

## **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 practitioner’s 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)**

<b>Demographic Indicator</b>	<b>Category</b>	<b>Frequency</b>	<b>Percentage (%)</b>
<b>10-Year Age Groups</b>	20-29	10	6
	30-39	27	17
	40-49	49	30
	50-59	62	38
	60 and older	14	9
<b>Gender</b>	Female	132	82
	Male	29	18
	Not Reported	1	<1
<b>Race/Ethnicity</b>	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
<b>Professional Qualifications</b>	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
	<b>Areas of Practice</b> <b>(Respondents were asked to select as many practice areas as appropriate)</b>	Child/Family Welfare	92
Corrections		9	6
Hospital Social Work		23	14
Mental Health		39	24
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
<b>Primary Work Setting</b>		Private	33
	Voluntary	18	11
	Statutory/Public	86	53
	Christian Social Services	18	11
	Not Reported	7	4
<b>Location of Practice</b>	Rural	13	8
	Suburban	44	27
	Urban	100	62
	Not Reported	5	3
<b>Employment Level</b>	Full Time	120	74
	Part Time	36	22
	Not Reported	6	4
<b>Highest Level of Education Held by Respondent</b>	School Certificate	14	9
	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 (%)
<b>Singular Religious Affiliations and Orientations</b>	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
	<b>Subtotal (Christian)</b>	<b>86</b>	<b>53</b>
	Jewish Unspecified	1	<1
	Hinduism	1	<1
	Goddess Religion	1	<1
	Spiritism/Shamanism	6	4
Other	23	14	
	<b>TOTAL RELIGIOUS</b>	<b>118</b>	<b>73</b>
<b>Singular Non-Religious Affiliations and Orientations</b>	Agnosticism	9	6
	Atheism	7	4
	Existentialism	2	1
	<b>TOTAL NON-RELIGIOUS</b>	<b>18</b>	<b>11</b>
	<b>TOTAL SINGULAR RELIGIOUS AND NON-RELIGIOUS AFFILIATIONS</b>	<b>136</b>	<b>84</b>
<b>No Affiliation / Orientation</b>	No Affiliation/Orientation	15	9
	<b>GRAND TOTAL SINGULAR ORIENTATIONS</b>	<b>151</b>	<b>93</b>
<b>Multiple Religious Affiliation / Orientation</b>	Any religious orientation in combination with any other religious orientation (e.g. Christian and Buddhist)	8	5
<b>Multiple Non-Religious Affiliation / Orientation</b>	Any combination of atheist, agnostic, existentialist, and Non-affiliated Jewish)	3	2
	<b>GRAND TOTAL MULTIPLE ORIENTATIONS</b>	<b>11</b>	<b>7</b>
	<b>GRAND TOTAL SINGULAR AND MULTIPLE ORIENTATIONS</b>	<b>162</b>	<b>100</b>

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 . . .	<i>Religion</i>			<i>Spirituality</i>		
	% Agree	Mean	SD	% Agree	Mean	SD
Who has a <i>terminal illness</i> .	60	3.46	1.18	81	4.01	0.97
Who has a <i>substance abuse disorder</i> .	32	2.89	1.11	57	3.47	1.11
Who is preparing to become a <i>foster parent</i> .	59	3.48	1.15	64	3.68	1.04
Who is recovering from <i>sexual abuse</i> .	30	2.85	1.12	58	3.47	1.13
Who is or has experienced <i>partner violence</i> .	31	2.87	1.16	54	3.39	1.12
Who is suffering the effects of a <i>natural disaster</i> (i.e. flood) or <i>catastrophe</i> (i.e. airline/train crash)	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 <i>mental disorder</i> .	23	2.69	1.10	46	3.20	1.18
Who is suffering from a <i>loss of job</i> .	24	2.75	1.11	45	3.26	1.13
Who is experiencing <i>difficulty in family relations</i> .	34	2.87	1.14	52	3.39	1.10
Who is involved in the <i>criminal justice system</i> .	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.

### **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; 67% (n=108) 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 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**

<i>Religion</i>	%	<i>Spirituality</i>	%
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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