

RELIGION AND SPIRITUALITY IN NORWEGIAN SOCIAL WORK PRACTICE

Executive Report

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INTRODUCTION

The growth of service populations with minority religions, and the quest for religious and spiritual fulfillment by people in general, have had an impact on how practitioners assess the importance of integrating religion and spirituality into their social work practice (Zahl & Furman, 2005). As the first, and only, national studies of their kind, survey research was conducted in the US (1997) and replicated in Norway (2002) to examine social workers' views on spirituality, both religious and non-religious, in relation to social work practice and education. Although US social workers have explored and debated religion and spirituality in social work practice and policy-making in greater depth, it was not clear as to how the subject would be received among social workers in the Nordic model of modern welfare states.

North American and European countries often study the Nordic model's approach to social welfare policy and practices. According to Salonen (2001), the Nordic countries (i.e. Sweden, Norway, Finland, and Denmark) often serve as idealized and prototypical examples of the institutional welfare model, and that "there is strong evidence that these Nordic countries form a distinct group in international comparisons" (144). In 1999, the Norwegian General Plan and Regulations, upon which all 3-year social work training programs is based, included a spiritual component (Rammeplan, 1999). The social work profession in Norway has been slow to respond to these new governmental requirements as noted by the absence of discussions, conferences, and publications, regarding how these requirements should be implemented. To date, only this study has examined the views and attitudes of Norwegian social work

practitioners about integrating religion and spirituality into curriculum and practice. Additionally, Norway has experienced an increase of service populations with diverse religious and spiritual world views.

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 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 nonreligious forms. When all aspects of spirituality were intended, both spirituality and religion were used in the question.

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 were also 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 United Kingdom survey instrument was translated from English into Norwegian. 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.

METHODOLOGY

The Norway sample was culled from the membership mailing lists of the Norwegian Union of Social Educators and Social Workers (FO). Among the 6,011 social work members of the FO, 2,000 employed social workers were randomly sampled and 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 not allowed. The FO and the European Union have strict guidelines in place to

protect the anonymity of respondents. The study, however, was introduced in the national journal (Embla) published by the Norwegian Social Work Union and a general reminder was published therein. Some envelopes came back to the sender due to wrong addresses, but 601 survey instruments (which is the equivalent of 10% of the total FO membership) were completed and returned for a return rate of 30.3 %.

The questionnaire was 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.

In Norway, the data were pre-coded and scanned. Also, a multinational team was used to guard against cultural bias in the design of the survey instrument and in the interpretation of the findings. It was expected that those social workers who had an active interest in the subject of religion and spirituality, either pro or con, would complete and return the questionnaire. 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 by a native Norwegian speaker, and then discussed with students in social work, social work faculty, social workers in practice, and faculty of a religion department.

FINDINGS

Sample Characteristics

Limited information regarding the FO's membership was available. In terms of gender, the Norway sample mirrored the FO membership (81% women, 19% men). The age range for this survey was 23 to 83 years old, with a mean age of 43 years. The frequencies and percentages for the following demographic variables are reported in Table 1A: gender, region, race/ethnicity, areas of practice, primary work setting, location of practice, and employment level.

Table 1A. Sample Characteristics

Demographic Indicator	Category	Frequency	Percentage (%)
Gender	Female	488	81.2
	Male	112	18.6
	Not Reported	1	0.2
Race/Ethnicity	Norwegian	563	93.7
	Saami	4	0.7
	Other	30	5.0
	Not Reported	4	0.7
Areas of Practice	Child Welfare	130	21.6
	Psychiatric Hospital	48	8.0
	Hospital	18	3.0
	Criminal Justice	5	0.8
	Prison	1	0.2
	Sosialtjenesten	135	22.5
	Child Psychiatry	34	5.7
	School	7	1.2
	Juvenile Group	1	0.2
	Elder Care	7	1.2
	Family Welfare	7	1.2
	PP-tjeneste	7	1.2
	Attføring	4	0.7
	Kollektiv	5	0.8
	Flyktningekontor	13	2.2
	Other	150	25.0
	Not Reported	29	4.8
Primary Work Setting	Statutory	540	89.9
	Voluntary	6	1.0
	Private	45	7.5
	Not Reported	10	1.7
Location of Practice	Rural	158	26.3
	Suburban	208	34.6
	Urban	227	37.8
	Not Reported	8	1.3
Employment Level	Full Time	496	82.5
	Part Time	80	13.3
	Not Reported	25	4.2

Table 1B describes the accreditation and educational degrees of the Norwegian sample.

**Table 1b. Sample Characteristics
(Accreditation and Other Educational Degrees)**

Demographic Indicator	Category	Frequency	Percentage (%)
Accrediting School	Alta	17	2.8
	Bodø	22	3.7
	Trondheim	116	19.3
	Volda	9	1.5
	Sogndal	18	3.0
	Bergen	24	4.0
	Stavanger	85	14.1
	Kristiansand	22	3.7
	Oslo NKN	17	2.8
	Oslo NKSH	122	20.3
	Oslo Diasos	93	15.5
	Lillehammer	24	4.0
	Other	29	4.8
	Not Reported	3	0.5
Other Academic Degree Held by Respondent	Cand. mag.	243	40.4
	Cand. socion	4	0.7
	Cand. polit.	11	1.8
	Other Qualification	189	31.5
	Other Degree Not Reported	154	25.6

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 (65%, n=390) were exclusively Christian. Many of the respondents who reported multiple religious affiliations considered themselves to be Christian. Overall, a majority of the Norwegian respondents (68%, n=403) reported a single religious affiliation.

Atheists represented 2% (n=13) of the Norwegian respondents; another 14% (n=86) reported an affiliation with Existentialism/Humanism. Finally, 13% (n=80) of the Norwegian social workers reported that they did not have any religious or nonreligious affiliations. Missing data accounted for 3% (n=20) of the Norwegian social workers.

Table 2. Current Religious Affiliations/Spiritual Orientations of Social Workers

	Affiliation/Orientation	Frequency (n=601)	Percentage (%)
Religious Affiliations and Orientations	Lutheran (State Church)	360	59.9
	Other Evangelical Church	25	4.2
	Catholic	5	0.8
	Subtotal (Christian)	390	64.9
	Muslim	2	0.3
	Buddhist	3	0.5
	Jewish	1	0.2
	Other	6	1.0
Non-Religious Affiliations and Orientations	Atheist	13	2.2
	Humanist	86	14.3
No Affiliation / Orientation or Not Reported	No Affiliation/Orientation	80	13.3
	Not reported	20	3.3

Practice 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 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, and sexual abuse. A majority of the Norwegian social workers in our study believed that it is appropriate to raise the topic of spirituality in a nonsectarian manner only with clients facing a terminal illness, with clients planning to become foster 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 over 50% of 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

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 <i>terminal illness</i> .	43.3	3.03	1.25	66.3	3.58	1.11
Who has a <i>substance abuse disorder</i> .	14.0	2.41	1.03	45.7	3.13	1.08
Who is preparing to become a <i>foster parent</i> .	52.5	3.22	1.27	70.2	3.72	1.04
Who is recovering from <i>sexual abuse</i> .	10.1	2.23	0.99	31.8	2.86	1.11
Who is or has experienced <i>partner violence</i> .	8.8	2.23	0.98	29.6	2.82	1.09
Who is suffering the effects of a <i>natural disaster</i> (i.e. flood) or <i>catastrophe</i> (i.e. airline/train crash)	18.0	2.50	1.08	41.6	3.07	1.10
Who is bereaved.	41.0	3.02	1.15	62.4	3.47	1.09
Who is suffering from a chronic <i>mental disorder</i> .	11.0	2.30	0.99	32.8	2.86	1.09
Who is suffering from a <i>loss of job</i> .	5.7	2.10	0.91	21.6	2.64	1.04
Who is experiencing <i>difficulty in family relations</i> .	8.2	2.23	0.96	30.9	2.84	1.08
Who is involved in the <i>criminal justice system</i> .	6.6	2.16	0.93	29.7	2.79	1.10

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

This study revealed that less than half of the respondents (43.1%, n=259) received content on spirituality or religion in their social work education. Nearly 42% (n=251) felt that social workers in general do not possess the skill to assist clients in religious/spiritual matters. A large majority (71.7%, n=431) of the respondents also felt that social workers should become more knowledgeable about spiritual matters. 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 (40.3% n=242 felt that it could, 19.5% n=117 felt that it could not, and 39.6% n=238 were neutral on the subject).

Ethical Guidelines for Using Spiritually Based Helping Activities

The survey identified a wide range of spiritually oriented helping practices employed by social workers. (See Table 4)

Table 4. Spiritually-Oriented Helping Activities

Helping Activity	Have Personally Done with Clients		Is an Appropriate Helping Activity (Intervention)	
	Frequency	%	Frequency	%
Use or recommend religious or spiritual books or writings.	112	18.6	258	42.9
Pray privately for a client.	110	18.3	192	31.9
Pray with a client.	22	3.7	114	19.0
Meditate privately to prepare for client.	125	20.8	323	55.2
Use religious language or concepts.	127	21.1	227	37.8
Use non-sectarian spiritual language or concepts	451	75.0	508	84.5
Recommend participation in a religious or spiritual support system or activity.	158	26.3	289	48.1
Touch clients for "healing" purposes.	3	0.5	28	4.7
Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).	73	12.1	185	30.8
Participate in client's religious/spiritual rituals as a practice intervention.	41	6.8	118	19.6
Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.	348	57.9	538	89.5
Discuss the role of religious or spiritual beliefs in relation to significant other.	262	43.6	416	69.2
Assist clients to reflect critically on religious or spiritual beliefs or practices.	186	30.9	342	56.9
Help clients assess the meaning of spiritual experiences that occur in dreams	88	14.6	214	35.6
Help clients consider the spiritual meaning and purpose of his or her current life situation.	242	40.3	408	67.9
Help clients reflect on their belief about what happens after death.	118	19.6	339	56.4
Help clients consider ways their religious/spiritual support systems are helpful.	206	34.3	411	68.4
Help clients consider ways their religious/spiritual support systems are harmful.	178	29.6	390	64.9

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

Only two activities were used by more than 50% of the respondents: 1) using non-sectarian spiritual language or concepts, and 2) encouraging clients to do regular religious/spiritual self-reflective diary-keeping or journal writing. 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 the most directive and intimately involved with a client's personal life space and boundaries. It is understandable that social workers would be cautious about them. Our findings in the area of ethical guidelines reflect these concerns.

Religious and Spiritual Practices of Respondents

Only 8.7% (n=52) of the respondents participated daily to once a week as a child in community religious services. Most of the respondents (63.6%, n=382) never participated as children. Even fewer 4.0% (n=24) participated in community religious services daily to once a week as an adult. Adult participation, however, increased slightly over childhood participation. Over 28% (n=171) still do not participate in community religious services, but 31.9% (n=192) attend once a year or less and 22.6% (n=136) attend two to six times a year. Participation in private religious/spiritual practices, such as meditation and visualization, was keenly divided between those respondents who practice privately daily to once a week (27.1%, n=163), and those who never engage in a private religious/spiritual practice (37.8%, n=227).

A majority of respondents also reported that they did not feel negative about their childhood religious (68.4%, n=411) or spiritual (77.1%, n=463) experiences, nor did they necessarily feel negative about them today as adults [64.8% for religious experiences (n=389), and 78.9% for spiritual experiences (n=474)]. Only 11.1% (n=67), however, reported some involvement with an organized religion or spiritual group. Even fewer (6.2%, n=37) reported a high level of involvement. Conversely, 30.8% (n=185) reported no involvement in, or a negative reaction (0.3%, n=2) to, a religious or spiritual group.

Referral of client to clergy or spiritual leader

Over 44% (n=267) of responding social workers 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 occasionally (46.4%, n=279), sometimes (16.8%, n=101), or always (1.7%, n=10). Similarly, many of the respondents felt that social workers' lack of trust or confidence in religious/spiritual leaders prevented referrals occasionally (47.9%, n=288), sometimes (21.1%, n=127), or always (1.0%, n=6).

Forgiveness Issues

Two questions were asked that dealt with forgiveness issues. Only 28.6% (n=172) of the respondents felt that it was an important part of social work practice to help clients with forgiveness issues. A slightly larger percentage of the respondents (31.1%, n=187), however, actually did use forgiveness techniques in sessions.

Informed Consent

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. Over 82% (n=496) of the respondents disagreed that it was important.

Religious History

When asked whether taking a client's religious history or a spiritual history should be part of intake and assessment, only 15.7% (n=94) of the social workers in the study agreed that a religious history should be taken, but 21.4% (n=129) believed that a spiritual history should be taken. This indicates that the respondents felt that taking religious and spiritual histories did not significantly contribute to a client's treatment plan.

FO Ethical Principles

Although 78.5% (n=472) of the respondents felt that spirituality is a fundamental aspect of being human, only 42.7% (n=257) felt that integrating religion and spirituality in social work practice did not conflict with social work's mission, and 39.1% (n=235) did not feel it interfered with the FO Ethical Principles. It should be noted that 31.4% (n=189) of the respondents were neutral about conflicts with the social work mission and 35.6% (n=214) were neutral about conflicts with the FO Ethical Principles.

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 religion and faith, as four of the six descriptors overlapped for some people. The respondents associated 'belief,' 'prayer,' 'ritual,' and 'values' with the concepts of religion and faith. The respondents, however, distinguished between the two by placing 'sacred texts' and 'morality' under the domain of religion, and by attributing a personal dimension to the concept of faith. Spirituality, on the other hand, was viewed as being value laden and ethically-oriented, with a strong interpretive and moralistic dimension. (See Table 5)

Table 5. Top Six Descriptors Selected by Respondents for Each Term

<i>Religion</i>	%	<i>Spirituality</i>	%	<i>Faith</i>	%
Belief	94.8	Values	96.3	Belief	81.4
Prayer	89.7	Ethics	95.2	Prayer	67.6
Ritual	82.5	Meaning	81.5	Ritual	66.9
Sacred Texts	74.9	Morality	81.0	Personal Relationship with Divine	58.7
Values	69.4	Personal	67.9	Personal	57.7
Morality	67.6	Purpose	47.8	Values	57.4

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

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