responded had also collaborated with clergy or other religious or spiritual leaders, and 85.9% (n=1,473) believed that collaboration was an appropriate helping activity. These findings are encouraging in that a large majority of social workers are very receptive to referral and collaboration as appropriate helping activities.

Forgiveness Issues

We asked two questions that dealt with forgiveness issues in our 2008 National Survey. Among those who responded, 63.8% (n=1,127) indicated that it is important to help clients assess whether they wish to work on forgiveness, and 72.3% (n=1,271) of the respondents use techniques in their practice that deal with forgiveness. This finding is similar to the 1997 National survey. At that time, 60% of respondents believed it is important to assess whether a client would benefit from work on forgiveness, and another 74% used forgiveness techniques. This finding suggests that many respondents still use techniques in practice that relate to forgiveness without assessing whether the client wishes to do so. 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. Nearly 70% (N=1,256) 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, 58.1% (N=1,043) of the social workers in the study agreed that a religious history should be taken and 59.8% (N=1,076) believed that a spiritual history should be taken.

Furthermore, only 33 percent (n=586) of respondents agreed that social workers should introduce religion or spirituality in the helping relationship at their own discretion; nearly 54 percent (n=949) felt that the client should first express interest.

Definition of Terms by Respondents

This survey explored the 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. In addition, at the conclusion, 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 overlap for some people. However, a clear pattern of distinction between the terms emerged by comparing the top six descriptors for each (See Table 9 below).

Table 9 National NASW Survey: Top Six Descriptors Selected in Each Category

Religion	%	Spirituality	%	Faith	%
Belief	79	Meaning	85	Belief	87
Ritual	79	Personal	82	Personal Relationship with Higher Power	58
Organization	74	Purpose	79	Personal	55
Scripture	72	Values	73	Meaning	50
Prayer	71	Belief	69	Purpose	45
Community	69	Personal Relationship with Higher Power	67	Prayer	40

Note: Percents indicate percentage of respondents who selected a descriptor associated with a given term.

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CHAPTER FIVE

Executive Report for the 2011 Survey in Norway

RELIGION AND SPIRITUALITY IN NORWEGIAN SOCIAL WORK PRACTICE

EXECUTIVE REPORT 2011

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Acknowledgements

INTRODUCTION

Religion and spirituality have been a part of social work from its inception. The role religion and spirituality has played in social work, has varied considerably with shifting historical and societal contexts. It is the relation – empirical and normative – between religion/spirituality and social work practice which is the general focus of this study. The purpose of the present study is to expand knowledge on religion and spirituality in social work practice in Norway, and internationally, building upon the previous studies that have been

carried out in the USA in 1997 and 2008, in the UK (2000), in Norway (2002) and in New Zealand (2005).[1]

The Norway 2011 study is a further development of the 2002 study of Norwegian social workers by Mari-Anne Zahl. Some changes have occurred in the decade separating these studies. The religious landscape in Norway is changing (Botvar & Schmidt 2010). Both membership and church attendance are generally declining somewhat in the Church of Norway, which before a change in the Constitution of Norway in 2012 also was called the State Church of Norway. Church of Norway is an evangelical Lutheran church and is still the dominant religious institution by membership (77% of the population in 2012) and tradition. Immigration policies and developments have led to a more multicultural society in Norway, with more diverse religious and spiritual affiliations and traditions compared to the past when Norway was a rather homogeneous society.

Also, the Law on University and Colleges (passed in 2005) has significantly changed the framework for higher education (Rammeplan, 2005). This piece of legislation legitimizes more value-based identity and activity in higher education. The government's Framework Plan (Rammeplan, 2005) for the education of social workers includes a holistic view on clients. Social workers should be taught to relate to clients as multidimensional beings with physical, psychological, social, cultural, and spiritual needs. The formulation here is, however, the same as it was in the previous Framework Plan from 1999 (Rammeplan, 1999).

With these broader professional and cultural changes in mind, the 2011 study was based on the following general research questions:

- What is the attitude regarding religion and spirituality in social work practice among social workers in Norway at present?
- To what extent do social workers agree that it is appropriate to raise questions about religion or spirituality in consultations over different situations for the clients?
- What are the social workers opinions, experiences and practices when meeting with clients who have religious views and religious problems associated with their presented social problem?
- Which spiritually-based helping interventions have been used by the social workers? Which of these practices do they find appropriate?

DEFINITION OF TERMS

The questionnaire began with operational definitions of what was meant by spirituality and religion. Religion was defined as "an organized structured set of beliefs and practices shared by a community related to spirituality". Spirituality was defined as "the search for meaning, purpose, and morally fulfilling relations with self, other people, the encompassing universe, and

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[1] The present report provides a descriptive overview with regard to the design of the study and a summary of its main empirical results. Additional publications will provide more in-depth analyses and discussions of findings given the complexity of the study's theme: Religion and Spirituality in social work practice in Norway.

ultimate reality, however a person understands it" (Canda, 1990a, 1990b). It was explained that spirituality can be "expressed through religious forms, but is not limited to them" (Canda, 1990a, 1990b). Furthermore, the respondents were informed that some questions addressed spirituality in both religious and non-religious forms. When all aspects of spirituality were intended, both spirituality and religion were used in the question.

Translation of the English concept of "spirituality" into Norwegian was afforded great consideration, given that the concept is similar to "belief" in Norway, where "belief" embraces the broad range and multidimensionality of worldviews. Canda and Furman (2010) have explained how spirituality in English is connected both to Christian theology and to a more general usage, which is similar to the situation in Norway.

The English word "spirituality" likely would be most commonly translated as "åndelighet". The concept "åndelig" is used in the latest Framework plan (Rammeplan, 2005) for the education of social workers in Norway. But this concept will often be understood mostly in a religious context rather than the more generic definition of spirituality offered in English.

The word "livssyn" was used for "spirituality" in the 2002 Norwegian questionnaire. This is a general, inclusive concept which may be translated to "world-view" (Zahl, 2005). It may also be translated as "basic views on life." Thus, the word "livssyn" also was used in the 2011 Norwegian questionnaire.

SURVEY INSTRUMENT

The original survey instrument was developed in the United States for a 1997 national survey of social workers in direct practice who were members of the National Association of Social Workers. 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. The respondents also were given the opportunity to provide written commentary regarding the survey instrument and the topic of religion and spirituality in social work practice. Finally, items regarding forgiveness and referral to clergy were included.

The UK survey instrument was then translated from English into Norwegian by Mari-Anne Zahl in 2002. The survey instrument was adapted for culturally appropriate information that pertained to Norway, such as education level and geographic location of practice, before it was administered.

The survey instrument from Zahl's study was modified for the 2011 study in Norway.[2]

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[2] For a specific inventory of emendations to Zahl's 2002 survey instrument, please contact the study leaders, Einar Vetvik or Torill Danbolt.

Additions included, for example, questions that address social workers' actual experiences with the theme of religion and spirituality in the context of the helping relationship. The 2011 survey instrument consists of five parts, and provides open space for the participants' qualitative comments. There are a total of sixty-five (65) questions.

Part one covers demographic and professional background information (Q 1 – 9). Part two is about attitudes and views regarding spirituality and religion in social work practice. (Q 10 – 32). Respondents were asked if it is appropriate to raise the topic of religion and spirituality in actual situations. Part three (Q 33 – 56) queries social workers on the use of various helping interventions and their appropriateness in social work practice. Part four (Q 57 – 65) covers social work education and the respondents' personal religious and spiritual practices. Part five invites open formulation of qualitative responses and comments to the survey.

In the survey instrument, a majority of the questions are Likert-type items with five response categories: strong agreement, agreement, neutral, disagreement and strong disagreement.

METHODOLOGY

The Norway sample was drawn from the membership mailing list of the Norwegian Union of Social Educators and Social Workers (FO). Four hundred (400) social workers, or 2.5%, of the FO membership lists were randomly sampled by the leader of the secretariat in October 2011. The secretariat sent a survey instrument, a reply envelope, and an introductory letter authorized by the head of the Union and the researcher. Due to confidentiality, follow-up letters to remind potential respondents to participate were sent to all respondents (n=400), as the FO was not informed about who had already replied. The FO and the research council in Norway have strict guidelines in place to protect the anonymity of respondents. Completed survey instruments were sent directly to the researchers from the respondents.

The response rate was 34%. This is lower than expected, but in line with the response rates in the studies mentioned above. It was expected that those social workers who had an active interest in the subject of religion and spirituality, either pro or con, would be more likely to complete and return the questionnaire than social workers with less interest in the theme.

The original US and UK questionnaires were subjected to content validity, criterion-referenced concurrent validity, discriminant validity, and principal components analysis (Canda & Furman, 1999; Furman, Benson, Grimwood & Canda, 2004). The principal components analysis (PCA) yielded scales for the religion items (Cronbach's alpha=.96), the spirituality items (Cronbach's alpha=.96), and a combined religion and spirituality scale (Cronbach's alpha=.97). The high coefficient alphas suggested strong internal consistency for the measurement scales. Similar results were found for the 2002 and 2011 Norwegian studies.

A translation presents semantic challenges on several levels. A literal translation is the simplest, although the equivalent word might not convey the same meaning. This study was part of an international comparison and had to bring forth comparable results on the given scales. Thus, some of the UK questions related to social work activity were kept or adapted even though

they might not be pertinent to Norwegian culture. The UK version of the survey was translated into Norwegian by a native Norwegian speaker, and then discussed with Norwegian students in social work, social work faculty, social workers in practice, and faculty of a university-based religion department.

The limitation of a quantitative approach, furthermore, is that there is the lack of qualitative data which may provide a deeper understanding of the study's research questions.

The design of the Norwegian 2011 study and the adaptation of Zahl's (2004) survey instrument were carried out by Associate Professor Einar Vetvik as project leader and Assistant Professor Torill Førsund Danbolt at Diakonhjemmet University College in Oslo. The College has a Christian foundation and has a long tradition of interest and activity in topics related to professional practice, values and religion/spirituality in social work and Diakonia (Vetvik and Hakala 2011).

The data were analyzed using the statistical program IBM SPSS.

SELECTED FINDINGS

Sample Characteristics

Some information regarding the FO's membership was available to researchers. In terms of gender, age, geographical distribution, and time of graduation, the Norway 2011 sample is similar to the FO membership. For example, a majority of respondents in the sample are women (79%), compared with 21% men. The age range for this survey is 24 to 69 years old, with a mean age of 44.2 years. This indicates a high level of accordance of our sample in comparison with the FO membership structure.

The frequencies and percentages for the following demographic variables are reported in Table 1 (see below): gender, age, areas of practice, primary work setting, location of practice, date of graduation, and geographic location.

Seventeen percent (17%) of the respondents had graduated from Diakonhjemmet University College, and 82% from the other institutions with social work education. Almost all of the respondents have a bachelor degree in social work. Social work education at the Master's and Ph.D. levels do not have a long history in Norway and relatively few in active social work have these higher degrees.

It is noteworthy that 85% of the respondents indicated public social work as a primary work setting. This is a reflection of the general situation in the Nordic Welfare states which is different from the situation elsewhere in Europe and the US.

Table 1. Sample Characteristics (n=134).

Demographic Indicator	Category	Frequency	Percentage[a]
Gender	Women	106	79.1
	Men	28	20.9
Age	20-30	21	15.7
	31-49	65	48.5
	50-70	48	35.8
Areas of Practice[b]	Child Care	40	29.9
	Local Welfare	28	20.9
	Psychiatry	23	17.2
	Substance abuse	15	11.2
	Somatic Health	12	9.0
	Handicapped	9	6.7
	Family	6	4.5
	Other Areas[c]	16	11.9
Primary Work Setting	State/Region	40	29.9
	County/Municipality	74	55.2
	Private/other	20	14.9
Location of Practice	Rural	49	36.6
	Suburban	35	26.1
	Urban	50	37.3
Graduation Date	Pre-1990	27	20.1
	1990-1999	37	27.6
	2000-2010	69	51.5
	Not Reported	1	0.7
Geographical Region	North/Mid-Norway	24	17.9
	West/South Coast	50	37.3
	East Norway	57	42.5
	Not Reported	3	2.2

[a]Percentages reported in the text have been rounded to the nearest whole percentage. [b]Some respondents identified multiple areas of practice [c]Other Areas includes care for the elderly, work with immigrants, etc.

The study revealed that half of those who responded (n=65) received teaching on spirituality or religion in their social work education. Nearly 29% (n=37) felt that social workers in general do not possess the skill to assist clients in religious/spiritual matters. A large minority (43%, n=57) of those who responded also felt that social workers should become more knowledgeable about faith and belief. These results are significant, especially in light of the fact that the Norwegian social workers in this survey were divided as to whether or not social work with a spiritual component could empower clients: 26% (n=34) felt that it could, 36% (n=48) felt that it could not, and 38% (n=51) were neutral on the subject.

Respondents' Religious Affiliations

Social workers in Norway were asked to identify their current religious or non-religious spiritual orientation(s) (see Table 2). The majority of Norwegian respondents (52%, n=69) identify themselves as Christians. Atheists comprise 5% (n=13) of the Norwegian respondents; another 20% (n=27) report an affiliation with Humanism. Finally, 12% (n=16) of the Norwegian social workers report that they do not have any religious or nonreligious affiliations. Two respondents did not provide information.

The majority of the respondents (74%) reported membership in the Church of Norway. The discrepancy between those who identify themselves as Christians and Church of Norway members (52%), and those who identify as non-Christians yet report Church of Norway membership (20%), is a reminder of the distinction between "believing" and "belonging". The beliefs of people belonging to the churches are indeed relatively different.

Table 2. Respondents' Religious and Spiritual Affiliations

	Category	Frequency	Percentage[a]
Religious Affiliations	Christian	69	51.5
	Muslim	1	0.7
	Hindu	1	0.7
	Jewish	1	0.7
Non-religious Affiliations	Atheist	6	4.5
	Agnostic	11	8.2
	Humanist	27	20.2
No Affiliation/Not Reported	No Affiliation	16	11.9
	Not Reported	2	1.5

[a] Percentages reported in the text have been rounded to the nearest whole percentage.

Respondents' Religious and Spiritual Practices

Respondents were asked how often they go to church, mosque or other religious meetings. A majority (58%, n=76) never or seldom attend such gatherings, 28% (n=38) attend sometimes, and 13% (n=18) go often.

Respondents were also asked to indicate the frequency of their participation in religious/spiritual practices, such as prayer, meditation and conversation: never (40%, n=53), once a year or less (16%, n=22), 2-6 times a year (11%, n=15), 1-3 times a month (10%, n=14), and once a week or more (20%, n=27). Three (2%) participants did not respond.

A large minority of respondents report that they do not feel negative about their religious experiences (47%, n=63), and a majority (71%, n=95) do not feel negative about their spiritual

experiences. Only 14% (n=19), however, report involvement once or month or more in activities organized by a church or other religious organization. Conversely, 53% (n=71) report no involvement.

Practice Issues

Raising the topic of religion and spirituality in the context of client issues

As service populations change, the social worker often faces clients for whom religion and/or spirituality play a major role in their lives. How can religion and spirituality be addressed in a manner consistent with professional values and purposes? This matter was explored in depth in 26 questions (see Table 3) concerning the appropriateness of social workers raising the topic of religion or spirituality with clients dealing with issues such as bereavement, substance abuse, and sexual abuse. A majority of the Norwegian social workers in our study believed that it is appropriate to raise the topic of spirituality with clients facing a terminal illness, with clients planning to become foster parents and adoptive parents, and with the bereaved.

The introduction of religion with specific practice issues was even more limited. "Foster parents" was the only practice area with half of the respondents agreeing that it was an appropriate topic. For each of the practice areas, fewer respondents believed it was appropriate to raise the subject of religion as opposed to spirituality. These findings indicate that many social workers recognize the importance of spirituality and religion, while also making a distinction in applying them to practice.

Table 3. Appropriate to Raise Topic of Religion/Spirituality by Client Issue[a]

Raise topic of religion/spirituality with ...	Religion			Spirituality		
	% Agree[b]	$\bar{x}$	S	% Agree[b]	$\bar{x}$	S
Terminal illness	47.8	3.26	1.03	63.9	3.62	0.96
Substance abuse	11.9	2.45	0.95	39.8	3.08	1.11
Foster parent	50.0	3.15	1.18	61.7	3.53	1.05
Adoptive parent	45.1	3.06	1.15	58.6	3.47	1.03
Sexual abuse	7.5	2.30	0.91	27.8	2.80	1.08
Partner violence	6.8	2.29	0.88	28.6	2.78	1.09
Suffering effects of natural disaster	15.8	2.53	1.02	34.6	2.96	1.08
Suffering effects of terrorism	15.9	2.52	1.02	37.6	3.05	1.07
Bereavement	37.3	3.05	1.04	56.5	3.43	1.00
Chronic mental disorder	11.9	2.38	0.96	31.6	2.86	1.10
Loss of job	3.0	2.07	0.86	18.8	2.62	1.01
Difficulty in family relations	6.8	2.32	0.90	24.1	2.74	1.03
Criminal justice	10.5	2.29	0.94	26.5	2.75	1.05

Note: [a] A *t*-test of means showed a significant difference between religion and spirituality with clients presenting the same problem, with $p < 0.001$. Respondents were significantly more likely to believe it is appropriate to raise the topic of spirituality than religion. [b] Percentages reported in the text have been rounded to the nearest whole percentage.

Approximately 30% of the respondents indicated neutrality on almost all of the statements.

It is also interesting to note that clients suffering from the effects of exceptional events like natural disasters and terrorism provide a relatively low score for the legitimacy of raising the topic of religion/spirituality.

Raising the topic of religion and spirituality with in regard to discrimination

Some of the questions about the appropriateness of raising the topics of religion and spirituality concern situations where clients are facing different forms of discrimination (see Table 4).

Table 4. Appropriate to Raise Topic of Religion/Spirituality with Vulnerable Populations[a]

Raise topic of religion/spirituality with ...	Religion			Spirituality		
	% Agree[b]	$\bar{x}$	S	% Agree[b]	$\bar{x}$	S
Sexual Orientation	14.3	2.39	1.04	35.3	2.92	1.11
Age	3.1	2.14	0.85	21.8	2.65	1.05
Political beliefs	11.4	2.36	1.01	29.5	2.85	1.08
Religious beliefs	62.3	3.56	1.02	63.9	3.59	1.02
Ethnicity/Culture	38.3	2.98	1.07	48.9	3.59	1.02
Disability	3.8	2.17	0.87	24.8	2.70	1.09
Poverty	5.3	2.20	0.90	25.6	2.77	1.09

Note: [a] A *t*-test of means showed a significant difference between religion and spirituality with clients presenting the same issue, with $p < 0.001$, except for religious beliefs ($p = .914$). Respondents were significantly more likely to believe it is appropriate to raise the topic of spirituality than religion. [b] Percentages reported in the text have been rounded to the nearest whole percentage.

A majority of the respondents indicated that it is appropriate to raise the topics of religion and spirituality in situations where a client is oppressed due to religious belief. But it is noteworthy that 38% did not find this appropriate.

A large minority of respondents also indicated that it is appropriate when the client is suffering from oppression and/or discrimination due to ethnicity or cultural background. Only 14% find it appropriate to raise the topic of religion in cases of discrimination based on sexual orientation, and even fewer regarding older adulthood (3%), disability (4%), and poverty (5%).

Spiritually-based helping activities.

Questions 39 to 53 deal with different kinds of spiritually-oriented helping interventions which may be used by social workers. Table 5 (see below) identifies the percentage of social workers who have used each of the interventions, and the percentage of social workers who find the helping activity to be an appropriate intervention.

Table 5. Practitioners' Views on Spiritually Oriented Helping Activities[a]

Question	Have Personally Done with Clients		Is an Appropriate Social Work Helping Activity (Intervention)	
	(%)	(n)	(%)	(n)
39. Use or recommend religious or spiritual books or writings	20.5	27	58.1	75
40. Pray privately *for* a client	16.4	22	28.6	36
41. Pray privately *with* a client	5.2	7	21.7	28
42. Meditate to prepare *for* a client	12.8	17	57.4	74
43. Meditate *with* a client	0.8	1	15.9	21
44. Touch clients for "healing" purposes	0.8	1	4.7	6
45. Recommend participation in a religious or spiritual support system or activity	21.8	29	39.4	52
46. Help clients develop religious/spiritual rituals as a clinical intervention (e.g., house blessings, visiting graves of relatives, celebrating life transitions)	14.9	20	34.4	45
47. Participate in a client's religious/spiritual rituals as a practice intervention	10.6	14	25.8	34
48. Discuss role of religious or spiritual beliefs in relation to significant others	56.7	76	80.2	105
49. Help clients see what kinds of religious/spiritual resources they have to seek meaning in their current life situations.	46.6	62	73.6	95
50. Help clients consider ways their religious/spiritual support systems are *helpful*	50.0	67	80.6	104
51. Help clients consider ways their religious/spiritual support systems are *harmful*	31.3	42	66.2	86
52. Help clients reflect on their beliefs about what happens after death	19.4	26	51.9	68
53. Refer clients to a clergy person, or other religious/spiritual helpers or leaders	38.8	52	82.4	108

Note: [a] Percentages and counts are based on valid data—missing data are excluded. Percentages reported in the text have been rounded to the nearest whole percentage.

The most common helping activity that respondents have used is to discuss the role of religious/spiritual belief in relation to significant others: 57% (n=76) have done this, and 80% (n=105) answer that this is appropriate in social work. Half of Norwegian social workers who responded to the question also helped clients consider ways their religious/spiritual support systems are helpful, and a large majority (81%, n=104) find it appropriate to do so. Nearly 47% helped clients examine religious/spiritual resources in their search for meaning in their current life situations. Nearly 74% (n=95) find this to be an appropriate intervention.

Referring clients to religious/spiritual leaders

Nearly 39% (n=52) of the sample had referred a client to a clergy person or other religious spiritual leader. A majority of the respondents felt that differences in beliefs or values between

social workers and religious/spiritual leaders prevented referrals not at all (52%, n=70), to some extent (38%, n=51), to a large extent (4%, n=5), and to a very large extent (5%, n=6). Two participants did not respond. Similarly, many of the respondents felt that social workers' lack of trust or confidence in religious/spiritual leaders prevented referrals not at all (49%, n=66), to some extent (39%, n=52), to a large extent (7%, n=9), and to a very large extent (3%, n=4). Three did not provide a response.

Forgiveness issues

One question dealt with forgiveness issues. Respondents were divided regarding the importance of work on forgiveness issues: 37% (n=50) strongly disagreed or disagreed, 33% (n=44) were neutral on the subject, and 29% (n=39) agreed or strongly agreed that work on forgiveness issues is important. One participant did not respond.

Intake Issues

Over 90% (n=121) of social workers in this survey did not feel that they ought to inform clients about their own belief systems when establishing the helping relationship.

When asked whether taking a client's religious and/or spiritual history should be part of intake and assessment, 26% (n=35) of the social workers in the study agreed that a religious history should be taken, 21% (n=28) were neutral, and 52% (n=70) disagreed. One participant did not provide a response.

FO ethical principles and other contextual attitudes to religion and spirituality

Although 78% (n=105) of all respondents felt that spirituality is a fundamental aspect of being human, only 31% (n=41) felt that integrating religion and spirituality in social work practice did not conflict with social work's mission, and 36% (n=48) did not feel it interfered with the FO Ethical Principles. It should be noted that 40% (n=53) of the respondents were neutral about conflicts with the social work mission, and 39% (n=52) were neutral about conflicts with the FO Ethical Principles.

A large minority (44%) of the respondents agreed that the Christian heritage and the new multicultural society make it natural to raise the topic of religion and spirituality in social work practice. A large majority (79%), however, agreed that spirituality is a fundamental aspect of a human being, and another 65% agreed that religion and spirituality play a significant role for how human beings interpret events and make decisions.

A majority (51%) agreed that spirituality is a motivating factor in their own social work practice, while only 11% agreed that religion motivates them. A majority (61%) also agreed that spirituality influences their acts in social work practice, while only 21% agreed that their religious beliefs do so. Here of course it must be taken into account that only a small majority (52%) of the respondents identify themselves with a certain religion.

Practice Experiences

Attitudes, generally speaking, may be shaped by affect, personal values and beliefs, and past experiences (Henerson et al, 1987). In order to strengthen the dimension of professional experience, the study included questions about social workers' actual experiences with the theme of religion and spirituality in the context of the helping relationship.

Firstly, respondents were asked which religions/spiritual forms they had encountered in their practice. Almost all of them had met not only Lutherans, but also several Christian minorities. A large majority (88%) had met Muslims, and 20% Buddhists and/or Hindus. Some (34%) had met clients with contemporary forms of spirituality such as "New age".

A large majority (84%) of the respondents reported that they have been sometimes, or often, aware that a client may have religious matters as part of their situation. Another 53% reported that they sometimes/often have met clients who directly raised issues connected to religious beliefs during the social work consultation. A smaller percentage (45%) have sometimes/often observed that religious aspects have been an underlying factor in the client's presenting problems.

Social worker neutrality on religion/spirituality.

A large majority (85%) reported that they never/seldom have raised issues about religion/spirituality in a consultation without the client's initiative to bring it up. This is in line with the fact that 70% of the respondents agreed that social workers should only raise the topic of religion/spirituality if the client has asked for this.

The category 'neutral' was a popular response on many of the likert-type questions included in the survey. Based on comments, furthermore, on the open-ended qualitative question at the end of the survey, respondents were sensitive about client self-determination as it pertained to religion and spirituality. Thus, for a majority of respondents, the legitimacy and initiative of raising issues of religion and spirituality in the helping relationship rests with the client.

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APPENDIX ONE

Survey Instrument for the 2000 United Kingdom Study

The Role of Religion and Spirituality in Social Work Practice

The following questions ask your views about the appropriate role of religion and spirituality in social work practice. To aid you in responding to these questions, definitions are provided below. You will note that, for the purposes of this study, spirituality is more broadly defined than religion. Therefore, some questions address spirituality in both religious and non-religious forms. Some questions distinguish between religion and non-sectarian approaches to spirituality. When all forms of spirituality are intended both spirituality and religion will be mentioned in the question.

Religion is an organized structured set of beliefs and practices shared by a community related to spirituality.

Spirituality involves the search for meaning, purpose, and morally fulfilling relations with self, other people, the encompassing universe, and ultimate reality however a person understands it. Spirituality may be expressed through religious forms, but is not limited to them.

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. It is appropriate for a social worker to raise the topic of *religion* when dealing with a client........					
a. Who has a *terminal illness*.	1	2	3	4	5
b. Who has a *substance abuse disorder*.	1	2	3	4	5
c. Who is preparing to become a *foster parent*.	1	2	3	4	5
d. Who is recovering from *sexual abuse*.	1	2	3	4	5
e. Who is or has *experienced partner violence*.	1	2	3	4	5
f. Who is suffering the effects of a *natural disaster* (i.e. flood) or *catastrophe* (i.e. airline/train crash).	1	2	3	4	5
g. Who is *bereaved*.	1	2	3	4	5
h. Who is suffering from a chronic *mental disorder*.	1	2	3	4	5
i. Who is suffering from a *loss of job*.	1	2	3	4	5
j. Who is experiencing *difficulty in family relations*.	1	2	3	4	5
k. Who is involved in the *criminal justice system*.	1	2	3	4	5
2. It is appropriate for a social worker to raise the topic of *spirituality* when dealing with a client........					
a. Who has a *terminal illness*.	1	2	3	4	5
b. Who has a *substance abuse disorder*.	1	2	3	4	5
c. Who is preparing to become a *foster parent*.	1	2	3	4	5
d. Who is recovering from *sexual abuse*.	1	2	3	4	5
e. Who is or has *experienced partner violence*.	1	2	3	4	5

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
f. Who is suffering the effects of a *natural disaster* (i.e. flood) or *catastrophe* (i.e. airline/train crash).	1	2	3	4	5
g. Who is *bereaved*.	1	2	3	4	5
h. Who is suffering from a chronic *mental disorder*.	1	2	3	4	5
i. Who is suffering from a *loss of job*.	1	2	3	4	5
j. Who is experiencing *difficulty in family relations*.	1	2	3	4	5
k. Who is involved in the *criminal justice system*.	1	2	3	4	5
3. Informing a client of the social worker's *religious/spiritual belief system*, or lack thereof, is important when establishing the helping relationship.	1	2	3	4	5
4. Taking a *religious history* of the client should be a part of intake and assessment.	1	2	3	4	5
5. Taking a *spiritual history* of the client should be part of intake and assessment even when the client is not religious.	1	2	3	4	5

The following section lists various interventions, which could be performed with clients. Please indicate by circling "yes" or "no" for the behavior listed: (1) the interventions that you yourself have done with clients; and (2) whether or not you believe the interventions to be appropriate for social work practice.

	Have Personally Done w/Clients		Is Appropriate Social Work Intervention	
6. Use or recommend religious or spiritual books or writings.	Yes	No	Yes	No
7. Pray privately for a client.	Yes	No	Yes	No
8. Pray with a client.	Yes	No	Yes	No
9. Mediate privately to prepare for seeing a client.	Yes	No	Yes	No
10. Use religious language or concepts.	Yes	No	Yes	No
11. Use nonsectarian spiritual language or concepts.	Yes	No	Yes	No
12. Recommend participation in a religious or spiritual support system or activity.	Yes	No	Yes	No
13. Touch clients for "healing" purposes.	Yes	No	Yes	No
14. Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).	Yes	No	Yes	No

(OVER)

	Have Personally Done w/Clients		Is Appropriate Social Work Intervention	
15. Participate in client's religious/spiritual rituals as a practice intervention.	Yes	No	Yes	No
16. Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.	Yes	No	Yes	No
17. Discuss the role of religious or spiritual beliefs in relation to significant others.	Yes	No	Yes	No
18. Assist clients to reflect critically on religious or spiritual beliefs or practices.	Yes	No	Yes	No
19. Help clients assess the meaning of spiritual experiences that occur in dreams.	Yes	No	Yes	No
20. Help clients consider the spiritual meaning and purpose of his or her current life situation.	Yes	No	Yes	No
21. Help clients reflect on their belief about what happens after death.	Yes	No	Yes	No
22. Help clients consider ways their religious/spiritual support systems are helpful.	Yes	No	Yes	No
23. Help clients consider ways their religious/spiritual support systems are harmful.	Yes	No	Yes	No

24. Have you ever referred a client to a clergy person, or other religious/spiritual helpers or leaders? (Please tick the appropriate blank.)

_____ Yes (If yes, continue with question 25)

_____ No (If no, please skip to question 27)

25. Do problems concerning differences of beliefs or values between social workers and *religious/spiritual leaders* prevent such referrals? (Please tick one response.)

____ Never ____ Seldom ____ Occasionally ____ Sometimes ____ Always

26. Does social workers' lack of trust or confidence in *religious/spiritual leaders* prevent such referrals? (Please tick one response.)

____ Never ____ Seldom ____ Occasionally ____ Sometimes ____ Always

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
27. In general, social workers should introduce *spirituality* according to their professional judgment.	1	2	3	4	5
28. In general, social workers should address, *religion/spirituality* only if the client first expresses interest.	1	2	3	4	5

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
29. Helping clients assess whether they wish to work on *forgiveness* is an important part of social work practice.	1	2	3	4	5
30. In my practice, I use techniques that deal with *forgiveness* (e.g. assisting clients to forgive themselves, forgive others and seek forgiveness).	1	2	3	4	5
31. *Spirituality* is a fundamental aspect of being human.	1	2	3	4	5
32. Social workers should become more knowledgeable than they are now about *spiritual matters*.	1	2	3	4	5
33. Social work practice with a spiritual component has a better chance to empower clients than practice without such a component.	1	2	3	4	5
34. Integrating religion and spirituality in social work practice conflicts with social work's mission.	1	2	3	4	5
35. Integrating religion and spirituality in social work practice conflicts with the BASW Code of Ethics.	1	2	3	4	5
36. Social Workers, in general, *do not* possess the *skill* to assist clients in *religious/spiritual* matters.	1	2	3	4	5

37. In your social work education have you received content on religious or spiritual issues? (Please tick the appropriate one.) _____ Yes _____ No

Religiosity/Spirituality Scale

38. During your school years, how often did you participate in religious community services? (Please tick one response.)
___ Daily to once a week ___ 1-3 times a month ___ 2-6 times a year ___ Once a year or less

39. How frequently do you *currently* participate in religious services (such as going to church, temple, or other places of religious activity)? (Please tick one response.)
___ Daily to once a week ___ 1-3 times a month ___ 2-6 times a year ___ Once a year or less

40. Indicate your present relationship to an organized religion or spiritual support group. (Please tick one response.)
___ Active participation, high level of involvement
___ Regular participation, some involvement
___ Identification with religion or spiritual group, very limited or no involvement.
___ No identification, participation, or involvement with religious or spiritual group
___ Disdain and negative reaction to religion or spiritual tradition

41. How frequently do you currently participate in *private*, religious or spiritual practices (e.g. meditation, visualization, reading scriptural texts, prayer, etc.)? (Please tick one response.)
___ Daily to once a week ___ 1-3 times a month ___ 2-6 times a year ___ Once a year or less

(OVER)

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
42. I feel negative about the *religious* experiences of my childhood.	1	2	3	4	5
43. I feel negative about the *spiritual* experiences of my childhood.	1	2	3	4	5
44. I feel negative about my *religious* experiences in the present.	1.	2	3	4	5
45. I feel negative about my *spiritual* experiences in the present.	1	2	3	4	5

Demographic Information

46. What is your present age? _____ Years

47. What is your gender? _____ Male _____ Female

48. What is your racial orientation? (Please tick one response.)
___ Black ___ White ___ Other (please specify) _____

49. What is your ethnic orientation? (Please tick one response.)
___ African ___ Bangladeshi ___ Caribbean
___ Chinese ___ European (UK) ___ European (other)
___ Indian ___ Pakistani ___ Other (please describe)_____

50. In which country in the United Kingdom do you practice social work? (Please tick one response.)
___ England ___ Northern Ireland ___ Scotland ___ Wales

51. What is your current religious affiliation or spiritual orientation? (Select the one response that most closely identifies your current religious or spiritual status.)
___ Agnostic   ___ Existentialist   ___ Spiritism or Shamanistic
___ Atheist   ___ Goddess religion   ___ Other: _____
___ Buddhist   ___ Hindu   ___ Multiple non-religious orientation (any
Christian: Jewish: combination of atheist, agnostic, existen-
___ Catholic   ___ Liberal   tialist, and Non-affiliated Jewish)
___ Protestant   ___ Orthodox   ___ Multiple religious orientation (any
___ Eastern Orthodox ___ Reform   religious orientation in combination with
___ Non-denomination ___ Non-affiliated   any other religious or spiritual
___ Other: (please describe)_____   orientations; i.e. Christian and Buddhist)
___ Confucianism   ___ Rastafarianism   ___ Muslim
___ None

52. Education qualification (Please tick the highest level of education attained.)
___ GCSE or equivalent (1)   ___ Advanced level or equivalent (2)
___ Degree (3)   ___ Post Graduate Qualification (4)

53. Professional qualification. (Please tick as appropriate.)
___ DipSW or equivalent
___ Other Professional Qualifications (please indicate what they are.) _____
___ Post Qualifying or Advanced Award in Social Work

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54. What is your current area of practice? (Please tick as many as appropriate.)
___ Children & Families   ___ Day Care   Vulnerable Populations
___ Hospital Social Work   ___ Field Work   ___ Learning Difficulties
___ Mental Health   ___ Residential Work   ___ Elderly
                 ___ Physical Disabilities

55. As a social worker, do you work: ___ Full-time   ___ Part-time

56. Number of years you have been in social work practice?
Before qualifying ___ Years ___ Months
After qualifying ___ Years ___ Months

57. Is your primary work setting: ___ Statutory ___ Voluntary ___ Private

58. Your practice is for the most part: ___ Rural ___ Suburban ___ Urban

59. Are you a member of BASW?   ___ Yes   ___ No

Definitions of Religion, Spirituality, and Faith

For the purpose of this research, we gave you definitions of religion and spirituality to use when completing the questions. Now we would like to know how *you personally* define these terms. Please tick all of the following terms associated with religion or spirituality that apply.

60. How would you define *religion*? (Please tick as many as you think apply.)
___ meaning   ___ organization   ___ values   ___ purpose   ___ community
___ ethics   ___ belief   ___ personal   ___ miracles   ___ sacred texts
___ ritual   ___ morality   ___ prayer   ___ scripture   ___ meditation
___ personal relationship with the divine or higher power

61. How would you define *spirituality*? (Please tick as many as you think apply.)
___ meaning   ___ organization   ___ values   ___ purpose   ___ community
___ ethics   ___ belief   ___ personal   ___ miracles   ___ sacred texts
___ ritual   ___ morality   ___ prayer   ___ scripture   ___ meditation
___ personal relationship with the divine or higher power

62. How would you define *faith*? (Please tick as many as you think apply.)
___ meaning   ___ organization   ___ values   ___ purpose   ___ community
___ ethics   ___ belief   ___ personal   ___ miracles   ___ sacred texts
___ ritual   ___ morality   ___ prayer   ___ scripture   ___ meditation
___ personal relationship with the divine or higher power

63. Please use the space below to make any additional comments you would like about the topic of religion of spirituality, especially as it relates to social work practice and your education as a social worker.

_____

_____

_____

_____

Directions For Return: The completed survey can be returned by folding it over so that the postage paid return mailing address is exposed and sealing it with cellophane tape. Thank you for your response.

APPENDIX TWO

Survey Instrument for the 2008 USA Study

The Role of Religion and Spirituality in Social Work Practice

The following questions ask your views about the appropriate role of religion and spirituality in social work practice. If you prefer to complete a convenient online version of the survey please go to **www.spiritualityreligionsurvey.com**. As previously stated in the attached letter, your access code is: _____. Please note that if you choose to use the on-line option you do not need to return this paper version of the survey instrument.

To aid you in responding to these questions, definitions are provided below. You will note that, for the purposes of this study, spirituality is more broadly defined than religion. Therefore, some questions address spirituality in both religious and non-religious forms. Some questions distinguish between religion and non-sectarian approaches to spirituality. When all forms of spirituality are intended both spirituality and religion will be mentioned.

Religion is an organized structured set of beliefs and practices shared by a community related to spirituality.

Spirituality involves the search for meaning, purpose, and morally fulfilling relations with self, other people, the encompassing universe, and ultimate reality however a person understands it. Spirituality may be expressed through religious forms, but is not limited to them.

Part I. Assessment. Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The constitutional principle of separation of church and state prevents social workers from dealing with *religion* in their practice.	1	2	3	4	5
2. The constitutional principle of separation of church and state prevents social workers from dealing with *non-sectarian spiritual matters* in their practice.	1	2	3	4	5
3. Informing a client of the social worker's *religious/spiritual belief system*, or lack thereof, is important when establishing the helping relationship.	1	2	3	4	5
4. Taking a *religious history* of the client should be part of intake and assessment.	1	2	3	4	5
5. Taking a *spiritual history* of the client should be part of intake and assessment even when the client is not religious.	1	2	3	4	5

6. It is appropriate for a social worker to raise the topic of *RELIGION* when dealing with a client . . .	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a. Who has a *terminal illness*.	1	2	3	4	5
b. Who has a *substance abuse disorder*.	1	2	3	4	5
c. Who is preparing to become a *foster parent*.	1	2	3	4	5
d. Who is preparing to become an *adoptive parent*.	1	2	3	4	5
e. Who is experiencing difficulties in *child or adolescent development*.	1	2	3	4	5
f. Who is recovering from *sexual abuse*.	1	2	3	4	5
g. Who is or has *experienced partner violence*.	1	2	3	4	5

(Please Page Over to Continue)

6. (Continued) It is appropriate for a social worker to raise the topic of _RELIGION_ when dealing with a client ...	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
h. Who is suffering from the effects of a *natural disaster* (flood, hurricane, tornado, earthquake, etc.).	1	2	3	4	5
i. Who is *bereaved*.	1	2	3	4	5
j. Who has a *chronic mental disorder*.	1	2	3	4	5
k. Who is suffering from a *loss of job*.	1	2	3	4	5
l. Who is experiencing *difficulty in family relations*.	1	2	3	4	5
m. Who is involved in the *criminal justice system*.	1	2	3	4	5
n. Who is experiencing oppression related to *race, ethnicity, or national origin*.	1	2	3	4	5
o. Who is experiencing oppression due to *gender*.	1	2	3	4	5
p. Who is experiencing oppression due to *sexual orientation*.	1	2	3	4	5
q. Who is experiencing oppression due to *older adulthood*.	1	2	3	4	5
r. Who is experiencing oppression due to *political beliefs*.	1	2	3	4	5
s. Who is experiencing oppression due to *religion, or religious beliefs*.	1	2	3	4	5
t. Who is experiencing oppression due to *disability*.	1	2	3	4	5
u. Who is experiencing oppression due to *poverty*.	1	2	3	4	5

7. It is appropriate for a social worker to raise the topic of _SPIRITUALITY_ when dealing with a client	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a. Who has a *terminal illness*.	1	2	3	4	5
b. Who has a *substance abuse disorder*.	1	2	3	4	5
c. Who is preparing to become a *foster parent*.	1	2	3	4	5
d. Who is preparing to become an *adoptive parent*.	1	2	3	4	5
e. Who is experiencing difficulties in *child or adolescent development*.	1	2	3	4	5
f. Who is recovering from *sexual abuse*.	1	2	3	4	5
g. Who is or has *experienced partner violence*.	1	2	3	4	5
h. Who is suffering from the effects of a *natural disaster* (flood, hurricane, tornado, earthquake, etc.).	1	2	3	4	5
i. Who is *bereaved*.	1	2	3	4	5
j. Who has a *chronic mental disorder*.	1	2	3	4	5
k. Who is suffering from a *loss of job*.	1	2	3	4	5

(Please Page Over to Continue)

7. (Continued) It is appropriate for a social worker to raise the topic of *SPIRITUALITY* when dealing with a client...	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
l. Who is experiencing *difficulty in family relations*.	1	2	3	4	5
m. Who is involved in the *criminal justice system*.	1	2	3	4	5
n. Who is experiencing oppression related to *race, ethnicity, or national origin*..	1	2	3	4	5
o. Who is experiencing oppression due to *gender*.	1	2	3	4	5
p. Who is experiencing oppression due to *sexual orientation*.	1	2	3	4	5
q. Who is experiencing oppression due to *older adulthood*.	1	2	3	4	5
r. Who is experiencing oppression due to *political beliefs*.	1	2	3	4	5
s. Who is experiencing oppression due to *religion, or religious beliefs*.	1	2	3	4	5
t. Who is experiencing oppression due to *disability*.	1	2	3	4	5
u. Who is experiencing oppression due to *poverty*.	1	2	3	4	5

Part II. Helping Interventions. The following section lists various interventions, which could be performed with clients. Please indicate by circling 'yes' or 'no' for the behavior listed: (1) the interventions that you yourself have done with clients; and (2) whether or not you believe the interventions to be appropriate for social work practice.

	Have Personally Done with Clients?		Is Appropriate Social Work Intervention?	
8. Use or recommend religious or spiritual books or writings.	YES	NO	YES	NO
9. Pray privately for a client.	YES	NO	YES	NO
10. Pray with a client.	YES	NO	YES	NO
11. Meditate privately to prepare for seeing a client.	YES	NO	YES	NO
12. Meditate with a client.	YES	NO	YES	NO
13. Use religious language or concepts.	YES	NO	YES	NO
14. Use nonsectarian spiritual language or concepts.	YES	NO	YES	NO
15. Recommend participation in a religious or spiritual support system or activity	YES	NO	YES	NO
16. Touch clients for "healing" purposes	YES	NO	YES	NO
17. Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).	YES	NO	YES	NO
18. Participate in client's religious/spiritual rituals as a practice intervention.	YES	NO	YES	NO
19. Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.	YES	NO	YES	NO
20. Discuss the role of religious or spiritual beliefs in relation to significant others.	YES	NO	YES	NO

	Have Personally Done with Clients?		Is Appropriate Social Work Intervention?	
21. Assist clients to reflect critically on religious or spiritual beliefs or practices.	YES	NO	YES	NO
22. Help clients assess the meaning of spiritual experiences that occur in dreams.	YES	NO	YES	NO
23. Help clients consider the spiritual meaning and purpose of their current life situations.	YES	NO	YES	NO
24. Help clients reflect on their belief about what happens after death.	YES	NO	YES	NO
25. Help clients consider the ways their religious/spiritual support systems are helpful.	YES	NO	YES	NO
26. Help clients consider the ways their religious/spiritual support systems are harmful.	YES	NO	YES	NO
27. Refer clients to a clergy person, or other religious/spiritual helpers or leaders?	YES	NO	YES	NO
28. Collaborate with a clergy person or other religious/spiritual leaders?	YES	NO	YES	NO

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
29. In general, social workers should introduce *religion/spirituality* according to their professional judgment even if clients do not first express interest.	1	2	3	4	5
30. In general, social workers should address *religion/spirituality* only if the client first expresses interest.	1	2	3	4	5
31. Helping clients assess whether they wish to work on *forgiveness* is an important part of social work practices.	1	2	3	4	5
32. In my practice, I use techniques that deal with *forgiveness* (e.g. assisting clients to forgive themselves, forgive others and seek forgiveness).	1	2	3	4	5
33. *Spirituality* is a fundamental aspect of being human.	1	2	3	4	5
34. Social workers should become more knowledgeable than they are now about *spiritual matters*.	1	2	3	4	5
35. Social workers should become more knowledgeable than they are now about *religious matters*.	1	2	3	4	5
36. Social work practice with a spiritual component has a better chance to empower clients than practice without such a component.	1	2	3	4	5
37. Integrating religion and spirituality in social work practice conflicts with social work's mission.	1	2	3	4	5
38. Integrating religion and spirituality in social work practice conflicts with the NASW Code of Ethics.	1	2	3	4	5

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
39. Social workers, in general, *do not* possess the skill to assist clients in *religious/spiritual matters*.	1	2	3	4	5

Social Work Curriculum and Education

40. In your social work education have you received content on religious or spiritual issues? ☐ YES   ☐ NO

Part III. Religiosity/Spirituality Scale

41. During your *elementary school years*, how often did you participate in religious services (such as going to church, temple, or other places of religious activity)? *(Please check the most accurate response)*.

☐ Daily to once a week   ☐ 2-3 times a month   ☐ 5-6 times a year   ☐ Once a year
☐ Once a week   ☐ Once a month   ☐ 2-4 times a year   ☐ Not at all

42. How frequently do you *currently* participate in religious services (such as going to church, temple, or other places of religious activity)? *(Please check the most accurate response)*.

☐ Daily to once a week   ☐ 2-3 times a month   ☐ 5-6 times a year   ☐ Once a year
☐ Once a week   ☐ Once a month   ☐ 2-4 times a year   ☐ Not at all

43. How frequently do you currently participate in *private*, religious or spiritual practices (e.g. meditation, visualization, reading scriptural texts, prayers, etc.)? *(Please check the most accurate response)*.

☐ Daily to once a week   ☐ 2-3 times a month   ☐ 5-6 times a year   ☐ Once a year
☐ Once a week   ☐ Once a month   ☐ 2-4 times a year   ☐ Not at all

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion.	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
44. I feel negative about the *religious* experiences of my childhood.	1	2	3	4	5
45. I feel negative about the *spiritual* experiences of my childhood.	1	2	3	4	5
46. I feel negative about my *religious* experiences in the present.	1	2	3	4	5
47. I feel negative about my *spiritual* experiences in the present.	1	2	3	4	5

Part IV. Demographic Information

48. Please write in your age: _____ Years

49. What is your gender? Male ☐ Female ☐

50. What is your race/ethnic group? *(Please check one response)*

☐ African-American   ☐ Caucasian/EuroAmerican
☐ Latino/Hispanic American   ☐ Bi-racial/Multi-racial: _____
☐ Asian-American/Pacific Islander
☐ Native American/American   ☐ Other: _____
   Indian/Alaskan Native

(Please Page Over to Continue)

51. What is your current sole or primary religious affiliation or spiritual orientation? *(Please check one response).*

☐ Agnostic   ☐ Confucianism   ☐ Muslim
☐ Atheist   ☐ Existentialist   ☐ Spiritism or Shamanistic
☐ Buddhist   ☐ Goddess Religion   ☐ Traditional Native American Spirituality
Christian: Jewish: ☐ Wicca
  ☐ Catholic   ☐ Reform   ☐ Other Religious/Spiritual
  ☐ Protestant   ☐ Orthodox   Orientation: _____
  ☐ Eastern Orthodox   ☐ Conservative
  ☐ Non-denominational   ☐ Non-affiliated
  ☐ Other Christian: ☐ Other Jewish:
  _____   _____

52. Please indicate if you affiliate with a single or multiple religious or spiritual orientation *(Please check one response)*:

☐   Only one religious affiliation (e.g. Protestant Christian or Buddhist)

☐   Multiple religious orientation (Any religious orientation in combination with any other religious or spiritual orientation (e.g. Catholic and Buddhist; Buddhist and Existentialist))

☐   Multiple non-religious orientation (Any combination of Agnostic, Atheist, Existentialist, and non-affiliated Jewish)

53. How *religious* would you say you are? ☐ Very Religious   ☐ Somewhat Religious   ☐ Not at all Religious

54. How *spiritual* would you say you are? ☐ Very Spiritual   ☐ Somewhat Spiritual   ☐ Not at all Spiritual

55. EDUCATION *(Please check the highest level of education attained).*

☐ BA   ☐ BSW   ☐ MS/MA   ☐ MSW   ☐ PhD   ☐ Post Doctorate

56. What is your current primary area of practice? *(Please check only one response)*

☐ Aging   ☐ Criminal Justice   ☐ Occupational SW-EAP   ☐ Vulnerable Populations
☐ Child-Family Welfare   ☐ Medical Health Care   ☐ School Social Work   ☐ Other:
☐ Community Organization   ☐ Mental Health   ☐ Substance Abuse   _____
  or Development

57. Number of years you have been in social work practice: _____ Years

58. Is your primary work setting: ☐ Private   ☐ Public

59. My practice is for the most part: ☐ Rural   ☐ Suburban   ☐ Urban

60. Did you participate in the original 1997 survey?   ☐ **YES**   ☐ **NO**

Part V. Definitions of Religion, Spirituality, and Faith
For the purpose of this research, we gave you definitions of religion and spirituality to use when completing the questions. Now we would like to know how *you personally* define these terms. *Please check as many of the words, if any, that you think best define religion, spirituality, and faith.*

61. How would you define *religion*? *(Please check as many of the words, if any, that you think best define religion)*

☐ meaning   ☐ organization   ☐ values   ☐ Personal relationship with the divine or higher power
☐ purpose   ☐ community   ☐ ethics   ☐ sacred texts
☐ belief   ☐ personal   ☐ miracles   ☐ scripture
☐ ritual   ☐ morality   ☐ prayer
☐ meditation

62. How would you define *spirituality*? *(Please check as many of the words, if any, that you think best define spirituality)*

☐ meaning   ☐ organization   ☐ values   ☐ Personal relationship with the divine or higher power
☐ purpose   ☐ community   ☐ ethics   ☐ sacred texts
☐ belief   ☐ personal   ☐ miracles   ☐ scripture
☐ ritual   ☐ morality   ☐ prayer
☐ meditation

63. How would you define *faith*? *(Please check as many of the words, if any, that you think best define faith)*

☐ meaning   ☐ organization   ☐ values   ☐ Personal relationship with the divine or higher power
☐ purpose   ☐ community   ☐ ethics   ☐ sacred texts
☐ belief   ☐ personal   ☐ miracles   ☐ scripture
☐ ritual   ☐ morality   ☐ prayer
☐ meditation

Part VI. Optional Section
In order to learn more about your views on the topic of religion and spirituality as it relates to social work practice and your education as a social worker, we have two open ended questions that we invite you to answer. (Please remember this is optional).

64. Please indicate any specific areas for which you think content on religious or spiritual issues is particularly relevant in your education as a social worker? (e.g. diversity, client problems and strengths, life stages, service settings, policy, research, etc.). *Please print or write legibly.*

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65. Please describe appropriate or inappropriate uses of religion and spirituality in social work practice (in clinical practice, administration, community work, advocacy, policy, etc.). *Please print or write legibly.*

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Directions for return: The completed survey can be returned by folding it over so that the postage paid return mailing address is exposed, and sealing it with *cellophane tape*. Again, thanks for your response.

If you completed this paper survey, please do not complete the online version. If you would like to see a summary of the results, they will be posted at www.spiritualityreligionsurvey.com by approximately August 1, 2008.