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Moving beyond acknowledgment: An investigation of the role of spirituality and religion within the professional practice of Social Work in Aotearoa/New Zealand

Blair Stirling

A thesis submitted for the degree of Doctor of Philosophy at the University of Otago, Dunedin, New Zealand.

December 2008
Abstract

For the past two decades there has been an ever expanding interest in the implications of spirituality and, or, religion within the professional practice of social work (Anderson and Angell, 1999; Bishop, Avila-Juarbe, & Thumme, 2003; Cornett, 1992; Northcut, 1999; Northcut, 2000; Praglin, 2004; Sheridan, Wilmer and Atcheson, 1994). Increasingly, scholars and social workers alike have been considering the appropriateness of inclusion and the practical implications involved. This interest has developed to include attention to spirituality within varying ethical codes and definitions of social work. This is evident in international social work organisations such as the IFSW (International Federation of Social Workers) and IASSW (International Association of Schools of Social Work). Both have begun to include religious and, or, spiritual concerns into professional practice principles. In Aotearoa New Zealand the Aotearoa New Zealand Association of Social Workers (ANZASW) is a member of these international bodies; thus the profession is bound to the above principles. Additionally, the Aotearoa New Zealand Social Workers Registration Board (SWRB) code of practice reflects the standards and ethical codes of the ANZASW. Moreover, spirituality and, or, religion is an important aspect for different client groups within the Aotearoa social services context. This is particularly so within bicultural frameworks. Despite this, little attention has been given to exploring how social workers and social service agencies in Aotearoa New Zealand integrate this aspect in their work with clients to meet the varying ethical requirements. Additionally, little investigation has been undertaken to explore the implications religion and, or, spirituality might have within the Aotearoa New Zealand Social Services context. To date a number of conversations have occurred with regard to spirituality and religious concerns for Tangata Whenua, and to a lesser degree Tagata Pasifika. This study seeks to address the paucity of information by undertaking a mixed methods investigation of the role religion and spirituality has within Aotearoa New Zealand social work.
Acknowledgements

I would like to thank the following people:

My wife Lisa and our children for their patience during those long absent hours of writing and travelling.

The Department of Social Work and Community Development particularly my supervisors Dr Lynne Briggs and Dr Anita Gibbs.

Members of the international research team exploring the role of religion and spirituality within social work particularly Assoc Prof Leola Furman, Prof Edward Canda and Mr. Perry Benson for their support and collegiality.

And finally but not least the social workers throughout New Zealand who took the time to contribute and share their experiences of and about religion and spirituality within their practice.
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<td>New Zealand</td>
</tr>
<tr>
<td>Hauora</td>
<td>life breath, health</td>
</tr>
<tr>
<td>Hui</td>
<td>meeting gathering</td>
</tr>
<tr>
<td>Hikoi</td>
<td>a ceremonial walk; a march or protest parade</td>
</tr>
<tr>
<td>Karakia</td>
<td>prayer or incantation</td>
</tr>
<tr>
<td>Kaupapa</td>
<td>groundwork, topic or subject</td>
</tr>
<tr>
<td>Mana whenua</td>
<td>having rights over this land</td>
</tr>
<tr>
<td>Mana</td>
<td>prestige, authority</td>
</tr>
<tr>
<td>Māori</td>
<td>native peoples of Aotearoa New Zealand</td>
</tr>
<tr>
<td>Māoritanga</td>
<td>Māori culture and beliefs</td>
</tr>
<tr>
<td>Marae</td>
<td>Māori gathering place, place in front of the Meeting house</td>
</tr>
<tr>
<td>Mauri</td>
<td>life force</td>
</tr>
<tr>
<td>Nga poumana</td>
<td>a therapeutic model</td>
</tr>
<tr>
<td>Niho taniwha</td>
<td>a therapeutic model</td>
</tr>
<tr>
<td>Pakeha</td>
<td>people of European descent</td>
</tr>
<tr>
<td>Powhiri poutama</td>
<td>a therapeutic model</td>
</tr>
<tr>
<td>Ratana</td>
<td>Māori religious movement</td>
</tr>
<tr>
<td>Ringatu</td>
<td>Māori religious movement</td>
</tr>
<tr>
<td>Taha Wairua</td>
<td>spirituality</td>
</tr>
<tr>
<td>Te hono ki te wairua</td>
<td>the spiritual link</td>
</tr>
<tr>
<td>Tohunga</td>
<td>expert</td>
</tr>
<tr>
<td>Tohunga Ahurewa</td>
<td>expert in Māori spirituality</td>
</tr>
<tr>
<td>Taonga</td>
<td>precious or valuable item</td>
</tr>
<tr>
<td>Tangata Pacifica</td>
<td>people of pacific island descent</td>
</tr>
<tr>
<td>Tangata Whenua</td>
<td>People of the Land referring to the Māori people of New Zealand</td>
</tr>
<tr>
<td>Taniko</td>
<td>form of weaving</td>
</tr>
<tr>
<td>Tapu</td>
<td>Sacred</td>
</tr>
<tr>
<td>Te whare tapa wha</td>
<td>Māori holistic model of healthcare</td>
</tr>
<tr>
<td>Te Whake</td>
<td>a therapeutic model</td>
</tr>
<tr>
<td>Tikanga</td>
<td>protocols and practices</td>
</tr>
<tr>
<td>Tuakana</td>
<td>elder sibling</td>
</tr>
<tr>
<td>Wairua</td>
<td>Spirit</td>
</tr>
<tr>
<td>Wairua Tanga</td>
<td>spiritual knowledge</td>
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<tr>
<td>Whakapapa</td>
<td>genealogy</td>
</tr>
<tr>
<td>Whare</td>
<td>traditional Māori four sided house</td>
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Chapter 1: Introduction: Investigating the implications of and Integration of Religion and Spirituality in Social Work

For the past two decades there has been an ever expanding interest in the implications of spirituality and, or, religion within the professional practice of social work (Pellebon, Anderson and Angell, 1999; Praglin, 2004; Bishop, Avila-Juarbe, & Thumme, 2003; Cornett, 1992; Northcut, 1999; Northcut, 2000; Sheridan, Wilmer and Atcheson, 1994). Increasingly, scholars and social workers alike have been considering the appropriateness of inclusion and the practical implications involved. As this interest and corresponding conversation has developed, varying ethical codes have begun to include religious and, or, spiritual concerns into professional practice principles. This is evidenced in the IFSW (International Federation of Social Workers) and IASSW (International Association of Schools of Social Work) definition:

Social work is based on respect for the inherent worth and dignity of all people and the rights that follow from this. Social workers should uphold and defend each person’s physical, emotional and spiritual integrity and well being (IFSW, 2004, emphasis added).

In Aotearoa New Zealand the Aotearoa New Zealand Association of Social Workers (ANZASW) is a member of these international bodies; thus the profession is bound to the above principles. The Aotearoa New Zealand Social Workers Registration Board (SWRB) code of practice reflects the standards and ethical codes of the ANZASW. Moreover, spirituality and, or, religion is an important aspect for different client groups within the Aotearoa social services context. This is particularly so within bicultural frameworks. Despite this, little attention has been given to exploring how social workers and social service agencies in Aotearoa New Zealand integrate this aspect in their work with clients and meet the varying ethical requirements. To date, little investigation has been undertaken to explore the implications religion, and or spirituality might have within the Aotearoa New Zealand Social Services context. However, a number of conversations have occurred with regard to spirituality and religious concerns for Tangata Whenua, and to a lesser degree Tagata Pasifika.
This study seeks to address the paucity of information about the role of spirituality and religion within Aotearoa New Zealand social work practice. Integration refers to the level of inclusion, endorsement and legitimation given to varying religious and or spiritual belief systems within the Social Services context, and the role they play in professional practice. Integration also refers to the organisation of the psychological and social traits, and tendencies of an individual into a harmonious whole. The need to include spiritual concerns as an aspect of the harmonious whole is increasingly being recognised. Accordingly, consideration needs to be given to how well the clients’ spiritual and, or religious concerns are identified, how this occurs and the implications involved. Whilst this study explores the above areas, the focus is on macro issues; it does not include a comprehensive review of the current practice models in use by social workers globally. Additionally, it does not comment on specific models being used by social workers in Aotearoa New Zealand.

Organisation of the Thesis

In Chapter two the relationship between social work, spirituality and, or, religion and international developments is explored. This recognises that Aotearoa New Zealand Social Work is located within a global community of social work in which developments occur that influence how social work is practiced here. This influence is evident in the adoption of International ethical standards and practice principles, theoretical developments and the construction of practice knowledge.

It is also important to locate this investigation within the international research being undertaken to investigate the role of spirituality and, or, religion as this will help to develop understandings from multinational perspectives. These understandings then allow for the creation of space for smaller voices such Aotearoa New Zealand that can contribute to the global social work community as the profession constructs and shapes its professional response to this subject.

1 With my concern to create spaces for a local viewing and voice to be included in International developments this investigation has been undertaken in conjunction with an International Research team to build collaborative research approaches to exploring the Role of religion and spirituality in differing contexts. This has involved comparative studies between countries with scholars from North America, the United Kingdom and Norway. Further information about this International research and associated findings are available online at www.spiritualityreligionsurvey.com.
A number of key areas have been explored in the literature which include: an investigation and analysis of the historical associations between religion, spirituality and the social work profession; the tensions between the social work scientific base and departure from its religious roots as a profession and consequences of this; the rise of new interest in spirituality and religion and its relevance to contemporary social work and the challenges this brings; the arguments and varying positions held within the profession that are for and against the inclusion of spirituality and or religion within social work practice; varying theoretical developments, frameworks and models for conceptualising spirituality found in the literature; the binary between spirituality and religion evident in discourse and the literature and varying definitions for spirituality are discussed. For the purposes of this study spirituality is defined as involving 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 (Canda and Furman, 1999). Religion: is defined as an organised and structured set of beliefs and practices shared by a community related to spirituality (Canda and Furman, 1999).

Chapter three continues to explore the literature, from within Aotearoa New Zealand. This includes information from the 2001 and 2006 Aotearoa New Zealand census and International Social Survey Programme data. The data are used to explore the national role of religion and spirituality and capture a snapshot view of where Aotearoa New Zealand is positioned in relation to spirituality and religion, and its relationship to social work practice. This exploration was guided by a number of overarching questions that were considered in the light of international investigations, and the role of spirituality and religion in professional social work practice. These questions included:

- What places do religion and spirituality have in Aotearoa New Zealand Society?
- What is the relationship between the church and state in Aotearoa New Zealand?
- What is happening in Aotearoa New Zealand with regards to processes of secularisation?
- What attitudes are evident towards religion in Aotearoa New Zealand?
• What data are available about the role of spirituality and religion within social work in Aotearoa New Zealand?
• What are some of the cultural implications of spirituality in Aotearoa New Zealand?
• What Aotearoa New Zealand Models of spirituality exist?
• What use of spiritual and, or religious course content is there in Social Work Education in Aotearoa New Zealand?

Finally, after exploring the above questions chapter three identifies some of the research undertaken in this field and locates this research within this body of knowledge.

Chapter four provides a discussion of the approach to this research, the methodology employed and the research design. As this investigation has involved employing a concurrent /sequential mixed model research design particular attention is given to describing the purposes of mixed methods and the justification for using them.

The data collection and analytical strategy for each method are discussed separately, in order to retain clarity. Discussion is provided about the research problem, including justification for this research, the research questions and overall aims. Each separate component of the research design has been labelled using the acronym NZIRSSOWK (NZ Investigation into the Role of Religion and Spirituality in Social Work). The first stage of this concurrent /sequential mixed model research design is labelled NZIRSSOWK I and the second stage is labelled NZIRSSOWK II. These identifiers are used throughout chapters’ four to eight to enable the reader to easily distinguish the varying research stages and differing methods used. Discussion is also provided pertaining to the integration of both quantitative and qualitative data sources.

Chapter five presents the data analysis that relates exclusively to the NZIRSSOWK I survey undertaken in 2006. The data are presented and organised according to the varying survey sections. These survey sections focus on varying practice concerns. Chapter six presents the qualitative data from open ended survey questions asked at the end of each section of the survey. The data are presented thematically.

In chapter seven findings from NZIRSSOWK II are presented. This qualitative section of the thesis involved focus group discussions that were conducted sequentially to NZIRSSOWK I.
Again the data are organised thematically according to emergent themes providing descriptive summaries of the data, participants’ quotes and some interpretation. Presentation of the data in this chapter follows Krueger’s (1998) suggestions for writing up focus group findings. The data provide both complementary and supplementary findings to the data collected in NZIRSSOWK I. This has had a layering effect in both analysing the data and obtaining more depth of discussion.

Chapter eight contains the discussion of the findings. In this chapter, the findings are discussed as an integrated whole, drawing on the findings from the NZIRSSOWK I quantitative survey and the NZIRSSOWK I and II qualitative data sources. A full discussion of the rationale and approach to this integration has been provided in chapter four. The discussion centres on the research questions.

Chapter nine concludes the previous discussion providing recommendations and suggestions for further research in this field and suggestions for further developments in three key areas identified as “Moving Beyond Acknowledgement” within social work education; “Moving Beyond Acknowledgement” in social work practice and finally “Moving Beyond Acknowledgement” in professional development.
Chapter 2: Spirituality and Religion in Social Work -
International Developments

This chapter considers the relevant literature and international developments regarding the
role of spirituality and religion within social work. The discussion of key international texts
and articles will provide insights into the main arguments and theories which have developed
in the field of religion and spirituality in social work. Undertaking this analysis will provide a
platform for a comparative analysis with developments in New Zealand, and provide the basis
for discussion at both an international and local level.

There is considerable interest and recognition in western countries of the need to integrate
concepts of spirituality and religion within social work practice. This is in line with their
inclusion within other professional disciplines such as nursing (Canda, 2003), and is an
interest that has gained momentum since 1980 (Sermabeikian, 1994; Canda, 1989; Hodge,
2003a; Sheridan and Amoto-von Hemert, 1999; Pellebon, Anderson and Angell, 1999;
Praglin, 2004; Bishop, Avila-Juarbe, & Thumme, 2003; Cornett, 1992; Northcut, 1999;
Northcut, 2000; Sheridan, Wilmer and Atchison, 1994). This momentum within western
social work has been well documented (Bullis, 1996; Canda and Furman, 1999; Ellor, Netting
and Thibault, 1999), and partly represents a re-exploration of the long relationship that social
work, has had with religious and spiritual concerns. This has been spurred by a renewed
recognition of spirituality as a central component of human experience (Hodge, 2003b). The
above relationship has involved processes of association, disassociation and resurgent interest
in the development of social work as a profession (Furman, Zahl, Benson and Canda, 2007).

Association and Winds of Change: Historical Trends

The initial relationship between social work and religion and spirituality is termed the
'sectarian roots phase' (Canda and Furman, 1999). This phase began with the British colonial
period (1600-1775) lasting through to the early part of the 20th century. In this phase, a large number of welfare agencies were established by the Christian church, underpinned by a Judeo-Christian worldview. These welfare agencies, which provided for the poor, were founded upon mainstream protestant principles, particularly the concept of charity and the churches' perceived biblical obligation to respond to the needs of the poor. In response to the needs of the poor, religion and social welfare largely cohabitated the same space, sharing a strong association (Meinert, 2003).

Examples of this strong association are evident in both the United States and Britain. Firstly, in the United States religious involvement with social services can be traced to the development of two organisational initiatives, which paved the way for social work to establish itself as a profession. The first of these initiatives (established in the United States in 1877) is known as the Charitable Organisation Society (COS), and in COS welfare provision was modelled on the British Charity System (Popple, 1990). This system of charity recognised the needs of the poor and the responsibility of communities to meet these needs through almsgiving. Early colonists in the United States sought to build the new society on concepts of Christian charity. At this early time the church carried the responsibility for helping those in need. The second initiative in the United States involved the establishment of settlement houses. These settlement houses were located in a number of United States cities in poor neighbourhoods. The settlement house movement was concerned with social action, and provided a response to the issue of widespread poverty in the metropolitan United States (Brieland, 1987). The most notable of these settlement houses was Hull house located in Chicago. Early in the twentieth century workers associated with the Charitable Organisation Society in the United States began to use the term social workers for their role, receiving a salary for their work (Manor, 1984).

The settlement house movement and the charitable organisation society operated from opposing theoretical and essentially theological positions in their work with poverty. The Charitable Organisation Society provided explanations for poverty and deprivation based on moralistic concerns, which were seen as the root of social problems, and focused on individual change, as a solution to poverty (Dorfman, 1983). The Settlement House movement, on the other hand, under the leadership of Jane Addams focused more on issues of

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2 See John Winthrop's 1630 Thesis "A Model of Christian Charity".
social justice and social change to deal with poverty, and linked macro features to the plight of the poor such as the need for law reform in the areas of child labour. They worked for legislation to protect immigrants from exploitation, limit the working hours of women, and recognition of labour unions (Dorfman, 1983).

In the latter part of the nineteenth century Alexander Hamilton's view of the federal government's role in welfare provision began to influence social welfare toward a clear separation of public and private social services (Meinert, 2003). Likewise Alex's deTocqueville (1835) established freedom of association in the first amendment to the United States Bill of Rights, and opened the door to the formation of charitable associations outside the auspices of the church. At this time the church's obligation to the poor was transferred to municipalities, counties, and the state. In this environment the church was precluded from receiving government funding for charitable works (Taggart, 2005).

Secondly in England, early social work was associated with philanthropic activities from 1890 onwards (Harrison, 1976 cited in Bowpitt, 1998). At this time philanthropic activity was heavily influenced by Evangelical Christian aspirations particularly associated with the British Charity system and the revivalist movement of John Wesley and the Methodists (Heasman, 1962 cited in Bowpitt, 1998), the model of Christian charity used in the United States by the charitable Organisation Society. Christians undertaking philanthropic activities at this time did not use the term social work (Bowpitt, 1998). The term was used by their philanthropic counterparts to distinguish their work from the mainstream Christian endeavours, which were focused on individual spiritual regeneration as the Answer to social problems (Bowpitt, 1998).

The philanthropic workers who used the term to distinguish their work from mainstream Christian endeavours ascribed meaning to the term social work; however at this stage the meaning of social work is considered to be vague and inclusive (Bowpitt, 1998). Nevertheless it did contain two distinctive features which began the distancing of social work from its religious roots. Firstly, social work involved a search for social improvement that went beyond a focus on personal spiritual regeneration and the improvement of individual's moral

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3 Alexander Hamilton one of the founding fathers of the American constitution promoted a loose and broad interpretation of the new constitution, this interpretation could include a role for the federal government in the provision of social welfare.
behaviour (Bowpitt, 1998). Secondly, social improvement could occur through social action as distinct from individual spiritual regeneration or state intervention.

These two features paralleled developments within the settlement house movement in the United States (Bowpitt, 1998). The two features continued to develop to become part of the philosophy of social work separating it from mainstream philanthropic endeavours and its religious roots. Bowpitt, (1998) highlights this distinction by stating:

Social action could bring about lasting personal and social change and not simply social amelioration; and that the effectiveness of social action depended not on spiritual regeneration, nor on the authority of the state, but on the rational application of methods derived from social science and practical experience (Bowpitt, 1998: 678).

This reflected the beginning of a significant paradigm shift for these early social workers by replacing the spiritual with the rational. This rationale provided a foundation for the developing profession in the form of social scientific endeavours. At this stage, however, two aspects remained as a link between social work and the Christian charitable tradition. Firstly, the Christian tradition contributed to early social works focus on personal regeneration albeit with a new secular interpretation. Secondly, the means by which this personal regeneration could be affected moved from the Christian understanding to an understanding that lives could be transformed through rational means (Bowpitt, 1998: 684). “These rational means at this early time in the history of social work drew its motives, purposes and tools from Philosophical idealism and the developing social sciences (Bowpitt, 1998: 684). Bowpitt captures this philosophical and practical development by stating: “Science had replaced mystical forces as the principal agent of personal change” (Bowpitt, 1998: 684).

This grounding in the Christian tradition provided both ideological links and foundational beliefs about welfare provision, and is an aspect of the social work profession’s history that is commonly accepted by authors (Cnaan, Boddie and Danzig, 2004). At best, these links were tenuous, coming under assault from the larger societal and scientific developments. Throughout the early development of social work these links would continue to dissolve as the profession developed new ideological foundations drawn from the social sciences. This continued distancing of social work from its religious roots marks the ensuing second stage in social work’s developmental history (Sheridan, 2004; Netting, Ellor & Thibault, 1990; Bullis, 1996).

The second stage in the relationship that social work had with religious and spiritual concerns occurred between the 1920s and 1980s (Canda and Furman, 1999). During this stage social work distanced itself from religion, to the point where it abandoned its religious foundations (Amato Von Hemert, 1994; Bullis, 1996; Canda and Furman, 1999; Netting, Thibault and Ellor, 1990; Russel, 1998). Within the literature a number of propositions have been made as to why this occurred. Russel (1998) and Canda and Furman (1999) for example, see the shift being linked to the need for social work to establish its credibility. A central component of this search for credibility involved the social work field’s pursuit of expert knowledge to gain professional status. In striving to attain this, the early social work field is deemed to have embraced a linear, rational and reductionist view of the world, which inevitably would be at odds with religious and spiritual ideologies (Loewenberg, 1988, Cornett, 1992). Another proposition as to why social work distanced itself is linked to secularisation. According to Wilson, (1985):

Secularisation in essence relates to a process of transfer of property, power, activities and both manifest and latent functions, from institutions with a super naturalist frame of reference to institutions operating according to empirical, rational pragmatic criteria (Wilson, 1985:11-120).

During this historical period the beginning profession was immersed in a world that was going through a period of rationalisation. Central to this rationalisation were positivist assumptions that viewed the world to be manipulated and controlled by human beings. This combined rationalised and positivist world view presented a direct challenge to religious beliefs, particularly the notion of God and super empirical understandings. Religious beliefs and constructs were considered to be subjective, and they were therefore viewed as unempirical and not measurable. Religious beliefs and constructs thereby carried little validity and were at odds with the developing social sciences. Therefore religious understandings about human existence, society and social order that referred to transcendent laws and states of being became superfluous, superseded by empirical, matter of fact explanations of human experience, development and organisation (Bowpitt, 1998; Gotterer, 2001; Wilson, 1985).
The new foundation drawn from the social sciences embraced by early social work inherited the secularisation model. Beginning with August Comte and Saint-Simon, sociology posited a new science of society that challenged existing bodies of social knowledge associated with theological understandings about the nature of social reality (Wilson, 1985). Within Comte’s work an account of secularisation was provided and continued by Marx, Weber and Veblen (Wilson, 1985).

From the outset the disciplines of the social sciences rejected theology positing what Wilson (1985) describes as an “empirical, man-centred, this-worldly, matter-of-fact explanation of human organisation and development” (Wilson, 1985: 9). From this position, social sciences rejected theological claims about the nature of human existence, and the varying claims to knowledge it possessed. Under this new foundation the commitment was to be objective, and use ethically neutral procedures, as well as to explicitly reject religious worldviews (Wilson, 1985).

From this new theoretical and philosophical position a critique began of the old world view of religious understandings. The critique attacked concepts of theology, particularly the notion of a supernatural domain which is considered to be important by religion as both tangible, and impacting upon the sphere of human existence (Wilson, 1985). Implicit in this model of the social sciences were a number of conceptual shifts that Wilson identified (figure 1 below). These included along with other aspects;

- A primary preoccupation with the super empirical to the empirical,
- From transcendent entities to naturalism.
Primary preoccupation with the super empirical to the empirical

From transcendent entities to naturalism

From other worldly goals to this-worldly possibilities

From an orientation of the past as a determining power in life to a preoccupation with a planned and determined future

From speculative and “revealed knowledge to practical concerns

From Dogmas to falsifiable propositions

From the acceptance of the incidental, Random, spasmodic and charismatic manifestations of the Divine to systematic, planned, structured and routine management of humanity

Social Sciences conceptual shift: The Rejection of Theology to the embracing of Social Science (Adapted from Wilson, 1985:14)

Figure 1 Social Sciences Conceptual Shift: The Rejection of Theology to the embracing of Social Science

According to Powell (2003) this turn, by social work, to the social sciences for professional status represented: “... a bifurcation of the profession that too often began to separate head from heart, mind from spirit, practice from research, education from practice, knowing from understanding, and theory from the contingencies of the real world” (Powell, 2003: 457).

Damianakis (2001) recognised that social work is founded in both liberal arts and social science education, but an emphasis has been placed on the social sciences. This emphasis is being challenged in our postmodern context, causing social work to reconsider the role of humanities within the profession. Damianakis (2001), noted that at the heart of this challenge is the question: “Is social work an art or a science?” (Damianakis, 2001:23) The historical emphasis on science that has contributed to the construction of social work has divided and extracted the profession’s creative attributes. Damianakis (2001) argued for a new vision in
social work that includes an openness, not rooted in ego, that taps into the more creative, uncertain and cosmic ways of knowing oneself and the world (Damaniakis, 2001: 25).

A central reason for this shift to the social sciences arose out of challenges surfacing in the United States about the need to professionalise the work of the Charitable Organisation Society. During the early period of last century it was recognised that social work needed to develop training which was scientific and systemic, due largely to pressure from academic, professional bodies and funding sources (Manor, 1984). This pressure came most strongly in 1915 in the form of a report prepared by Abraham Flexner. Flexner was given the task of analysing social work to investigate its status as a profession. The outcome concluded that social work was not a profession as it had no academic credibility. In order to achieve professional status Flexner suggested that social work required a distinctive methodology that could be taught, learned and practiced (Flexner, 1915).

Flexner’s (1915) critique of social work at this early stage had provided the catalyst for social work to embrace psychoanalytic theory, occurring from the early 1920s in the United States, and the 1930s in Britain (Payne, 1992). The appeal of psychoanalytic theory for these early workers was captured by Dorfman (1983):

> Psychoanalysis seemed to offer everything the caseworkers needed. Psychoanalysis was “scientific” and social workers felt that they were elevated from identification with ‘do-gooder’ charity workers to the status of psychiatrists and the psychologists who were also enamoured of Freud’s understanding of personality and behaviour (Dorfman, 1983:12).

The embrace of psychoanalytic theory by these early workers was pervasive, influential and is well documented (Payne, 1997; Aldridge, 1958). Indeed Payne (1997) states “understanding the influence of psychodynamic theory is a prerequisite to understanding other social work theories” (Payne, 1997: 76), and “Psychodynamic ideas were the first strong explanatory theory in social work, and so have created the environment to which later theories have naturalised” (Payne, 1997:78). This environment provided a platform for further professional development; however it also contained a significant contributing factor in the distancing of social work from its religious roots.

This factor relates to Bowpitt’s (1998) identification of the undermining of the Christian belief system itself. Bowpitt (1998) sees this undermining as involving a critical assault on
Christian orthodoxy from the sciences. Indeed Clayton (1999) also notes that for a significant period of the last century science as a discipline perceived religion to be an opponent. This had a significant impact upon the development of social work as a discipline in the form of a crisis of meaning and plausibility. Many social workers and charity workers found their religious worldviews and belief systems undermined and eventually forfeited for the social sciences view of the world. Bowpitt (1998) states:

The result was a dilution of the power of the Christian concept of Charity as a motive for social concern amongst precisely those middle classes who had felt its force most strongly. For them there was a general crisis of meaning which inspired a search for a worldview that was both intellectually satisfying, and carried prescriptive implications….This intellectual onslaught confronted the churches with what Peter Berger (1973) has called a ‘crisis of plausibility’, involving the undermining of the authority of the Christian Worldview over people’s hearts and minds (Bowpitt, 1998:682).

Psychoanalytic theory presented no exception with regards to its critique of religion, adopting a pathological depiction. It is well known that Freud was an avowed atheist; and a lifelong agnostic, and that Freud’s worldview influenced his thinking about the role of religion in psychoanalytic theory (Vitz, 1988). In constructing his notion of the superego Freud did not integrate central components of religious understandings into his theoretical developments. Freud’s view of religion was highly critical, describing religion only as an aspect of personal pathology; a view that has continued to influence the perception of the role and place of religion particularly in psychiatry until 1994 with the introduction of code V62.89 in the DSMIV (Lukoff, Lu and Turner, 1998; Wendel, 2004) which states:

This category can be used when the focus of clinical attention is a religious or spiritual problem. Examples include distressing experiences that involve loss or questioning of faith, problems associated with conversion to a new faith, or questioning of spiritual values that may not necessarily be related to an organised church or religious institution (American Psychiatric Association, 1994: 685).

Freud offered a mode of analysis which placed people’s predisposition to supernaturalism firmly in the area of irrational psychology (Wilson, 1985). A number of examples are evident in Freud’s works that show this negativity and assault on religious belief. In Freud’s Civilization and its Discontents (1930) he stated:

Thus religion would be a universal obsessive neurosis of humankind. Just like the obsessive neurosis in children, it springs from the Oedipus complex, the relationship with the father. Should this concept be correct, distancing from religion should be as inevitable as the process of growing and we are in this junction, in the middle of this development phase (Freud cited in Strachey, Khan and Riviere, 1969).
And another:

Religion restricts this play of choice and adaptation, since it imposes equally on everyone its own path to the acquisition of happiness and protection from suffering. Its technique consists in depressing the value of life and distorting the picture of the real world in a delusional manner—which presupposes an intimidation of the intelligence (Freud cited in Strachey, Khan and Riviere, 1969).

Cowley (1993) points out that there may be translation problems with regards to Freud's work that has lost some of his more positive attention to religious concerns. Predominantly however Freud's negativity resulted in rejection of religious concerns. Philpot (1986) noted that:

The teachings of Freud emerged in a world already struggling to hold together the traditional and metaphysical understandings of the human spirit and personality with the implications of a more scientific approach to life in all its aspects. The western world was ready for Freud and it did not take many decades for the effects of his work to percolate through to every sphere of interpersonal work (Philpot, 1986: 56).

Attention to religion in psychoanalytic thought is excluded, particularly the concept of God in relation to personhood. Consideration of religious spiritual concerns in psychoanalytic thinking did not gain further attention until the 1950s with the work of Jung (1954). Jung's view of the role of religion within psychodynamic thought was in opposition to Freud's pathological depictions. Morris, Ricketts and Grimshaw (2002) notes:

Jung was one of the earliest Western psychologists to recognise the relevance of spirituality and religious practice to the needs and workings of the human psyche. He asserted that all humans' problems are spiritual: 'A psychoneurosis must be understood, ultimately, as the suffering of a soul which has not discovered its meaning... the cause of the suffering is spiritual stagnation, or psychic sterility (Morris, Ricketts and Grimshaw, 2002: 191).

Authors have suggested that Jung's attention to spirituality may offer the best means to reconcile the lack of attention to spirituality and religion within theoretical understandings of social work (Lines, 2006).
Re-emergent interest and new intentions: religious and spiritual challenges to contemporary social work from the 1980s onwards

For sixty years matters relating to religion and spirituality within social work received little attention until the 1980s. The 1980s heralded a new stage in the interaction of social work with religion and spirituality. This stage included a renewed interest in religion and spirituality in social work (Canda and Furman, 1999). During this stage research and publications began to appear in increased numbers. The literature during this time explored spiritual and religious factors and the implications of these for social work. Meinert (2003) undertook an analysis of 120 journal articles published during 1921-2000. Meinert noted an increase in the interest accorded to spirituality and religion in journal articles and a significant increase from 1981 onwards. Of the 120 articles analysed 2.5% of the articles addressed religious and or spiritual concerns between 1921-1930; no attention between 1931-1940; no attention 1941-1950; 1951-1960, 4.2%; 1961-1970, 3.3%; 1971-1980, 2.5%; 1981-1990, 33.3%; 1991-2000, 54.2% (Meinert, 2003). Similarly, in 1999, Sheridan and Amato-Von Hemert undertook a keyword search of social work abstracts databases. The authors found 235 articles related to religion and spirituality in the abstracts databases between 1989-1999. Sheridan and Amato-Von Hemert (1999) identified a steady growth of attention in the literature during the 1989-1999 periods. This growth was further highlighted when compared to the prior decade 1979-1989 with 167 articles available. This increased attention is well documented and has focused on areas such as advocating for the recognition of religion and spirituality within social work; and the lack of inclusion of religion and spirituality versus the need to be included, in social work education.

Limited attention has been given to practical considerations and how to include religion and or spirituality in social work practice (Derezotes, 1995; Cascio, 1998). Since the beginnings of this rise in interest the literature has continued to increase in this subject area reflected in Canda, Nakashima, Burgess, Russel and Todd Barfield’s publication of a second edition of their comprehensive bibliography in 2003, in which the authors list over 770 publications dedicated to exploring spirituality in relation to social work (Canda, Nakashima, Burgess, Russel and Barfield, 2003).
A number of propositions have been considered in the literature to explain why these concerns about religion and spirituality have become a significant topic of enquiry throughout this period. Some of these justifications are more prevalent than others; it is likely that each proposition has added to this resurgence of interest in a complex combination of factors.

For Furman, Zahl, Benson and Canda (2007) this growing interest is attributable to the profession’s increased attention to recognising cultural diversity. According to Payne (1997), most countries in the world today are culturally pluralist and have had to create differing approaches to social services to meet the needs of different ethnic and cultural groups. At the heart of this creative activity is the recognition of cultural difference. Attention to this has arisen within social work with the development of feminist, anti-oppressive and anti-discriminatory perspectives (Payne, 1997). Each of these perspectives has challenged the profession, and the notion of superiority and privilege being given to dominant groups, albeit based on gender, race or ethnicity to the disadvantage of minority groups. According to Payne (1997) this resulted in a conflictual view of social relations centred on cultural superiority that culminated in the 1970s with the development of radical social work theory. With these developments the profession was challenged to explore issues facing minority ethnic groups, particularly in the United States from the 1980s onwards and in Britain from the mid 1980s (Payne, 1997). According to Payne (1997), “Within social work, anti racism and anti-discriminatory approaches arose from the needs of agencies and workers facing new ethnic issues, spurring them on to reform by rising conflicts” (Payne, 1997: 247-248).

Out of these new ethnic issues arose a realisation of the importance of religion and spirituality from a cultural perspective. This has resulted in the inclusion of religious and spiritual concerns within varying social work and other professional codes of ethics and practice guidelines. Examples of this inclusion are well evident. The DSMIV mentioned earlier includes a diagnostic category (Code V62.89) that specifically addresses religious and spiritual concerns (the Diagnostic and Statistical Manual-Fourth Edition (APA, 1994). Lukoff, Lu and Turner (1998), provided an analysis of this inclusion, noting that according to the ethical principles of psychologists and their code of conduct: “psychologists have an ethical responsibility to be aware of social and cultural factors which may affect assessment and treatment” (Lukoff, Lu and Turner, 1998:24). Lukoff et al (1998) also highlighted the importance of the spiritual and/or religious dimension as an aspect of culture. Lukoff, et al (1998) stressed the importance of religion and/or spirituality citing James’ (1958) and
Krippner & Welch’s (1992) proposition that suggests religious and spiritual issues are some of the most important factors that structure human experience, beliefs, values, behaviour, as well as illness patterns. From this position Lukoff et al (1998) acknowledged that sensitivity to religious and spiritual issues therefore plays an important part of the cultural diversity competence of psychologists and psychiatrists.

The challenge to recognise cultural diversity at a practice level represents one aspect that has contributed to re-emerged interest in religion and spirituality in the field of social work. Another challenge occurred at the level of research during the 1970s to 1990s (Said, 1975, 1994; Viswanathan, 1989; Gilman, 1985, 1989, 1991). Within the social sciences a number of epistemological challenges were occurring that called into question the use of positivist assumptions. A number of these positivist assumptions had underpinned the neglect of religion and spirituality within the social sciences in the previous stage of disassociation.

During 1970-1986, a new phase of development began in the field of qualitative research (Denzin and Lincoln, 2005). During this time attention to culture began to receive renewed, attention and a new emphasis was given to the primacy and validity of local voices in the generation of knowledge (Denzin and Lincoln, 2005). According to Denzin and Lincoln (2005), two books heralded the beginning and end of this new phase in social research: ‘The Interpretation of Culture’s (Geertz, 1973) and ‘Local Knowledge’ (Geertz, 1983). As a result of these publications a new perspective in qualitative research developed. According to Denzin and Lincoln (2005) this perspective centred on Geertz’ argument:

... that the old functional, positivist, behavioural, totalising approaches to the human disciplines were giving way to a more pluralistic, interpretive, open-ended perspective. This new perspective took cultural representations and their meanings as its point of departure (Denzin and Lincoln, 2005:17).

Denzin and Lincoln (2005) go on to identify Geertz’ suggestion that, “The observer in the research process has no privileged voice in the interpretations that are written. The central task of theory is to make sense out of a local situation” (Denzin and Lincoln, 2005:17). This led to what Denzin and Lincoln (2005) identify as a profound rupture in the mid-1980s involving a crisis of representation, that involved the development of research that was more reflexive in questioning issues of gender, class and race (Denzin and Lincoln, 2005). In this context, cultural epistemologies could compete for their own validity within the social
sciences and at the heart of some of these epistemologies is an integration of the cultural aspects of spirituality and religion as part of the local voice.

Praglin (2004) also considers the questioning of positivist assumptions within the social sciences as a contributing factor to the renewed attention to the inclusion of spiritual and religious concerns. Praglin considers this to be associated with a specific sociocultural phenomenon: involved the questioning of positivistic views within the social sciences. This questioning has occurred in tension with the growing search to find psychological and spiritual meaning outside of rational frameworks by people, particularly the baby boomers generation in western society (Roof, 1993). Praglin (2004) associates this increasing anomie in society with that previously identified by Durkheim and Homans, particularly the rise in psychological introspection. Praglin believes these factors have led to a rise in the non institutionalised search for meaning and purpose.

Cowley (1993) previously identified the implications of our “postmodern melody” as consisting of an existential and spiritual vacuum. For Cowley, the attention to religious and spiritual issues had arisen reactively out of this vacuum. Cowley (1993), suggested the human psyche or soul is reacting to the disjunctiveness and anomie of the day by manifesting itself in “spiritual pathologies” (Cowley, 1993:528). Cowley also noted that the literature had recognised the spiritual diseases of the day, referring to terms such as “a malaise of the soul” (Goldberg, 1980 cited in Cowley 1993) “spiritual barrenness”, or a “whole in the soul” (Bradshaw, 1988 cited in Cowley, 1993) and the “dark night of the soul” (Assagioli, 1989).

Since the late 1980s there has been growing interest, discussion and application of the strengths- based perspective within social work theory and practice, which has paid close attention to shifting the focus of the social work endeavour. This shift seeks to challenge views long held by social work, and critiques traditional frameworks of knowledge and understanding. Traditional notions posit views that see clients as deficient; and problems as pathological in origin, where the social worker in the therapeutic encounter is the expert and...
interpreter of the client's world and the issues facing them (De Jong and Miller, 1995). These traditional views leave little room for an atmosphere to include attention to religious and spiritual perspectives or concerns relevant to the client’s world, and if they are included they are usually only associated with pathological concerns (Wendel, 2003).

The underpinning assumptions of a strengths-based approach, on the other hand, are that social workers respect their client’s dignity and worth by enlisting their client’s own ways of viewing themselves and the world in which they live (De Jong and Miller, 1995). De Jong and Miller (1995:729) state: “the strengths perspective asserts that the client’s “meaning” must count for more in the helping process and scientific labels and theories must count for less”. It is this valuing of what the client brings into the encounter that some authors suggest is more akin to the deepest values held by the social work profession (Weick, Rapp, Sullivan and Kisthardt, 1989).

Saleebey (1992) outlines a number of core principles held by a strengths perspective that provide a platform for an atmosphere conducive to the inclusion of religious and spiritual matters.

- All people and environments have strengths that can be facilitated to improve the wellbeing and quality of people’s lives. Social work practitioners need to respect the strengths that clients bring and the way in which clients want to use them and apply them to their lives.
- Client motivation in the encounter between social worker and client is increased by a focus on their strengths as they see them.
- Finding clients’ strengths requires processes of collaboration and participation, where the worker does not offer the final say about what the client needs.
- Focusing on client strengths provide the worker with an avenue for not seeing the client as deficient, or pathologising their situation.

Likewise, Milner and O’Byrne (2002), writing from a constructivist theoretical perspective stress the significance of clients being able to participate actively, and bring their own meaning to the therapeutic encounter. The authors point out that social work traditionally has been based on individual dependency- led models that have resulted in clients’ own solutions
and potential being ignored in the assessment process (Milner and O'Byrne, 2002). This has resulted in social workers remaining in a problem solving narrative which pays little attention to the resources clients bring (Milner and O'Byrne, 2002). To counter this, social work is increasingly adopting and utilising strengths based approaches and a solution focus that seeks to recognise the strengths and potential of clients to provide their own resources and mechanisms for overcoming the difficulties they face.

This reflects a shift within modern social work theory and practice underpinned by poststructuralist/postmodern theoretical perspectives that seek to establish a participatory and holistic approach, which allows clients to tell their own stories as the experts in their lives (Payne, 1997). It is from within this theoretical change and focus on the resources that clients bring to the therapeutic encounter, that authors pay attention to the inclusion of religious and spiritual belief systems. Ivey, D'Andrea, Bradford-Ivey and Simek-Morgan (2002) suggest the need for practice models that recognise and allow for a comprehensive understanding of the diversity of human experience. The authors suggest a framework for assessment that seeks to increase respect for clients by integrating the areas of their lives that affect their client's psychological development, and sense of wellbeing, of which religion is seen to be a primary component (Ivey, D'Andrea, Bradford-Ivey and Simek-Morgan, 2002). Sermabeikian (1994) is more specific and posits that it is of significant therapeutic benefit for the client in the helping process to include the concept of spirituality. Sermabeikian's view recognises spirituality to be of great potential for strength-based approaches. This is defined as integral by Sermabeikian, who states that "the clients' use of spirituality as a weapon in their coping arsenal is precisely why spirituality must be acknowledged" (Sermabeikian, 1994 pp.178).

From this perspective religion and spirituality are seen as resources that can enhance resilience, provide hope, enable people to transcend their present situations, and provide an inner strength in the face of adversity, a sense of belonging, and a connectedness at an interpersonal intrapersonal and transpersonal psychological level.

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8 Transpersonal Psychology is defined as the branch of psychology that attempts to integrate the science of psychology with the insights of various spiritual disciplines, including the role of altered states, mystical experiences, contemplative practices, and ritual for self-transcendence.
Contending Positions

The above new found interest and challenge to explore the implications of spirituality in social work has not occurred without resistance. A number of contending positions have appeared that call into question the way in which social work attends to religion and spirituality.

These positions emerged during 1988-1998 with the resurgence of literature in this topic (Canda and Furman, 1999). A central focus of this literature involved debates about whether or not it was appropriate to include religious or spiritual matters in the profession of social work. In the midst of these debates Canda and Furman (1999) undertook an analysis of the literature concerned with the inclusion of religion and spirituality in social work practice. In their analysis the authors identified three contributing authors opposed to the inclusion of religion and spirituality in social work, namely Clark, (1994); Sullivan, (1994) and Weisman, (1997), as well as thirty authors supporting the inclusion of religion and spirituality in social work. In 1999, the results of their analysis were published in what is considered to be a benchmark text in this field entitled 'Spiritual Diversity in Social Work Practice'. In this text Canda and Furman⁹ outline the arguments posited by researchers against the inclusion of religious spiritual concerns in social work. These arguments are summarised in three key areas of concern:

1. The first area of concern identified by Canda and Furman involves arguments against inclusion that focus on the perceived deficiencies of religion and spirituality. This position emphasises the institutional or personal defects associated with religion. The negativity towards inclusion from this position argues that religious views are too limited or biased for the profession, religion is rigid, dogmatic, and judgmental, and therefore has the potential to be oppressive. Of concern to the profession, religions are status quo maintaining and overly focused on a micro perspective, as opposed to macro justice issues. The personal defects associated with religion in the arguments only identify religion with expressions of personal pathology, or maintain that spirituality is inherently personal and idiosyncratic (Canda and Furman, 1999).

2. The second position identified by the authors argues that religion and spirituality are inconsistent with the nature of the social work profession. This argument is

⁹ Canda and Furman are currently working on a soon to be released second edition of this text.
summarised in two areas: domain concerns and value conflicts. Firstly, domain concerns suggest that religion and social work are separate and mutually exclusive domains. From this position religion and/or spirituality are not seen to be an important aspect of understanding clients' worldviews, as such introducing these issues is unnecessary, and is likely to undermine the profession. Secondly, value-conflicts focus on a number of concerns seen to be inherently associated with religious objectives, such as the danger of proselytisation, and the possible violation of client's rights to self-determination. Cornett (1992), identifies this as the most prudent concern, and recognises the fundamental need that practitioners have to not impose their own religious and spiritual frames of reference upon clients. Cornett (1992), Sermabeikian (1994), and Canda and Furman (1999), recognise that this is an important aspect of why inclusion is necessary, as it highlights a significant value-base for practitioners which have implications for practice. Other arguments maintain that addressing religious issues in professional practice weakens the separation of church and state; that social work should be value free or objective; that religion and spirituality are inconsistent with a scientific professional base for practice, and that social workers tend to be irreligious or uninterested in the subject (Canda and Furman, 1999).

3. The third position is concerned with what Canda and Furman (1999) term logistical problems. From this position there is recognition of the profession's inadequate development of methods to integrate religious and spiritual concerns in practice. Cascio (1998) identifies this inadequacy particularly in regards to assessment processes. These concerns have highlighted a number of gaps and problems for the social work curriculum. From these concerns arguments are made that the concept of spirituality is too vague, and does not provide an adequate definition from which social work can work. As a result, attempts to integrate religion within social work are not adequately developed and workers are not trained or experienced to work in this area. Therefore it is argued that it would be more appropriate to leave it out all together or simply make referrals. Secondly, authors argue that the social work curriculum is already too crowded and social work educators are not prepared to teach in this subject area. This concern was significantly altered in 1995 with the Council for Social Work Educations recognition of the need to include elements of spiritual development into curriculum policy statements (CSWE, 2001). This states:
Social work education programs provide content on the reciprocal relationships between human behaviour and social environments. Content includes empirically based theories and knowledge that focus on the interactions between and among individuals, groups, societies, and economic systems. It includes theories and knowledge of biological, sociological, cultural, psychological, and spiritual development across the life span; the range of social systems in which people live (individual, family, group, organisational, and community); and the ways social systems promote or deter people in maintaining or achieving health and well-being (CSWE, 2001 Emphasis added).

This inclusion is recognised as the beginning of the fourth and current phase in the relationship of social work with spiritual and religious issues. According to Sheridan (2004), including spirituality in social work is still a contentious issue; however, a shift has occurred in that the literature is now tending to focus on exploring the practical aspects of inclusion, as opposed to questioning whether or not spirituality and religion should be included.

Bridging the Gap: Theoretical developments

Following on from concerns about the above logistical problems, academics are paying significant attention to this subject. In particular, there is a lack of training in the area of religion and spirituality in social work education, and social workers leave higher education with insufficient skills and knowledge bases to work with clients in spiritual and religious matters. The historical disassociation of religious and spiritual concerns within social work, and its subsequent re-emerging interest has further highlighted these training gaps, which has meant that the profession has responded reactively to this in an environment where spiritual and religious concerns are of growing importance (Cowley, 1993). Yet, paying little attention to the topic is not an option for the profession in our present context, particularly when we recognise the growing spiritual search and cultural importance of this topic. Very little attention has been given to religion and spirituality by social work educators and researchers (Loewenberg, 1988; Magnusson and Endler, 1977; Cox, 1985). The historical rift that developed between social work, its religious and spiritual origins, and its quest to gain professional status and scientific respectability, has not assisted the development of the profession in the area of spiritual development (Okundaye, Gray and Gray, 1999: Canda, 2002).
The profession faces what Bethel (2004: 28), describes as “a dearth of knowledge”. Social work knowledge has ignored spiritual considerations (Sheridan, 2004; Gilbert, 2000). This absence has ultimately led to what Hodge (2003b) terms a “faith blind” approach. This ‘faith blind’ approach has left the profession without adequate knowledge and skills from which to work in this area with people for whom religion and spirituality are an important aspect of their lives. At the heart of this ‘faith blind’ position is an absence of theoretical understandings from which the profession can establish practice guidelines and assessment and intervention models.

In 1994, Sermabeikian entered this theoretical conversation with a seminal paper which discussed the importance of integrating spirituality into social work practice. Sermabeikian (1994) recognised the need to develop a theoretical framework for exploring the nature of spirituality. To achieve this Sermabeikian suggested we draw on Jungian Psychology, and the humanistic understandings of Maslow. Drawing on these Sermabeikian (1994) provided a definition for spirituality which included nine dimensions drawn from spiritual humanism. This definition provided a universal understanding of the construct of spirituality relevant to human experience (Sermabeikian, 1994:89). The nine dimensions of spirituality were: a transcendent dimension; meaning and purpose in life; mission in life; sacredness of life; material values; altruism; ideals; an awareness of the tragic; and fruits of spirituality.

This construct reflects a philosophical viewing of spirituality that is implicitly atheistic in outlook. Implicit atheism involves the absence of theistic beliefs (belief in the existence of God or gods) without an open rejection of theistic beliefs (Smith, 1979:13-18). This construct is polarised with religious viewings of spirituality that include a theistic understanding. Underlying this polarised position is the philosophical theological debate about the very existence of God (Bergin, 1980).

Similarly, other authors concentrate on theoretical understandings about the nature of spirituality drawn from transpersonal psychology. Cowley (1993) proposes that transpersonal theory is the only theory that focuses on the spiritual dimension in psychology. Transpersonal psychology emphasises spiritual development as a central aspect of transforming consciousness. Theoretically, transpersonalism is concerned with higher states of consciousness that are considered beyond the self. From this position it draws on
understandings of personhood posited by Jung, Maslow, and Rogers who are seen to be early pioneers in transpersonal psychology (Cowley, 1993).

These theoreticians are associated with transpersonalism because each developed and acknowledged a transcendent dimension of personality higher than self-actualisation. For Jung, the spiritual dimension is seen to be the essence of human nature. Accordingly, Jung developed analytical psychology by including a theory of personality that also offered a conceptualisation of the spiritual dimension (Sermabeikian, 1994). Jung’s conceptualisation is concerned with the search for mystical experiences, ultimate values, unitive consciousness and the legitimating of spiritual practice (Cowley, 1993). An important component of Jung’s concepts for social work is an understanding that the transcendent dimension of spirituality enhances the capacity for people to change (Sermabeikian, 1994). Maslow, considered the father of transpersonal theories, added, in 1968 the concept of “self transcendence” to his hierarchy of needs, representing a further view of human potential (Cowley, 1993). This view continued to be explored and expanded by Carl Rogers in realisation of the importance of the spiritual dimension. According to Payne (1997), the humanist considerations share a commonality with eastern philosophies by focusing on the ability of human beings to realise their potential and enhance wellbeing through spiritual development. Western constructions however seek to maintain a distance between the religious frameworks of these understandings and the philosophical viewing of these positions. These explorations have received little attention or development within the main thrust of theoretical developments.

Attention has also been given to developing the bio-psycho-social perspective to incorporate the spiritual dimension (Cornett, 1992). This position utilises bio-psycho-social theories (Northen, 1982) adding spirituality as a dimension of human experience. The bio-psycho-social-spiritual perspective appears to offer at this stage the widest acceptable framework for explorations and developments in this field, having been adopted by the Council for Social Work education in the United States (Meinert, 2003). However, there is varying consensus as to the nature of spirituality in the bio-psycho-social-spiritual perspective. Some of the approaches to the development of this synthesize humanist, transpersonal and eastern philosophical ideas excluding religious frames of reference, yet others incorporate concepts of a divine being. The depictions of spirituality from this perspective vary considerably with regards to importance, relevance and temporality to human experience. Meinert (2003) offers
a helpful summary of these differing positions and the developing bio-psycho-social spiritual depictions of spirituality as follows:

**Bio-Psycho-Social-Spiritual Depictions A (Meinert, 2003:1)**

![Diagram of Bio-Psycho-Social-Spiritual Depictions]

**Depiction A** Represents the position held by the official social work education establishment. Students are taught to visualize and relate to clients in a holistic fashion that includes bio-psycho-social-spiritual dimensions across the lifespan. The spiritual dimension may or may not be based on adherence to a set of religious beliefs and practices or a dogma. Typically, content from the biological, social, and psychological sciences is included in the curriculum toward developing a holistic view of the person. Programs are free to present content about how religions foster spirituality, but it is not required that specific religions be covered. It is assumed that because spirituality is highly individualistic, less is said about it, while material about the biological, social, and psychological sciences is covered thoroughly. As far as the author can determine there has been no study of curricula in social work education programs that measures the extent to which educational content about the four dimensions is presented to students. It is assumed that more is presented about the social and psychological dimensions, some about the biological, and little about the spiritual” (Meinert, 2003:1).

*Figure 2 Bio-psycho-social-spiritual depictions of spirituality adapted from Meinert (2003:1)*

*Depiction A*
Depiction B "illustrates four levels of awareness and consciousness of increasingly higher order (Vaughan, 1995). Moving from the innermost circle, representing biological needs, and outward through psychological, social and then the spiritual requires a degree of comfort and adaptation at each level. There is some amount of independence between the levels, but the holistically healthy person will have a sense of well-being at each of them. This conception resembles the formulation by Maslow of the hierarchy of needs. In the depiction the spiritual dimension at the highest level is maximized if the dimensions at lower levels are healthy and fulfilled" (Meinert, 2003: 1).

Figure 3 Bio-psycho-social-spiritual depictions of spirituality adapted from Meinert (2003:1) Depiction B
**Depiction C** "places spirituality on a higher order than in depiction A, and similar to depiction B, it elevates spirituality to the top of the hierarchy compared to the other three dimensions of self (Ferran, et al., 1989). It possesses a unifying function in that spirituality embraces and integrates the other three dimensions. The outer circle of spirituality is also in touch with the outer world and the universe at large. This is consistent with the general belief that spirituality has a transcendent quality. It is assumed that the concept illustrated in depiction C represents the understanding of spirituality held by most persons who consider themselves as spiritual persons" (Meinert, 2003:1).

Figure 4 Bio-psycho-social-spiritual depictions of spirituality adapted from Meinert (2003:1)

Depiction C
Within these theoretical constructs is the central concept of transcendence for understanding spirituality. Each depiction approaches this concept very differently; however each recognizes the importance of transcendence as the distinguishing feature of spirituality (Elkins, Hedstrom and Hughes, 1988; Ellison, 1983). How authors treat the concept of transcendence varies significantly dependent upon whether it is viewed through philosophical or religious lenses. From the various depictions of spirituality illustrated above, transcendence can be seen to be connected to God, the inner self, a sense of purpose, a dimension greater than one’s self (Cobb and Robshaw, 1998), or a combination of these.

Within the field of health care, Cobb and Robshaw (1998) identify two aspects of transcendence relevant to the varying approaches taken by research in this field. These aspects relate to transcendence as a process that can be located in both inner and outer expressions. The inner expression is termed the soul and the outer the spirit. Cobb and Robshaw (1998)
point to the soul as relating to a person’s innermost emotional experiences or matters of the psyche. Spirit transcendence conversely, is concerned with the human potential to expand itself beyond our present situations and connect to a higher power, or something greater outside of one’s self. Conceptually, Reed (1992) locates this viewing of transcendence with human experience on a horizontal and vertical plane. The horizontal reflects a person’s sense of connection to others and their environment. The vertical reflects a person’s sense of connection beyond his/herself to an ultimate reality, God or other transpersonal depiction.

Spirituality conceptualised in this way, according to Cobb and Robshaw (1998), mirrors Ferdings (1982) conceptualisation of spirituality as representing dimensions of wholeness, which equates to the soul dimension of transcendence and holiness or the spirit dimension. In this regard Cobb and Robshaw (1998) state:

Wholeness emphasises the roles of mind and body within personal development, self awareness, and insight into other’s needs. Holiness refers to an awareness of a higher power and relatedness to God. Thus as soul and spirit both define transcendence, it is the integration of wholeness and holiness that defines spirituality (Cobb and Robshaw, 1998: 44).

Additional Models of Spirituality

In 1995 Pamela Reed in the field of nursing proposed a conceptual map as an analytical tool for research into spirituality. Reed developed a multiparadigm model for this purpose that recognises the influences of ontological and epistemological perspectives upon research in this area (Figure 6 overleaf).

In this model two axes are utilised. The first axis represents an epistemology of spirituality from modern to postmodern perspectives. The second axis is concerned with ontology of spirituality, and how the spiritual nature of humanity is perceived. The two axes intersect forming four quadrants in which research and theory can be located. Each quadrant represents the varying views of transcendence, from a spirit or soul based perspective, and is combined with a modern or postmodern philosophy of science (Reed, 1995). According to Reed (1995) each of these quadrants also represents domains of praxis, as each provides a perspective for practice.
In quadrant one depictions of spirituality consist of:

- A spirit view of transcendence;
- Modernist philosophy of science;
- Dualist view of spirituality interpersonal focus;
- Spirituality as part of the mind has the potential to enhance a person’s psychological coping through religious mechanisms;
- Divine action or a supernatural domain may exist but can’t be studied or offer anything useable for explanatory theory;
- Prayer and other interventions related to the client’s religious beliefs may be utilised to enhance their ability to cope;
- Spiritual phenomena outside of empirical observation such as perceived supernatural experiences are pathologies;
- Focuses solely on the empirical effects, spirituality exists but supernatural processes are outside the scope of science;
• Praxis or practice methods that flow from this position seek to employ the client’s own religious practices to enhance coping.

Quadrant one represents an empirical viewing of spirituality based in modernist, positivistic understandings, spirituality itself is a phenomena outside the realm of empirical measurability. In this model a client’s spiritual belief systems are part of their psychological coping mechanisms and may be of benefit in intervention as a means of increasing a client’s ability to cope. However, any overt focus on super empirical occurrences outside of what can be observed or measured empirically is viewed as pathological.

In quadrant II depictions of spirituality consist of:

• Soul expressions of transcendence and a modernist philosophy of science;
• Focuses on mind and body, how the mind affects the body (medical model);
• Spiritual called mind, soul, consciousness and represents inner neurological and emotional mechanisms;
• Spiritual experiences in the mind trigger placebo effects and psychological and neurological responses;
• Praxis from this perspective develops a therapeutic relationship to help reframe these experiences providing emotional support;
• From this perspective the metaphysical does not exist and spiritual experiences are a construction in the mind of the client;

From this perspective a medicalised viewing of spirituality is evident where spirituality is a part of internal client mechanisms. Spirituality for the client is a constructed viewing of reality that can have the effect of creating illusory experiences resulting in psychological or neurological responses. Accordingly the super empirical dimension exists only in the mind of the client as a construction of their perceived reality.

Within social work and other disciplines the above models lead to a pathological depiction of the client’s spiritual belief system.
In Quadrant III depictions of spirituality consist of

- Soul transcendence and a postmodern philosophy of science;

- Important to this position is humanistic and holistic perspectives that emphasise the individual development of self consciousness and transcendence of ego;

- Spirituality is an integral component of life;

- A phenomenon is viewed from the client’s perspective and metaphysical dimensions are legitimate areas of study as part of human experience. These dimensions however are not thought of as super empirical or supernatural but within the realm of reality and explainable by concepts from the physical sciences at an atomic level;

- Praxis in this area includes aspects of spiritual development that helps clients grow spiritually and foster self transformation;

Quadrant three moves beyond the first two modalities recognising metaphysical aspects of spirituality. But not as super empirical phenomena but phenomena based within observable reality explainable through scientific understanding. The client’s perspective is important and spirituality is seen as an integrated component of life. Within this modality spirituality is an important part of the developing self conscious where the ego is seeking transcendence of self. From humanist perspectives spirituality is vital to the egos development beyond Maslow’s notions of self actualisation. Spiritual development is employed to facilitate the development of clients in this area.

Love and Talbot (1999) have offered some helpful operational aspects of spiritual development that provide an outline of key components of this quadrant, particularly focused on process;

1. Spiritual development involves a process of seeking personal authenticity, genuineness, and wholeness as an aspect of identity development.

2. Spiritual development involves the process of continually transcending ones current locus of centricity.

3. Spiritual development involves developing a greater connectedness to self and others through relationships and union with community.
4. Spiritual development involves deriving meaning, purpose and direction in one's life.

In quadrant four the depiction of spirituality consists of:

- Spirit view of transcendence and a postmodern philosophy of science;
- This position is usually theistic containing notions of God;
- An awareness of God and connection with is a valid form of spirituality;
- Human beings have an inherent desire to connect with God and spiritual issues arise out of disconnection;
- The metaphysical dimension and supernatural experiences are considered legitimate but are all linked to notions of God or the spirit;
- There is human interaction with the divine and the divine with human which can be explained by natural laws, supernatural understandings and laws of nature not yet discovered;
- Praxis focuses on nurturing spiritual gifts and the client's spiritual development by providing opportunities for clients to commune with God and utilising religious or spiritual experts collaboratively;

Quadrant four represents some religious views of spirituality; all aspects are usually linked to monotheism where the human person is searching for a relationship with the divine. The super empirical dimension is as real as the empirical and the two are interwoven. The divine and human dimensions interact within a relational context; hence interventions seek to build this relational aspect.

**Divided Conversations: The binary between spirituality and religion**

Discussions about religion and spirituality are fraught with tensions. The major trend of authors is to treat religion and spirituality from a polarised position, whether this is in exploring or developing practice implications or theoretical understandings (Praglin, 2004).
Meinert (2003) provided an analysis of this, by exploring 120 articles in social work journals. These articles were categorised according to those that: dealt solely with religion; solely with spirituality or a combination of both. Meinert (2003) concluded that to a large degree the literature treats the topics of religion and spirituality dichotomously as only 14.2% of the articles discussed both. This polarisation and dichotomy reflects Sermabeikian's (1994) own position which has developed a framework of theory, independent of religious traditions, and drawing heavily on philosophical assumptions.

Praglin (2004) highlights the difficulty of negativity towards religion by authors writing in this field. This negativity largely reflects a level of anti-institutionalism. Schneiders (2003) suggests the conflict between religion and spirituality has arisen primarily from a reductionist perspective that equates religious traditions with its institutional failures. This means that the attention given to religion in the social work literature usually focuses on negative features. These negative features include views that religion leads to: intolerance, fundamentalism, and judgmental or dogmatic, perspectives.

Praglin (2004) has provided an analysis of the way religion is dealt with in the literature, and outlines a number of the approaches that have been taken. Praglin suggests that authors predominantly employ a radical separation of the concepts of religion and spirituality. This separation is maintained by using universal concepts of spirituality. Alternatively, authors undertake a resistant and avoidant approach to religion and spirituality or provide a simplistic form of syncretism. This simplistic form of syncretism embraces spirituality uncritically and without acknowledging the depth of scholarship in religious studies and other disciplines concerned with spirituality (Praglin, 2004). Praglin (2004) suggests there is a fourth approach that has emerged. This approach calls for a genuine interdisciplinary conversation about spirituality and religion. According to Praglin (2004), this approach:

Recognises conceptual and ideological differences between the two disciplines, however, and is wary of easy Answers. Such an approach also identifies the contending ideological motivations of social work's founders; acknowledges those forces that have disengaged religion from social work; and recognises our broader intellectual traditions which do not easily separate the concept of religion and spirituality (Praglin, 2004:75).

The main trajectory of scholarship in the social work field this far has not opted for this approach. Only a small number of authors are choosing to consider spirituality in the context of particular religious traditions. For example Van Hook, Hugen and Aguilar (2001), and to
some extent Nash and Stewart (2002), who include the views of religious professionals in their edited book ‘Spirituality and Social Care: Contributing to Personal and Community Wellbeing’.

Inevitably, the above tensions lead to conflict when undertaking explorations in this area. This is largely centred on spirituality’s relationship to religion, and the association spirituality is seen or not seen to have. There tends to be a continued critical engagement with religion, with some authors opting for the use of spirituality to avoid components of religion, particularly theistic (notions of God) and super empirical understandings of supernatural phenomena. When religion enters conversations about spirituality, it is usually met with negativity and resistance (Wendel, 2003; Praglin, 2004; Hodge, 2003a). This is revealed when trying to define spirituality and determine spirituality’s association with religion. There is a propensity to polarise both spirituality and religion because of negativity toward religion and scepticism and anti-institutional sentiments. As a result spirituality is the preferred term within the literature, and references to religion are avoided or highly criticised. Ultimately this, leads to reluctance to include religious considerations.

As can be seen in Reed’s (1995) model these influences and tensions are operating at an ontological and epistemological theoretical level. These debates however do not remain within the realm of social science and social work research and literature but filter through to influence approaches to practice through the differing theoretical constructions.

The literature, in fact, has paid little attention to the constructed perception of religion and the consequences this will have for theorising in this area and subsequent influence on practice. Praglin (2004) and Wendel (2003) raise concerns about the propensity to act in a discriminatory way towards clients’ religious beliefs in the context of practice, because of the negativity towards religion that is reinforced at an academic level.

Hodge (2002a) is more specific, and maintains that there is strong evidence to suggest a level of negative bias towards evangelical Christianity. Hodge (2002a) believes throughout the social work profession this bias leads to hostility and intolerance directed at evangelical Christians.
Definitions of Spirituality

Providing an operational definition for spirituality is not an easy task; Love and Talbot (1999) noted there are no commonly accepted definitions. Chiu, Emblen, Van Hofwegen, Sawatsky and Meyerhoff (2004) indicate that comprehension and confusion about the concept of spirituality is ever present in the literature. Authors attempting to provide definitions have focused on a number of concepts but Wendel (2003) notes that at the most rudimentary level of definitions, we find problems of consensus. However Wendel (2003) points out that this is not uncommon, citing Immanuel Kant’s recognition that philosophy is full of faulty definitions, and that definitions parse are always in an incomplete state. Despite these difficulties a number of definitions have been posited; some are exclusive of religious references, leaving out theistic perspectives. Most fail to incorporate, or refer to the supernatural dimensions of spirituality. Some, focus largely on intrapersonal understandings in an individualistic framework, while others focus on inter and transpersonal understandings or a combination of these. Love and Talbot (1999) identify some examples in the early literature for definitions of spirituality which include:

- A focus on ultimate concerns and meanings of life (Tillich, 1959),
- A movement towards union with God (McGill & McGreal, 1988),
- Belief in a force greater than oneself (Booth, 1992),
- Communication with God (Fox, 1983).

- Spirituality is the general human experience of developing a sense of meaning, purpose and morality (Canda, 1989).

Additionally, as early as 1961 Sue Spencer provided one of the first definitions for spirituality within social work literature:

those aspects of individual feelings, aspirations and needs which are concerned with man’s effort to find a purpose and meaning in life experiences, and which may occur without the individual’s being related to an organised church body or his making use of a systematised body of beliefs and practices (Spencer, 1961: 161).

Within these and other attempts to define key concepts, there are concerns expressed about the relationship spirituality has to religion. Some authors regard the terms as distinct but
overlapping constructs (Carroll, 1998; Pellebon et al, 1999), but for others spirituality is perceived to transcend ideologies, dogma and the negative elements associated with religion (Damaniakis, 2001). In deed definitions are likely to vary from person to person, across ethnicity, gender, class and cultural lines (Gotterer, 2001). Given the various viewpoints and conceptualisations being constructed at an academic level care needs to be taken to also explore our own objectivity.

Northcut (1999) recognised that when constructing definitions about this topic we need to be clear about the construction of our own ideas and how they take place, particularly from a constructivist paradigm, to take note of the context in which our definitions arise. This position acknowledges that our definitions and conceptualisations are underpinned by our own beliefs. To counter the dangers of perpetuating a disparity between academic understandings and the realities of clients we need to take care to explore the voices of service users in an environment of open dialogue. In this regard constructed definitions for research purposes provide a starting point for conversations with client groups (Northcut, 1999).

At present, research in this field has largely taken a top down approach that has explored the voice of practitioners representing only some of the varying views in this subject. These varying views are further complicated by disparities between the researchers, educators, practitioners and clients own definitions and conceptualisations of the subject. According to Pellebon et al (1999) some clients consider spirituality to be different from religion, yet for many, the terms hold the same meaning. This becomes problematic in research into spirituality as it is sometimes perceived synonymous with religion and thus meets resistance from an academic perspective (Damaniakis, 2001). Despite these problems and lack of commonality definitions for religion and spirituality are becoming widely accepted in the form of two central distinguishing elements (Damianakis, 2001):

- Religion generally defined as formalised practice or a systematic body of beliefs and practices related to a spiritual search. (Cornett, 1992; Sermabeikian, 1994; Siporin, 1986)
- Spirituality as a Search for meaning and purpose in one’s life (Canda and Furman, 1999; Sheridan, 2004).
Pellebon et al (1999), suggest that the primary difference between the terms is that: “religion is a structured mode of spirituality that typically has a group following, whereas spirituality can include an individual experience with or without a structured belief system” (Pellebon et al, 1999: 230).

Given the differing viewpoints about the meaning of religion and spirituality and the relational aspects between the two, conclusions and generalisations have been difficult (Phillips, 2003). Canda and Furman (1999), suggest there are three strategies for defining spirituality: an etic, emic or transemic approach to definitions. Authors and researchers utilising an emic approach seek to develop definitions associated with specific contexts, cultures, time’s places and people. This approach is wary of constructing universal definitions that may be imposed upon other groups. This is a valid concern given the negativity to religious understandings and conceptualisations and the lack of attention given to indigenous voices and understandings about this topic at an international level. Indeed a collegial response in our context has perceived Canda and Furman’s (1999) definition of spirituality as a “universal pakeha construct” (Anonymous, Personal comment, 2004).

This tendency to develop a universal definition is termed an etic approach which attempts to define spirituality in a way that can be utilised across cultures and contexts, in this approach there is an attempt to achieve a common language that would bridge the difficulties encountered by the diverse expressions of spirituality. Both perspectives operate from either end of the spectrum in opposition to each other.

Canda and Furman (1999) suggest adopting a third approach to defining spirituality which the authors term transemic this focuses on both the emic and etic approaches. Within this approach the authors posit that an appreciation for diversity can occur whilst also seeking to capture the universal aspects of spirituality relevant to human experience.

In this regard they coin definitions for both spirituality and religion which are becoming widely used by researchers in this field these definitions state:

- **Religion**: is an organised and structured set of beliefs and practices shared by a community related to spirituality (Canda and Furman, 1999).
- **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 (Canda and Furman, 1999).

These definitions have been initially adopted within this research in recognition that a definition in the context of Aotearoa would need to be broad to encompass the diverse realities a position that Durie (1994) endorses when defining the concept of taha wairua within the Te Whare Tapa Wha model of health care in New Zealand. They are however being provided as a starting point for discussions in line with Northcutt’s recommendation.

Praglin (2004) suggests the need for interdisciplinary conversations in this area particularly outlining the contribution that the field of spiritual development and pastoral theology could add to this conversation.

Chiu et al, (2004) observed within the field of nursing that there is no consistent definition of spirituality in the literature. The authors acknowledge that spirituality is a multidimensional concept primarily affected by humanistic principles and increasing cultural influences. This influence may include an increasing emphasis on the metaphysical or supernatural aspects, such as found amongst Native American Indians. Or, it may place greater emphasis on other elements of spirituality such as faith, higher power, meaning, purpose wholeness or integration. To this extent Chiu et al, (2004) recognises that there can be dimensions of cultural specificity within varying definitions. Chiu et al, (2004) identifies the core elements of spirituality in the literature to include:

1. ‘Existential reality’ (existential); which includes attributes of spiritual experiences, meaning and purpose in life, and hope.
2. ‘Connectedness’ (relational); which includes attributes of relationships with self, others, nature and a higher power.
3. Transcendence (subjective);
Conclusion

In Aotearoa New Zealand the professional association of social workers (ANZASW) recognises that we are located in a worldwide community of social work. Likewise, scholars recognise we are immersed in the global production of knowledge. This chapter has explored the international context in which research into the role of religion and spirituality is rapidly taking place. By focussing on the international literature attention has been given to the historical relationship between religion and, or spirituality and social work. The theoretical developments, varying modalities and definitions and the trajectory of scholarship have also been discussed. This material has set the scene for locating the Aotearoa New Zealand investigation into the role of spirituality and religion in social work within the international context. The international conversations occurring provide a platform for the ensuing discussion. The following discussion will begin to explore literature and conversations within the Aotearoa New Zealand context about the subject of religion and spirituality.
Chapter 3: Building the Context: Spirituality and Religion within Aotearoa New Zealand Social Work

The growing interest in and integration of spirituality and religion within social work practice found in the international literature is not reflected as a significant topic of inquiry for social work in Aotearoa New Zealand. Interest in spirituality and religion in Aotearoa New Zealand social work is limited, with the exception of Tangata Whenua and Tagata Pasifika social workers who have made substantial efforts to integrate religion and spirituality into their practices (Jenkins, 1988; Autagavaia, 2001). More interest and attention is obvious within the health sector particularly with the development of Māori models of health care such Durie’s (1994) Te Whare Tapa Wha model (Ihimaera, 2004; Kuka, 2000; Stewart, 1999; Whai Ora, 1987). Some discussions have occurred professionally and nationally within the Aotearoa New Zealand Association of Social Workers (Nash, 2002). Furthermore, a limited number of social work educational institutions are now offering specific courses in this area in their social work programmes. These programs are currently available at Massey University School of Social Work and Unitec in Auckland.

The lack of attention given to religion and spirituality in Aotearoa New Zealand social work is not surprising given the clear separation of church and state in Aotearoa, entrenched secular views about the importance of religion, and an evident anti-institutional stance towards religion, particularly the Christian tradition. Explorations of this topic in social work in Aotearoa New Zealand have been largely neglected, a position compounded by the lack of attention given by social scientists in general historically to exploring matters of religion in Aotearoa New Zealand because of its perceived low profile.

This chapter explores these considerations and the place of spirituality and religion in Aotearoa New Zealand society and social work, in light of the international explorations and developments in this area explored in chapter two. It will seek to answer several questions

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10 Tangata Whenua translates to People of the land and refers to the indigenous peoples of Aotearoa/ New Zealand.
11 Tagata Pasifika translates to the people of the pacific and refers to the people of pacific island decent living in Aotearoa/ New Zealand.
raised about Aotearoa New Zealand by international academics researching the role religion and spirituality plays in social work. These questions include:

- What role religion and spirituality play in Aotearoa New Zealand society and social work?
- What is happening in Aotearoa New Zealand with regards to processes of secularisation?
- What is the relationship between the church and state in Aotearoa New Zealand?
- What are some of the contextual cultural implications of spirituality for Aotearoa New Zealand social work?

In Aotearoa New Zealand, information about how spirituality and religion is being integrated, or their implications for social work, is yet to be collated in any significant way. A number of programs have integrated spirituality within social service initiatives in both statutory and voluntary settings. This includes the incorporation of Fa’ asamoa as a major component of practice within Samoan models of social service delivery and developments within the Hospice Movement (Tennant, 2008; Muliato-Lauta, 2000; Mafie’o, 2005; Faletolu, 2007). Also, statutory agencies such as the NZ Department of Corrections have acknowledged the need to integrate spirituality into practice models; this however is not unproblematic as there are difficulties around how to integrate this effectively mostly due to a lack of guidance and knowledge about how to include this in practice (NZ Department of Corrections, 2001). At present, integration is largely focused on the objectives of cultural competency and as such spirituality is integrated to meet the needs of specific cultural groups, as opposed to recognition and integration of spirituality as an accepted component of holistic models of practice cross culturally. This differs significantly to the international developments where it is now acknowledged that spirituality is a central component of human experience and models now incorporate a spiritual component alongside the biological, sociological and psychological aspects of personhood.

Discussions and developments thus far in Aotearoa New Zealand have focused more specifically on Tangata Whenua concerns and objectives, which have included submissions to the Royal Commission on social policy in 1988 and more recent suggestions for practice.

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12 See Muliato-Lauta, FA’ASAMOA and Social Work within the Aotearoa/ New Zealand Context for an example of this integration within the work of the Ola Mo Isi Trust. Pp. 65-78.
models that integrate spirituality (Ruwhiu and Ruwhiu, 2005). In contrast to Aotearoa New Zealand, significant research and discussions have been undertaken in the United States, Great Britain and Norway to explore the views social workers have about the role of religion and spirituality in their practice (Canda and Furman, 1999; Sheridan, Wilmer and Atcheson, 1994; Sheridan and Amato-Von Hemert, 1999; Sheridan, Bullis, Adcock, Berlin and Miller, 1992).

These investigations have evolved into international comparative studies, with more recent collaborative ventures between researchers in the United States, Norway and the United Kingdom (Furman, Zahl, Benson and Canda, 2007; Furman, Benson, Grimwood and Canda, 2004). Further development and collaboration is also being considered with researchers in Australia, who are now proceeding with an investigation into the role of religion and spirituality in social work, as well as this PhD research in Aotearoa New Zealand.

These comparative studies are important to assist in the development of theoretical understandings about the role of spirituality and religion in social work, particularly given the rapid increase in interest in this field over the past twenty years.

Mol (1985) states:

Cross-cultural comparisons are the best possible means for puncturing theories of religion that have swollen prematurely. Explanations often have to be revised when a larger context is taken into account. Yet astoundingly often, articles in reputable journals and books by well known scholars are monuments of parochialism (Mol, 1985:90).


Social scientists generally agree that the social work knowledge base can be enhanced by examining social phenomena in diverse cultural settings, by testing new methods and paradigms in a variety of cultural contexts, and by applying the findings from scientific inquiry and experimental interventions in cross-cultural milieus (Midgley, 1995: 1490-1493).

The Aotearoa New Zealand context shares a number of trends in areas such as the separation of church and state with slight variations and processes of secularisation but differs in a number of developments which will add to understandings about religion and spirituality
within social work at an international level. Some of these aspects will be explored in this chapter and developed further throughout this thesis.

**What place does religion and spirituality have in Aotearoa New Zealand Society?**

Before I begin to explore the role of religion and spirituality in Aotearoa New Zealand social work and some of these differences it is important to establish a general view of the place of religion and spirituality in Aotearoa New Zealand society. This is important because the larger social and political discourses, perceptions and attitudes about religion and spirituality will impact upon how it is viewed, integrated and acknowledged within social work in Aotearoa New Zealand.

Exploring the concept of religion has often been neglected in sociological fields in Aotearoa New Zealand (Ward, 2003; 2004). According to Hill (1982) matters concerning religion in Aotearoa New Zealand had not been extensively researched. Attention to the sociological aspects of religion was not a major focus of sociology in this country until after the late 1960s. In the two decades between the late 60s and early eighties interest increased in sociological fields and with it a new sense of appreciation for the centrality of religion as a social and sociological phenomena began to occur. Even with this increased interest research tended to focus on quantitative aspects of religion concerned only with measuring levels of adherence and attendance to varying communities of faith (Hill, 1982). Writing at this early time Hill (1982) noted that the widespread assumption amongst authors was that religion for Aotearoa New Zealand society had a very low-profile. An investigation into the role of religion by sociologists in the Aotearoa New Zealand context has continued to attract little attention from researchers outside of measuring levels of church attendance and adherence.

Ward (2000) confirms the lack of research in Aotearoa New Zealand regarding religion:

> It is more difficult to get an objective picture of what the trends have been in Aotearoa New Zealand. There have been few attempts to analyse longitudinal, quantitative data about religious belief. In part this is because of the lack of availability and accessibility of relevant survey data. National social survey questions on religious beliefs in Aotearoa New Zealand have been until the late 1980s irregular and unsystematic (Ward, 2000:6).
Despite the lack of data about the role of religion in Aotearoa New Zealand Society prior to the late 1980s some data are now available in the form of census statistics, material from international research programs and a number of church based surveys.

The Aotearoa New Zealand census statistics (2006), suggest that a significant percentage of the population identifies with the Christian tradition and that there is a diverse range of religious associations present in Aotearoa/ Aotearoa New Zealand (see table 1). The data also suggests the association with Christianity is in decline when compared to prior census results (NZ Department of Statistics, 2006). Veitch (2006) forecasts that this decline will continue over the next decade and will result in a 25% decrease in the numbers of the population who identify with the Christian belief system by 2016. Veitch (2006) also forecasts that as Aotearoa New Zealand continues to grow multi-culturally we will see a continued increase in other diverse expressions of religion in Aotearoa New Zealand, such as the Islamic faith.

Both facets are evident in the 2006 census data. The 2006 data show a continuing decline of Christianity between the 2001 and 2006 data of 5%, although despite the overall decrease a number of Christian affiliations have seen large increases, such as; Orthodox Christian religions 37.8%, evangelical, born again and fundamentalist affiliations, 25.6% and Pentecostal 17.8%. Conversely an increase in numbers identifying with non Christian religions was also reported. From 2001-2006 the numbers identifying with the Sikh religion increased 83%, Hinduism 61.8%, Islam, 52.6%. It is noted that this growth is mainly due to immigration (Statistics New Zealand, 2007).
Table 1 New Zealand Religious Affiliations Extrapolated From the New Zealand 1996, 2001 and 2006 Census

<table>
<thead>
<tr>
<th>Religious affiliation (total responses)</th>
<th>Census year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1996</td>
</tr>
<tr>
<td>Buddhist</td>
<td>28,131</td>
</tr>
<tr>
<td>Christian</td>
<td></td>
</tr>
<tr>
<td>Anglican</td>
<td>631,764</td>
</tr>
<tr>
<td>Catholic</td>
<td>473,112</td>
</tr>
<tr>
<td>Presbyterian, Congregational and Reformed</td>
<td>470,442</td>
</tr>
<tr>
<td>Christian nfd</td>
<td>186,891</td>
</tr>
<tr>
<td>Methodist</td>
<td>121,650</td>
</tr>
<tr>
<td>Pentecostal</td>
<td>69,333</td>
</tr>
<tr>
<td>Baptist</td>
<td>53,613</td>
</tr>
<tr>
<td>Latter-day Saints</td>
<td>41,166</td>
</tr>
<tr>
<td>Brethren</td>
<td>21,933</td>
</tr>
<tr>
<td>Jehovah's Witness</td>
<td>19,527</td>
</tr>
<tr>
<td>Adventist</td>
<td>14,691</td>
</tr>
<tr>
<td>Evangelical, Born Again and Fundamentalist</td>
<td>1,584</td>
</tr>
<tr>
<td>Orthodox</td>
<td>6,933</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>14,625</td>
</tr>
<tr>
<td>Lutheran</td>
<td>5,007</td>
</tr>
<tr>
<td>Protestant nfd</td>
<td>2,778</td>
</tr>
<tr>
<td>Other Christian</td>
<td>2,766</td>
</tr>
<tr>
<td>Church of Christ and Associated Churches of Christ</td>
<td>4,233</td>
</tr>
<tr>
<td>Uniting/Union Church and Ecumenical</td>
<td>1,728</td>
</tr>
<tr>
<td>Asian Christian</td>
<td>222</td>
</tr>
<tr>
<td>Total People, Christian</td>
<td>2,143,995</td>
</tr>
</tbody>
</table>

This has also been the case in the United Kingdom where an increase in non-Christian ethnic minority religions has occurred. With this increase Furman et al (2005) observe that often these communities retain their pre-secular religious affiliations and cultural practices. Furman et al (2005) note:

In the UK, Christianity for some may have been privatised due to secularisation, but for the religious followers of Hinduism, Buddhism, Islam, and other world religions, daily life is infused with religious practice (Furman et al., 2005: 27).

Some historians of religious history in Aotearoa New Zealand have argued that the large percentages of the population affiliating themselves with Christianity is indicative only of socialised adherence to the beliefs of families of origin (Oliver, 1962; Sinclair, 1986). They also attributed this identification with the Christian tradition to its values rather than actively taking part in Christianity in any formal or organised sense (Oliver, 1966; Sinclair, 1973). Either way this socialised adherence and identification with Christianity suggests a significant
value base that has implications for social work practice in Aotearoa New Zealand. The need to pay attention to the value bases provided by religious worldviews should be taken account of in social work, given the propensity for value conflicts about religion, and is one aspect explored in the literature (Sermabeikian, 1994; Nash and Stewart, 2002; Ruwhiu et al., 2005; Cauda and Furman, 1999).

Cauda and Furman (1999) point out that social workers' need to pay particular attention to their feelings, beliefs, opinions and moral commitments and how these shape their approach to professional practice. This is an important feature of professional practice which requires social workers to identify their own limitations, biases and negative attitudes for the purpose of personal development and growth. Our own values are a very important part of ourselves, yet little attention seems to be given generally to the implications of our religious and, or, spiritual belief systems, and the impact they have on shaping and forming our personal values and practice.

Cauda and Furman (1999) see our religious and spiritual systems of belief as the real guide for shaping our personal code of ethics. Cauda and Furman (1999) suggest an exploration of our own spiritual and, or, religious belief systems and their implications for practice helps facilitate "value clarity" (Cauda and Furman, 1999:186-187), which in turn assists self understanding, helps maintain personal and professional boundaries, and allows acknowledgement of our own limitations. A high level of value clarity is required for workers who integrate spiritual and religious concerns. According to Van Hook, Hugen and Aguilar (2001), interactions with clients on spiritual and religious issues can become particularly difficult whenever the practitioner experiences a conflict in belief systems between themselves and their clients. Indeed the authors note that social workers, like most people have a propensity to react to clients' religious systems from either the point of view of their own experience (be it negative or positive) within a particular tradition, or from a position that lacks experience of a particular tradition. They tend to project what they know from one particular expression of religion on to all others which provides an inaccurate understanding of the client's worldview (Van Hook et al, 2001).

In 2002, AC Nielson (NZ LTD) undertook research with non church-attending families in part of west Auckland on behalf of the Presbyterian Church in Aotearoa New Zealand (AC Neilson, 2002). This survey confirms the primacy of values and their link to spirituality and or
religion, as participants perceived a strong link between their personal spiritual beliefs and core values. Participants acknowledged that these values provided a guide to living and were felt to be of significant importance for their children to learn. In this survey participants identified central values comparative to fundamental values of the Christian faith such as 'do unto others as you would have them do unto you', trustworthiness, honesty, respect and compassion.

As well as values, the various religious traditions and belief systems in Aotearoa New Zealand contain worldviews, perceptions, and constructions of reality that can be specific to various cultural groups or have cross cultural implications. As a consequence of these differing views social work practitioners may be challenged when they encounter belief systems and values which differ from and are in conflict with their own. Therefore practitioners need to be aware of the potential for them to practice in an oppressive way if they fail to consider these affiliations, by overlooking the importance and significance of religion and, or, spirituality for their clients.

Sermabeikian (1994) suggested that the profession of social work must incorporate an understanding of spirituality, as it is not only important for understanding concepts of values, but also is a possible source of tension for workers between believers and non believers. Sermabeikian (1994) believed workers themselves could not be considered neutral in their own belief systems in whatever form, and consequently this would reveal itself in their work. This is a danger that is already evident in social work practice, which, according to Wendel (2003), has led to spirituality and, or, religion in the therapeutic encounter being seen as a negative element or as inherently pathological.

The lack of recognition and inclusion of religion and, or, spirituality stands in tension with modern social work as it seeks a new professionalism that contains as its hallmark the values of empowerment, advocacy and anti oppressive practice (Milner and O'Byrne, 2002). Authors acknowledge that failing to recognise or include religious and, or, spiritual concerns presents a strong challenge to social work and its commitment to anti-oppressive practice (Hodge, 2003; Praglin, 2004; Wendel, 2003). This is especially important if religion and, or, spirituality are a resource that clients bring which then goes unrecognised, or is met with a negative response. Praglin (2004) suggests that including religion and, or, spirituality within the therapeutic encounter has been explored in the literature in the following ways:
• Resistance or avoidance of including religion and or spirituality;
• An overly generalised syncretism that embraces spirituality uncritically. Proponents taking this approach largely ignore the developments and discussions about spirituality occurring in other fields.
• A radical separation of the terms spirituality and religion for ideological reasons;
• A genuine interdisciplinary approach that engages both spirituality and religion;

It is likely that this range may also reflect the possible responses that agencies and practitioners also will have in how they choose to acknowledge or incorporate religion and spirituality within their work. In the Aotearoa New Zealand context I have suggested elsewhere that we can include two further responses (Stirling, 2005) that include:

• A tokenistic model of inclusion.
• Rejection of and negativity towards institutional or organised systems of belief that clients adhere to.

A second source of data other than the census is available that explores the role of religion in Aotearoa New Zealand Society from Massey University. This data are part of an International Social Survey program carried out in 1991 and 1998 (ISSP, 1991; 1998), in a number of countries worldwide, including the United States, United Kingdom and Australia. The study selected a randomised sample of respondents from the Aotearoa New Zealand electoral role, which is made up of 65 electorates. Approximately 28 names were selected from each electorate equating to a total sample size of 1800. Of the 1800 questionnaires distributed 1538 were eligible to participate and 998 responses were returned representing a response rate of 64.9%. This survey is considered to provide a representative sample of the Aotearoa New Zealand population over the age of 18. Respondents were asked a number of questions to indicate their level of:

• Religious believing.
• Adherence and attendance levels to different faith communities.
• Theistic versus atheistic beliefs (belief in God vs. no belief in God).
• Their perception of the relationship institutionalised religion should have with the state.
• Their overall perception of religion and religious peoples contribution to society

As with the New Zealand 2006 census statistics the data showed a sizeable percentage of the population identified themselves as religious to varying degrees. Unlike the census questions however, respondents were provided the opportunity to identify their own level of religiosity. Overall 2% of the ISSP respondents indicated that they were extremely religious, 9% very religious, 32% somewhat religious. Conversely 9% considered themselves somewhat non-religious, 10% very non-religious and 7% extremely non-religious.

Furthermore and of particular interest were questions directed at respondents’ perceptions about belief in God. A high proportion of respondents reported a theistic viewing to varying degrees. Overall 31% believed God really exists and had no doubts about this, 22% had doubts but still felt the believed in God, 8% believed in God some of the time, 19% did not believe in God but believed in a higher power of some kind and 8% did not believe in God.

When asked to identify how long respondents have had their belief in God 55% indicated that they had always believed in God, 14% believed in God but hadn’t always, 15% no longer believed in God and 16% had never believed in God.

The ISSP respondents were also asked about how they perceived God in relational terms and if they agreed or disagree with the statement “There is a God who concerns himself personally with every human being” (ISSP, 1998). In response 41% agreed, strongly agreed and 35% disagreed strongly disagreed whilst 24% were unsure.

These statistics are interesting given the dominant view that religion is not an important aspect for many in Aotearoa New Zealand. The self reported level of religiosity indicates for a number of potential clients, spiritual and religious belief systems may be present. More interestingly a sense of the divine in theistic terminology is present. Also 41% of the respondent’s perceived the divine in relational terms, interested in their personal wellbeing. Ward (2003) observes that these statistics also represent an increase when compared to the ISSP (2001) findings.
What is the relationship between the church and state in Aotearoa New Zealand?

The integration of spirituality and religion within social work raises objections due to its potential to compromise the division between the church and state (Canda and Furman, 1999). Religious involvement in welfare provision historically has represented a blurring of this division, particularly since the 1920s with the increasing role of the state in the provision of welfare. The division was maintained with a clear demarcation between religious social service provision and statutory provision. However, the call to integrate spirituality and religion within social work practice challenges this separation and proposes that social services consider incorporating religious and spiritual concerns albeit in statutory or Christian social service contexts.

In New Zealand there are strong views about the need to clearly distinguish the boundaries between the state and religion which are likely to illicit a level of controversy towards attempts to integrate religion within social work. These views about the role religion should play in matters of the state operate at a number of levels, from larger social perspectives to agency and individual responses.

Respondents of the Massey ISSP survey (1998) were asked to express their views about the role the church should play in the affairs of the state. The data indicated that the perception about the role religion should play in affairs of the state is conflicting. On one hand, 50% of respondents felt Aotearoa New Zealand society would not be a better country with less influence of religion. On the other hand, 55% of the respondents believe religion should not be involved in decision making processes at a state level, whilst 30% believe religion should be involved.

Bluck (1998) and Consedine (2002) believe that Aotearoa New Zealand is one of the most secular countries in the western world, and as a nation is highly suspicious of anything associated with organised religion. Adhar (2003) also acknowledges that conventional wisdom is that Aotearoa New Zealand is a secular state. It is secular in that it maintains a clear and formal separation between institutional religion and the affairs of the state.
Historically, Aotearoa New Zealand has not had a national established church. Adhar (2003) recognises that Aotearoa New Zealand was settled at a time when the idea of an established state religion was under scrutiny in Great Britain, where serious consideration was being given to the disestablishment of the Church of England. Lineham and Davidson (1997: accessed online at http://www.massey.ac.ns/~plineham/RelhistNS.htm) in their 4th edition of Transplanted Christianity, trace the relationship between the church and state in Aotearoa New Zealand from the colonial establishment of Aotearoa New Zealand until the late 1980s. Lineham and Davidson (1997) attribute the weak establishment of the church in Aotearoa New Zealand to unplanned processes of colonisation where no provision was made for the establishment of the church in Aotearoa New Zealand. Lineham and Davidson (1997) state: “In practice few colonists showed much zeal in establishing church buildings and services in the colony”. As with Adhar’s (2003) ideas of disestablishment, Lineham and Davidson (1997) acknowledge that the colonisation of Aotearoa New Zealand occurred at a time when significant intellectual and cultural changes were taking place in Britain which was limiting the spread of the Church of England to the colonies.

These changes involved a growing voice of dissention about the role religion played in British society at a time when politicians were increasingly tending towards secularism. Also, during this period religious leaders were seeking more independence from the state. Lineham and Davidson (In Press) note that these changes led to the disestablishment of the Anglican Church in Ireland and Wales from 1868. Lineman and Davidson (1997) state:

This was the environment in which the colonial authorities and the Aotearoa New Zealand settlers shaped the role of the government of the colony. They tended to anticipate trends in England, and were unwilling to force on settlers a religious establishment which they did not want, and which soon might be imperilled by legislation. (Lineman and Davidson, 1997)

In 1854, Aotearoa New Zealand’s state relationship with the church was clearly defined when the House of Representatives rejected the idea of an established church in Aotearoa New Zealand. Lineham and Davidson (1997) observe, however that this demarcation between church and state could never culminate in the state’s complete disassociation with religion as in Victorian society there was a strong link between religion and morality. Adhar (2003) observes that despite there not being an established church in Aotearoa New Zealand our society has been influenced by protestant Christianity. Adhar (2003) argues “That there was a
cultural, defacto establishment of generic, Protestant influenced, form of Christianity for a substantial part of its history" (Adhar, 2003:623)

Furthermore, Adhar (2004) observes that Aotearoa New Zealand is a secular state in that it has no formal established church or state religion. But Aotearoa New Zealand’s secularity cannot be considered pure as facets of the Christian faith have formed parts of the tapestry of public life (Adhar, 2004: 31).

What is happening in Aotearoa New Zealand with regards to processes of secularisation?

Aotearoa New Zealand has been affected by processes of secularism. Wood (1996) defines a secular state to be a state in which the government’s role is limited to the temporal realm; independent of institutional religion and ecclesiastical control; likewise religion itself is independent of the state or political control. Bruce (1996) has identified a number of outcomes from processes of secularisation.

- A decline in church membership,
- A decline in organised religion’s institutional power,
- A decline in religious believing.

Likewise, Fulcher and Scott (1999) identify aspects of secularisation which include:

- A disengagement with religious institutions which involves a privatisation of religious belief (Fulcher and Scott, 1999: 325).

Fulcher and Scott (1999) acknowledge that disengagement equates to the separation of religion by political and cultural processes from many or most areas of society. This results in religion ceasing to be a hegemonic force both politically and symbolically.

In Aotearoa New Zealand, the dominant position reflects the above disengagement. Ward (2004) recognises that the general view of religion in Aotearoa New Zealand is that it is in
decline as in other western countries, a decline which will result in its eventual demise. This view of religion in Aotearoa New Zealand reflects a central argument of the secularisation thesis which forecasts the demise of religion in western societies. However, this view has been critiqued, and evidence from international investigations into the role of religion counters the forecasted decline and demise of religion from the public sphere (Ebaugh, 2002). International investigations into the role of religion in western society are revealing trends that indicate an increase in religious believing, which is also reflected in the context of Aotearoa New Zealand. Ward (2000) utilises the Massey University ISSP study as a source of data for indicating this increase and states:

The Massey ISSP Survey\textsuperscript{13} carried out in 1991 and 1998 indicate, if anything, a slight increase in religious believing. Certain belief in God for instance was indicated by 31\% of people, up from 29\%; belief in life after death was up from 57\% to 60\%; and 30\% of people indicated they prayed several times a week, up from 22\%. There is no identical survey to go back further, but Webster and Perry’s study done in 1985\textsuperscript{14} would seem to support the view that religious believing had at least held its own. Different questions were asked so it is difficult to make exact comparisons but there seems to have been little if any decline (Ward, 2000: 6-7).

Ward (2000) highlights the limited evidence in Aotearoa New Zealand and difficulties around measuring this increase in believing. However, despite the limitations Ward (2000) does identify Aotearoa New Zealand’s proximity to other western countries.

Aotearoa New Zealand then, like all western countries, does not appear to have seen the gradual extinction of religious believing as the twentieth century moved out of the sixties towards its conclusion. Instead many of the generation who the figures indicate left the churches in the sixties and seventies, rather than becoming “secular atheists” have been conducting a renewed search for the spiritual. In all of these western countries the pattern seems to be consistent. People have continued to express an interest in things spiritual and religious beliefs have continued to be held by the great majority. Indeed over the past two decades interest in these dimensions appears, if anything, to have increased. On the other hand the pattern has been consistent in western countries as regards attendance at church services and involvement in institutional forms of Christianity – the figures point down (Ward, 2000:7).

\textsuperscript{13} International Social Survey Programme, Department of Marketing, Massey University, 1991, 1998.
\textsuperscript{14} Webster and Perry, The Religious Factor In Aotearoa/ New Zealand Life.
Anti-institutional sentiments towards religion in Aotearoa New Zealand

Ward (2000) acknowledges an anti-institutional stance towards institutional forms of Christianity in Aotearoa New Zealand. Likewise Nielson’s (2002) research identified a propensity for participants to have negative perceptions about institutional churches (Neilson, 2002). Churches were seen to be narrow-minded and judgmental and intolerant of any other lifestyles, cultures or religions (Neilson, 2002).

Massey ISSP (1998) also identified a strong negative perception of religion and strong religious intolerance associated with the negative aspects of religion’s historical and global contribution to society. In response to the statement “looking around the world religions bring more conflict than peace” (ISSP, 1998), 71% agreed and 14% disagreed. Furthermore when asked to agree or disagree with the statement “people with very strong religious beliefs are too often intolerant of others” (ISSP, 1998), 78% agreed strongly agreed whilst 10% disagreed strongly disagreed.

Historically, an anti institutional stance towards religious believing has been evident within the Pakeha\textsuperscript{15} population of Aotearoa New Zealand from early periods. When referring to the early settlers in Aotearoa New Zealand Graham cited in Davidson (1997) states:

> Urban working class settlers and the church as an institution grew further apart. These Trends, which reflected developments occurring in the churches at home, were brought to Aotearoa New Zealand by both lay and clerical immigrants (Davidson, 1997: 51.)

In Britain, Christianity was largely associated with the cultural elite and ruling classes. The significant labouring class produced by the industrial revolution and urban expansion resulted in a large percentage of unchurched working class people (Davidson, 1997). This unchurched status also extended into families associated with agriculture in rural Britain. Both the working class and agricultural groups largely rejected the institutional church, which was perceived as being the domain of the privileged and ruling classes. According to Jackson (1987) at least half of the immigrants to Aotearoa New Zealand were from labouring families and unlikely to respond to the church.

\textsuperscript{15} Pakeha is the term used to refer to the people of European descent in Aotearoa/New Zealand.
From early in our colonial past settlers shared a sentiment of suspicion and negativity towards the institutional church, especially within the Pakeha immigrant population. This continued to develop in Aotearoa New Zealand as the institutional church faced the continued separation of the church from the public sphere and the increasing challenge of secularism. Unlike the United States where immigrants sought to establish their religion, immigrants in Aotearoa New Zealand were seeking to escape theirs.

An early relegation of the church to the private sphere and a clear separation of church and state can be seen in the introduction of the secular clause in the Aotearoa New Zealand Education Act (1877) and continues in a modified form in the 1964 Education Amendment Act section 77 which, according to Davidson (1987), shows that for many in Aotearoa New Zealand, in and prior to 1877, religion had no place in public philosophy. This clause states that teaching should be entirely of a secular character (Education Amendment Act, 1964: section 77).

Ward (2000) believes this anti-institutional sentiment has become particularly entrenched since the 1960s and 1970s when many young people developed a sense of alienation from dominant public institutions. According to Ward many during this period in Aotearoa New Zealand developed a highly cynical view of institutions.

Ward (2000) notes:

It is not then that the post-war generations have been less interested in the religious dimension of life, but their distrust of institutions means that increasing numbers of them believe that religious organisations are more likely to hinder than help them in their search for a satisfying spirituality (Ward, 2000:11).

Nowhere is this anti-institutional view of religion more evident than in the attention given to religious issues by the media. According to Bluck (1998), only 1.09% to 1.85% of the total media coverage in Aotearoa New Zealand paid attention to religious matters in 1988. Yet Bluck (1998) believed that attention to Kiwi spirituality exclusive of religious references is the single strongest theme of all media coverage! Bluck (1998) observed:

So long as religion isn’t mentioned explicitly, churches don’t appear and clergy are portrayed as clowns, spiritual issues can be freely discussed. So soap operas explore the meaning of life, current affairs weigh issues of life and death, drama series map the human heart, and the news hour tells us what it means to be human.
now. And our media gatekeepers see nothing contradictory about any of this. Spirituality is acceptable. Religion is not. (Bluck, 1998: 19).

Bluck (1998) goes on to note that when the media does include content about religious traditions and communities of faith they are constantly portrayed by distorted views from a negative perspective. The positive contributions such as the stories of Aotearoa New Zealanders working for restorative justice or the religious contribution to social services in Aotearoa New Zealand more often than not are forgotten.

The rise of spirituality in Aotearoa New Zealand

Institutional forms of religious expression appear to be in decline in Aotearoa New Zealand as a result of an anti-institutional sentiment towards organised religion. Consequently, people have been reconstructing their belief systems under the concept of spirituality. This is reflected in the search by New Zealanders for expressions of spirituality outside of institutional norms. Ward (2003) and others acknowledge that interest in spirituality is growing within the Aotearoa New Zealand population as it internationally (Benland, 1988; Ward, 2003; Bluck, 1998; Hawker, 2002; Morris, Ricketts and Grimshaw, 2002, 2004).

Morris et al (2002) believes that this interest in spirituality has been evident for a long time in Aotearoa New Zealand, where an ever growing hunger for spirituality outside of the traditional sources in institutional form has continued to develop. Morris et al (2002) observes that:

Aotearoa New Zealanders have long had a tradition of the spirituality of the unchurched. The Dalai Lama spoke to huge audiences here. These were not just Buddhists or fellow-dharma travellers but Aotearoa New Zealanders who reported that they desired to be in the presence of a spiritually developed being, or of wanting this for their children. Aotearoa New Zealanders have taken to the New Age in a big way and their spiritual needs support a hugely disproportionate array of goods, services, workshops, trainings, and journals. The most successful business and motivation seminars here are those which are more explicitly spiritual in discourse and orientation (Morris et al, 2002: 186).

Participants of Nielson’s (2002) survey also reflected a desire to have a spiritual component to their lives, and openness to spirituality. A central belief amongst respondents was that “there
is more to life than just existing”, “a greater purpose meaning of some sort” and a belief that “one does not become ‘nothing’ on your death”. Massey ISSP (1998) survey also found that a large percentage of respondents also reported a belief in life beyond death. In response 37% definitely believed in life after death, 26% indicated yes probably, and 21% no probably not and 17% definitely did not believe in life after death.

The developing hunger for spirituality in Aotearoa New Zealand is in line with international trends identified by Roof (1993), Bellah, Madsen, Sullivan, Swindler and Tipton (1995). These authors have pointed out that this reflects the growing search for meaning by a generation that is not contained by denominational and religious boundaries. This exhibits a level of creativity and recreation of their personal systems of meaning. It is this trend that led Robert Fuller (2001) to identify the concepts of ‘unchurched religion’ or ‘spiritual but not religious’ (Fuller, 2001). Ward (2004) believes that people are increasingly concerned to nurture the spiritual dimension of life, find answers to the meaning of life, and prepare for whatever happens at the end of physical life; organised religion in the form of the institutional church is seen to be irrelevant, whilst growing numbers are “believing without belonging”.

Participants of Neilson’s (2002) survey however, did acknowledge that at times the church could have a part to play in facilitating spiritual matters, particularly during times of grief and loss associated with death.

**Spirituality and religion within social work in Aotearoa New Zealand.**

In the previous sections a number of aspects that have implications for social work practice in Aotearoa New Zealand in relation to integrating religion and, or, spirituality within social work were explored. These provide some of the contextual background and influences that have implications for integration. This has focused particularly on the possible importance of religion and or spirituality for people in New Zealand, the separation of church and state, secularism, the rise of spirituality and an anti-institutional sentiment that exists towards organised religion In the following section four further areas involving spirituality and
religion that have implications for social work practice in Aotearoa New Zealand will be discussed.

- The first area acknowledges the religious involvement in social service provision in Aotearoa New Zealand.
- The second area begins to explore the implications of social workers' own affiliation to, or, frames of reference informed by spiritual and religious beliefs.
- The third area considers the cultural implications of spirituality and religion and how the profession in Aotearoa New Zealand has had to respond to challenges to include spirituality as part of its commitment to the Treaty of Waitangi (1840).
- The fourth area is concerned with the integration of spirituality within social work education in Aotearoa New Zealand.

Despite processes of secularisation, anti-institutional sentiments towards religion, and the separation between the church and state already discussed, religion has and continues to play a sizeable role in the provision of social services in Aotearoa New Zealand.

Lineham and Davidson (1997) observed that the church has contributed to a significant amount of charitable work in Aotearoa New Zealand that has continued to provide a link between religion and the state. At present, in Aotearoa New Zealand, Christian social services numbers around 500 social service delivery sites throughout Aotearoa New Zealand. Overall, these agencies are networked via the Aotearoa New Zealand Council of Christian Social Services and include members from the Anglican, Baptist, Presbyterian, and Roman Catholic churches whilst the Salvation Army, also a significant provider of social services, coordinates its work mainly with government departments (Lineham and Davidson, 1997; NSCCSS, 2006)

Lineham and Davidson (1997) note that in Aotearoa New Zealand prior to the 1930s the church's role in welfare provision focused chiefly on individual moral concerns. In areas such as the Christian temperance movement during 1890 to 1918 the church was concerned with combating the moral ills of alcohol use. Lineham and Davidson (1997) observations about the church's charitable focus acknowledged that: "Churches have been more comfortable dealing
with issues of morality rather than questions relating to the economic structure of society. Similarly churches have contributed more to social work than social action”.

By the 1960s however, churches were thrust into the arena of politics becoming increasingly involved with social justice issues. From this period churches became involved in social action concerned with social problems related to apartheid, race relations, unemployment, and social security (Lineham and Davidson, 1997). However by the seventies, and eighties, feelings had developed within churches that they should stay out of the affairs of politics, and that religion should be seen as a private matter (Lineham and Davidson, 1997). Within churches themselves two main ideologies have been expressed about their involvement in social and charitable work. Firstly, some churches remained focused on social reform through individual moral renewal. Secondly, others were motivated to be involved in social action at a macro social justice level. This parallels the historical tensions within the early development of social work discussed in chapter two.

By 2006 there was a strong and coordinated movement within the Christian social services to be politically active at a state level. The New Zealand Council of Christian Social Services mission reflects this commitment to social action and social justice in its mission statement:

The key roles of NSCCSS are to represent the common interests and vision of our members at the national level; to supply information and networking opportunities to support members provide quality services; and to develop, critique and advocate for policies that will assist poor, vulnerable and disadvantaged members of society (NSCCSS, 2006:3, emphasis added).

Recent activities by the council have included:

- Work in the area of Children and their families – which has included writing briefing papers for Christian social service providers to help them manage and be fully aware of the changes being introduced by government in relation to children at risk (NSCCSS, 2006).

- Work with housing and poverty— including the Poverty Indicator Project which researched clients coming to food banks as the basis for developing a strategy to reduce the need for food banks (NSCCSS, 2006).

- Working for services for older people – including campaigning for improved funding in both residential and home-based care for older Aotearoa New Zealanders in order to protect people needing these services (NSCCSS, 2006).
The attention paid to religious involvement in social service provision in Aotearoa New Zealand has been limited. As with the general sociological trend that has largely ignored the role religion plays in Aotearoa New Zealand so too there has been limited focus on the role of religion in social work research and literature. The amount of available data nationally about the role religion and spirituality play within the general population is much more extensive than the equivalent data for social work.

The Aotearoa New Zealand census statistics (2001 and 2006) do provide some data about the religious affiliations of social workers, case workers and probation workers. But there are limitations to the use of data, which according to Harrington and Crothers (2005) involves:

- The census relies on self-reporting which allows individuals the ability to claim the title of social worker although they are not employed in the capacity, qualified or a member of the Aotearoa New Zealand Association of Social Workers.
- Harrington and Crothers (2005) therefore suggest there is reason to believe the data overstates social work as an occupational category.

Also the data give no indication of the level of religiosity of social workers and may only represent identification with particular traditions.

Despite these limitations I am able to extrapolate an indication of religious affiliations of social workers, probation workers and case workers by cross tabulating those who have reported themselves to belong to each of these categories and their respective religious affiliations from the 2006 census statistics. Surprisingly, the data suggests that a significant percentage within each employment category of social worker report an affiliation to religion.

According to the 2006 census statistics for the social worker occupational category, 68% identify a religious affiliation, 23% no affiliation and 9% objected to answering. In the probation worker occupational category, 62% identified a religious association, 29% no affiliation and 9% objected to answering. Finally, for the case worker occupational category, 68% identified a religious affiliation, 26% no religion and 6% objected to answering.
Comparative to the general population statistics of religious affiliations, social workers’ and case workers’ religious affiliations are slightly higher at 68% as opposed to 64%, probation workers are slightly lower at 62%, and as with the general population a diverse range of religious affiliations are present amongst social workers, probation workers and case workers.

For the social work employment category the main religious affiliations are 15.4% Anglican, 14.8% Catholic, 10.4% Presbyterian, 7.5% Christian no fixed denomination, 3.4% Methodist, 2.5% Ratana, 2.3% Baptist, 2.3% Latter Day Saints, 1.9% Pentecostal, .9% Salvation Army, whilst 8.9% object to answering. This shows an affiliation that is predominantly Christian in orientation.

Likewise, those who identified themselves as probation workers also reported a diverse range of affiliations; 17% Anglican, 15.4% Catholic, 9.2% Presbyterian 4.6% Christian no fixed denomination, 4.1% Methodist, 2% Latter Day Saints, whilst 8.7% object to answering.

For the case workers employment category 18.2% Catholic, 17.4% Anglican, 12% Presbyterian, 4.8% Christian no fixed denomination, 3.4% Methodist, 2.5% Latter day saints, 1.9% Ratana whilst 6.1% object to answering.

The data indicate that for a large percentage of those who report their profession to be in the field of social work, case work and probation work, religion is an aspect that they may bring to their work. There are limitations and a level of uncertainty as to the extent of religiosity involved with these affiliations and what implications this has for social work in Aotearoa New Zealand. Further research and analysis is required to ascertain this. Despite the lack of research, an acknowledgement of and integration of spirituality within social work practice in Aotearoa New Zealand is evident at the level of professional standards and educational inclusion.

The national association of social workers in Aotearoa New Zealand reflects this in their ethical standards which state codes for ethical practice that require an acknowledgement of religion when working with clients for the purpose of conveying respect, worth and dignity within the therapeutic encounter. The code states:

Social workers respect the worth and dignity of each person and group, and acknowledge their age, beliefs, culture, gender, marital status, family status,
intellectual, psychological and physical abilities, race, religion, sexual orientation, and social and economic status (ANZASW Board of Competency, 1997). 

What are some of the cultural implications of spirituality for Aotearoa New Zealand social work?

Social workers in Aotearoa New Zealand also have a specific obligation to undertake culturally competent practice as a requirement of their commitments to the 1840 Treaty of Waitangi. The Aotearoa New Zealand association of social workers reflects this obligation in their bi-cultural codes of practice (ANZASW Board of Competency, 1997). Because of this commitment social work in Aotearoa New Zealand pays attention to the importance of spirituality for Tangata Whenua and other ethnic groups such as the Tagata Pasifika. For these communities, spirituality has always had a central focus and is an integral part of life, perspective and understanding (Jenkins, 1988; Tui Atua Tupua Taisi Efi, 2003; Muliato-Lauta, 2000; Marsden, 1992; Barlow, 1996; Alpers, 1964).

Recognising the importance of spirituality for the Māori people in Aotearoa New Zealand outside of Māoridom however, has not been the case. From an early period the Aotearoa New Zealand government curtailed the legitimating of Māori spiritual practices. In 1908 legislation was passed to suppress the activities of Tohunga within Māori society after being introduced in 1907, by imposing penalties upon tohunga who continued to practice.

Section 2 of this legislation states:

Every person who gathers Māoris around him by practicing on their superstition or credulity, or who misleads or attempts to mislead any Māori by professing or pretending to possess supernatural powers in the treatment or cure of any disease, or in the foretelling of future events, or otherwise ... is liable (Tohunga Suppression Act, 1908: section 2).

This prohibition was particularly aimed at stopping the tohunga ahurewa, an expert in Māori spirituality. The initiative to introduce this legislation was propelled by Sir Maui Pomare.
Aotearoa New Zealand’s first Māori doctor. Pomare was concerned by the work of charlatan tohungas who were costing the lives of Māori people; Pomare was troubled by the use of spiritual practices in place of western medical interventions which he knew were necessary. Pomare stated:

It was with a heart full of fear and trembling that my mission was undertaken. Fear and trembling did I say? Yes, for the deeply rooted superstition of ages - the strongholds of tohungaism, the binding law of tapu, the habits and practices of centuries, the mistrust of the Pakeha - these were the Goliaths in the way of sanitary progress among the Māori (Pukeariki, 2006:1).

No doubt Pomare was influenced by early western and American thinking given his extensive medical training in the United States at a time when the debates between empirical scientific views and antireligious sentiments were raging, particularly medical sciences rejection of religious and metaphysical spiritual frameworks. In his biography Pomare is described as a man of two worlds, the world of western medicine and the world of Māori (Cody, 1953). The tohunga suppression act remained in legislation until its repeal in 1962. The New Zealand government’s prohibition of metaphysical spiritual frameworks determined further legislation in the form of the Quackery Prevention Act 1908 which prohibited any form of witchcraft, fortune telling and the like (Quackery Prevention Act, 1908).

The relegation of Māori spirituality to superstition by the state and secular Pakeha society remained a dominant position in Aotearoa New Zealand until the 1980s. During the 1980s Aotearoa New Zealand experienced a revitalisation of Māori culture propelled by significant challenges from Tangata Whenua and a reassertion of the role of the Treaty of Waitangi. These challenges were recognised in 1988 in the area of social policy in Aotearoa New Zealand. A Royal commission was established to look at the state of Aotearoa New Zealand’s social policy and receive recommendations for its future development. At this time the commission observed that:

Tangata whenua are aware of a distinct cultural inheritance and of the extent to which it has been damaged and remains under threat. They assert with increasing vehemence the right of that tradition to recognition, respect and status. Of recent years, this assertiveness has gone beyond a simple demand for the redress of grievances to a demand for a separate institutional identity and for ethnic self determination (Oliver, 1988:42).

During this commission the spiritual needs of Tangata Whenua were brought to the attention of the commission when it received submissions that challenged the need to incorporate
concepts of spirituality within Aotearoa New Zealand social policy. Two key submissions were presented that discussed this incorporation.

The first submission was entitled ‘Te hono ki te Wairua’. The Spiritual Link: A Māori Perspective on the Spiritual Dimension of Social Wellbeing (Jenkins 1988). This article highlighted the centrality and significance of Wairua Tanga (the spiritual dimension of life) for Tangata Whenua. Jenkins (1988) stressed the centrality of Wairua Tanga to the understanding and way of life for Tangata Whenua. Jenkins (1988) acknowledged that this article may not represent the entire spectrum of views held by Tangata Whenua and that sensitivity needed to be employed when discussing this sacred area of life, a concern echoed by Nash (2002).

For Tangata Whenua and other groups the knowledge associated with spirituality, and spiritual practices such as deliverance, interpreting dreams and dream dancing, and the transmission of this knowledge, is undertaken by experts including, shaman, tohunga, medicine men and priests from within the communities which own the knowledge. Knowledge itself is considered to be sacred in that it is connected to the spiritual dimension and gifted from God, Gods, or divine ancestors and faithfully transmitted down the generations by the appointed representatives of this knowledge (Barlow, 1996).

Because of the centrality of wairua tanga for tangata whenua Jenkins (1988) challenged the need for wairua tanga to be integrated into the social services and decision making processes at a policy level. Jenkins (1988) offered a number of suggestions about how this could occur and provides some possible definitions of spirituality from a Tangata Whenua perspective:

It was a principle of divine sanction. Divine sanction was the ultimate authority (Jenkins, 1988:492).

Journey into supernatural domains in search of divine care and nurture of humanity (Jenkins, 1988:492).

The spiritual dimension is also that intangible quality that links the generations, that prevails over the impossible situations, that gives the inner strength a person needs to handle those difficult encounters; it is the awareness of a higher power than the temporal forces that control us (Jenkins, 1988:492).
The second submission was provided by Benland (1988) and is entitled ‘The S-Factor: Taha Wairua. The Dimension of the Human Spirit’ (Benland, 1988). Benland argued for the need to include spiritual considerations at a policy level and challenged the normative understandings and approaches of social scientists and policy makers towards this topic. Benland argued that these normative understandings and approaches had traditionally been based on empirical enquiry and research that had resulted in the absence of and negativity towards the integration of spirituality. Benland (1988) saw this as a result of spirituality’s intangible nature and failure to be quantified through empirical means. Benland (1988) argued against empirical biases and highlighted the importance of the spiritual dimension of life for people and acknowledged that human understanding and experience showed that there was something else that could not be empirically observed.

From this perspective Benland (1988) stressed the importance of the spiritual dimension of life and its need to be included and integrated into social policy. Benland (1988) disputed the normative understandings of social scientists and their failure to recognise spirituality as a legitimate domain based upon two main points:

- History shows that the spiritual dimension has played an important role and function across cultures and time as an integral part of engaging with reality.
- There are a number of questions central to understanding one’s life, meaning and purpose that cannot be answered without incorporating a spiritual dimension.

Within this debate however Benland (1988) showed her negativity towards the concept of organised religion and sought to evade understandings already present. This was justified by aligning religious understandings with the narrow understandings of social scientists and viewing religion only as a source of conflict.

Wendel (2003), Cornett (1992), and Praglin (2004) suggest that taking a religious conflict approach is dangerous, which according to Walsh (1999) includes a concern that writers in this field tend to prefer the concept of spirituality exclusive of religious understandings, and when religion does enter the dialogue the terminology is polarised and spirituality is equated positively and religion negatively.
The outcome of these positions is to construct definitions that seek to lose the controversies and contexts of religion. However, in seeking to avoid the implications of religion and organised understandings of religion, we are also avoiding the voices of those who belong to various religious communities, voices in which our Aotearoa New Zealand context represents Tangata Whenua, Tangata Pacifica, Hindu, Moslem, Christian, Buddhist and Jewish adherents (Department of Statistics, 2001, 2006). This avoidance of religious contexts becomes more problematic when we analyse the religious affiliations of Māori in Aotearoa New Zealand (table 2).

Table 2 Religious Affiliations for the Māori Ethnic Group Census Usually Resident Population Count 2006 sourced from Statistics New Zealand (2008).

<table>
<thead>
<tr>
<th>Religious affiliation (total responses)</th>
<th>Māori</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian</td>
<td>72,810</td>
</tr>
<tr>
<td>Anglican</td>
<td>69,576</td>
</tr>
<tr>
<td>Catholic</td>
<td>21,000</td>
</tr>
<tr>
<td>Presbyterian, Congregational and Reformed</td>
<td>25,809</td>
</tr>
<tr>
<td>Methodist</td>
<td>15,723</td>
</tr>
<tr>
<td>Pentecostal</td>
<td>13,679</td>
</tr>
<tr>
<td>Baptist</td>
<td>3,117</td>
</tr>
<tr>
<td>Latter-day Saints</td>
<td>21,750</td>
</tr>
<tr>
<td>Other Christian</td>
<td>12,060</td>
</tr>
<tr>
<td><strong>Total People, Christian</strong></td>
<td>245,052</td>
</tr>
<tr>
<td>Māori Christian</td>
<td>58,779</td>
</tr>
</tbody>
</table>

Other Religions

<table>
<thead>
<tr>
<th>Religious affiliation</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buddhist</td>
<td>1,836</td>
</tr>
<tr>
<td>Hindu</td>
<td>816</td>
</tr>
<tr>
<td>Islam/Muslim</td>
<td>1,074</td>
</tr>
<tr>
<td>Judaism/Jewish</td>
<td>375</td>
</tr>
<tr>
<td>Spiritualism and New Age Religions</td>
<td>2,946</td>
</tr>
<tr>
<td>Other Religions</td>
<td>4,431</td>
</tr>
<tr>
<td><strong>Total other religions</strong></td>
<td>11,478</td>
</tr>
</tbody>
</table>

No Religion object to Answering

<table>
<thead>
<tr>
<th>Religious affiliation</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Religion</td>
<td>193,683</td>
</tr>
<tr>
<td>Object to Answering</td>
<td>45,519</td>
</tr>
<tr>
<td><strong>Total People Stated</strong></td>
<td>530,622</td>
</tr>
<tr>
<td>Total People, Not Elsewhere Included</td>
<td>36,312</td>
</tr>
<tr>
<td><strong>Total People</strong></td>
<td>565,329</td>
</tr>
</tbody>
</table>

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Interestingly, the 2006 census statistics shown above indicate that the main religious affiliation for the Māori ethnic group population is Māori Christianity and Christianity in varying denominational forms. In the recently released Statistics New Zealand Quick Stats about Culture and identity (2007) it notes that 11.1% of Māori identify with a Māori Christian religion such as Ringatu or Ratana religions. Yet, at a state and social work practice level in Aotearoa New Zealand an acknowledgement and incorporation of Māori spirituality is presented detached from any Christian or other religious affiliation. Adhar (2004) outlines the problematic nature of this stating:

Bolstered by the principals somewhat mystically discerned in the Treaty successive governments have accorded official status to traditional Māori spirituality. Yet liberal ideals of religious equality and neutrality are surely undermined by this process. Māori spiritual beliefs and interests have become the first amongst equals. The explicit acknowledgement and adoption of Christian, Muslim or Buddhist beliefs and rituals would be unthinkable today, but Māori spirituality receives carte blanche under the guise of honouring the indigenous people. This is all the more puzzling since only a tiny fraction of Māori actually ascribe to traditional Māori religion as such- although many Māori Christians have accommodated a traditional Māori worldview and cosmology within their Christianity (Adhar, 2004:31).

More attention needs to be given to this dynamic and the implications for social work in Aotearoa New Zealand, especially of failing to recognise the interaction between Māori and Christianity, and how this influences and affects practice integration.

In Aotearoa New Zealand, holistic models have been developed that incorporate spirituality20, particularly within the field of health care such as: Te Whēke (Pere, 1984 acknowledged in Durie, 1994), Nga Pou Mana Health Model (Royal Commision on Social Policy, 1988), Powhiri-Poutama (developed by Paraire Huata of Te Ngaru Learning Systems), Niho Taniwha (Māori tertiary education reference group, 2003), Ngakau Māori and Te Whare Tapa Wha (Durie, 1994). Te Whare Tapa Wha model (Figure 7) is the most widely adopted of these models being utilised within social work practice.

Durie (1994) offered a significant contribution in this regard, particularly with the development of Hauora within the Te Whare Tapa Wha model. This model was developed from a Hui of Māori health workers in 1982 (RochFord, 2004). As a concept of holistic health care Hauora recognises that the wellbeing of people is dependent upon a balanced and

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20 See also check Te Whēke, Powhiri-Poutama, Niho Taniwha and Ngakau Māori.
integrated inclusion of all the elements identified pertaining to personal wellbeing. *Hauora* itself is a Māori philosophical concept of health developed and unique to Aotearoa New Zealand. The Te Whare Tapa Wha model is depicted by the image of a *whare* (Traditional Māori four-sided house). Varying parts of the structure represent differing aspects of people’s being. It comprises of elements related to aspects of the human person and draws significantly on Māori metaphorical understandings (see Figure 7).

The Te Whare Tapa Wha model takes a wide view of health that incorporates a holistic view; holism is achieved by acknowledging that people’s health is dependent upon a balanced functioning of their physical, social, spiritual and emotional dimensions of being. Each of these four dimensions influences and supports the others. The structure requires the interdependence of each dimension whilst recognising that each dimension has to be strong, balanced and interconnected to ensure the health and wellbeing of the person.

Each of these four dimensions is outlined as follows:

- **Taha whanau - Social well-being**

*Taha whanau* represents the social wellbeing of the person. This element is concerned with the social world of the person, how they relate with others. How the individual interacts with family, friends and other interpersonal relationships. Within social work assessment it explores the person’s sense of belonging, identity, compassion, caring and the level of social networks available (Durie, 1994).

- **Taha tinana - Physical well-being**

*Taha tinana* This element involves the physical health of the individual, including growth, development, and the ability to move, and ways of caring for ourselves and could be extended to include a macro assessment of the resources required to sustain physical health (Durie, 1994).

- **Taha hinengaro - Mental and emotional well-being**
Taha hinengaro. This element is concerned with the cognitive and emotional functioning of well-being and explores the ability of the individuals thinking processes, how they acknowledge and express their thoughts and feelings and how they respond constructively (Durie, 1994).

• Taha wairua - Spiritual well-being

Taha Wairua. This element includes the values and beliefs that determine the way people live, the search for meaning and purpose in life, and personal identity and self-awareness (for some individuals and communities, spiritual well-being is linked to a particular religion; for others, it is not) (Durie, 1994).

Durie’s whare tapa wha model compares hauora to the four walls of a whare, each wall representing a different dimension: taha wairua (the spiritual side); taha hinengaro (thoughts and feelings); taha tinana (the physical side); and taha whanau (family). All four dimensions are necessary for strength and symmetry. (Adapted from Durie’s Whaiora: Māori Health Development. Auckland: Oxford University Press, 1994, page 70).

It is important that the above model is acknowledged. Milner (2006) recognises that New Zealand’s Indigenous Māori are enriching the field of social work’s professional knowledge.
with the spiritual and the sacred, an enrichment that could be extended to enrich social work at an international level. The western world is coming to grips with the rise in spirituality and growing relevance and importance within social work in response social work scholars, educators and practitioners alike are seeking to define spirituality, develop practice approaches and formulate an understanding of this concept. It is important to recognise that definitions and understandings already exist, as do practice approaches that pay attention to what is central to the understanding and decision making processes of Tangata Whenua, religious traditions and other indigenous and aboriginal concepts (Ruwhiu and Ruwhiu, 2005; Beatch and Stewart, 2002; Hodge, 2004; Stewart and Wheeler, 2002; Yellow Horse Brave Heart, 2001).

As such we can compare the content of these understandings with those being developed at international levels which tend to be broader, and inclusive of diversity but exclusive of religious and indigenous understandings (Praglin, 2004; Wendel, 2003; Cnaan, Weinberg and Boddie, 1999; Cornett, 1992). Durie (1994) took a broad approach within the Te Whare Tapa Wha model in his depiction of spirituality. Durie (1994) acknowledged that spirituality can be hard to define and is often equated with institutional religion. Durie's (1994) concept, as with predominant international developments, could include religious affiliations, but was used in a broader sense.

Within Māori understandings and conceptualisations of spirituality a number of factors stand out from western developments as an integral part of their understandings of spirituality: Firstly, this includes understandings that spirituality has a communal component albeit with people, the past, present, future and the environment. This communal aspect sits in tension with the propensity within western understandings to reduce the term and definitions to individualistic frameworks (Roof, 1993), rather than terminology that speaks of communal understandings of belonging, identity, hope, responsibility, relationship, interdependence and interconnectedness (Royce-Davis, 2000). Understandings of what spirituality means in western constructs is seen to be highly individualistic, thus definitions are as broad as possible to allow for this. This individualisation of definitions is particularly evident in discussions within the health care profession; indeed Wasner, Longaker, Fegg and Borasio (2005) identify spirituality as appearing to be an individualised construct within multicultural and multifaith contexts. This individualising of spirituality is contradictory given that a number of authors
identify that a central aspect of spirituality involves the need to feel a genuine connection to others (Canda and Furman, 1999; Royce-Davis, 2000).

Secondly, Rochford (2004) observes that for tangata whenua the material world is imbued with a spiritual component. This spiritual component is reflected in the material world; in the material world everything has a life-force (māuri) and is interconnected (Barlow, 1996). The Spiritual realm is tuakana (elder sibling\(^{21}\)) to the human world (Ruwhiu and Ruwhiu, 2005). Rochford (2004) notes that problems in the physical world reflect disturbances in the spiritual world as each are interconnected. This understanding expresses that there are consequences and implications of negating or breaching spiritual concepts. Central to this is an acknowledgement that human action impacts upon and can be influenced, by an esoteric, metaphysical realm. Ruwhiu and Ruwhiu (2005) highlight this interconnectedness between the human and metaphysical realm stating “(t)hroughout all procedural forms of interactions between humanity there is intercession and dialogue between the living and the dead, the physical natural and spiritual dimensions” (Ruwhiu and Ruwhiu, 2005:10)

Ruwhiu and Ruwhiu (2005) observe that spirituality for Māori, historically, is instrumental in establishing the protocol of interrelationships between the empirical and super empirical. Non-recognition of the link to the metaphysical is also perceived as having consequences in the human realm.

A Māori perspective is a unique cultural and spiritual perspective. This highlights the centrality of a metaphysical dimension, from a Tangata Whenua perspective which includes practices and intervention strategies such as, understanding and interpreting dreams, seeing demons and discerning spirits (Ruwhiu and Ruwhiu, 2005). Not surprisingly, western considerations about the metaphysical understandings of spirituality are limited. Formulating this type of articulation and explanation provides one of the major criticisms of empirical scientific enquiry and traditional research, which results in the negation or uneasiness about this subject, as it resides in the subjective and qualitative realm. Research in this area therefore is drawn into the debates surrounding methodology and validity at an academic level (Gibbs, 2001; Denzin and Lincoln, 1998).

Thirdly, Durie (1994) included in his description of taha wairua: “the experience of mutually rewarding encounters between people, a sense of communion with the environment, access to heritage and cultural integrity” (Whai Ora, 1997: emphasis added). Within a Māori worldview, tangata whenua have a close and intimate relationship to the environment and the environment is reflective of the underlying spiritual dimension.

Zapf (2003) observes that connections between the land and people, disappears from most western discussions of spirituality in the literature. Zapf (2003) believes this limits notions of spirituality to a quality of the individual. Specific descriptions of spirituality in the literature have largely ignored concepts of spirituality connected to the physical environment. Similarly, Wendel (2003) recognises the failure of western constructions of spirituality to include concepts of connection between people and the land.

Bluck (1998) and Morris, Ricketts and Grimshaw (2002; 2004), all recognise the importance of place as a spiritual category in Aotearoa New Zealand, particularly for tangata whenua but also for Pakeha. Bluck (1998) noted: “place has always been a spiritual category for Pakeha people” (Bluck, 1998: 95). Holst (1997) recognised the centrality of the environment and its connection for Aboriginal people’s stating: “spiritual landscape exists within the physical landscape” (Holst, 1997: 150). Schiele (1994) recognised that indigenous worldviews conflict with western understandings about the importance of the environment and its spiritual connection. Western understandings promote control, fragmentation and division as opposed to indigenous understandings that reconcile matter and spirit.

From our Treaty based context I would suggest that any definition adopted in Aotearoa New Zealand should be constructed from a participatory approach, in partnership with varying communities that allows dialogue with the multiple voices and understandings on this topic in this country. Jenkins (1988) reflected this concern suggesting that integration of spirituality requires a participatory approach in policy development and practice. This may result in the need to tolerate and be comfortable with multiple definitions and understandings about spirituality appropriate to their communities of origin, rather than reduce the concept of spirituality to one all encompassing universal theory and definition. Definitions and discussions in our context will need to incorporate communal understandings, metaphysical considerations, interconnectedness and the importance of the land as a spiritual category.
Taking an etic approach to this topic and constructing universal definitions may well create tensions if we are to consider part of our obligation as professional social workers is to be inclusive, and being inclusive would suggest that our understandings need to be drawn from an approach that allows for participation and space for diversity, not only at a practice and policy level as suggested by Jenkins, but as part of the academic exploration also. Such a partnership is proposed by Cnaan et al (1999); Wendel (2003); Cornett (1992); Praglin (2004), and an incorporation of multiple voices and perspectives across cultures and traditions is also partly utilised by Canda and Furman (1999); more so by Nash and Stewart (2002); and significantly by Van Hook et al (2001) and Hodge (2004). This move to integrate multiple voices and the challenge to allow an interdisciplinary conversation however, does not represent the mainstream approach to this subject but only one facet of its integration and exploration.

**Spirituality in Social Work Education in Aotearoa New Zealand**

Such an approach to including spirituality in social work is likely to be difficult given the diversity of spiritual and religious belief systems in Aotearoa New Zealand, and the amount of knowledge involved. Payne observed that: “Constructivist and social construction views argue that no one view of reality can comprehensively cover what a worker needs to know” (Payne, 1997:31). Social work practitioners working in the area of spiritual and, or, religious assessment and interventions cannot be expected to have an in-depth understanding of such a diverse and extensive field of knowledge. They do however; need to be aware of some of the central tenets of their client’s belief systems and the implications of these for working with them. As early as 1961 suggestions were being provided about how to appropriately include religious and spiritual concerns in the social work curriculum. Spencer (1961) offered a number of propositions for social work education in this area that included:

- Human beings almost universally have spiritual needs and aspirations.
- Social workers need to know and understand and appreciate these needs and aspirations.
- Religious beliefs and practices may play a central role in individual, family and life of the community.
• Social workers should be conversant with the client’s understandings of spiritual and religious practices, beliefs and problems with the same level of professional understanding, knowledge and skills that are used in other areas of professional practice.

• Social workers should be able to assist clients’ to utilise the resources and knowledge available to them from their varying religious perspectives when appropriate to do so.

• Without professional preparation in this area to help clients’ with religious issues, social workers are generally not prepared to undertake professional practice.

Prior to this research little attention was given to facets of the above in Aotearoa New Zealand at an educational level within social work. At present the Massey University social work program and Unitec in Auckland appear to be the only formal educational institutes that provide specific courses on spirituality in their curriculum for practitioners in this area (Nash, 2002). It is possible that some inclusion is also occurring across curriculum as part of cultural competency requirements but this has not been investigated or collated in any way in Aotearoa New Zealand.

At an international level institutions have begun to include matters relating to spiritual and, or, religious assessment as part of curriculum requirements for professional social work programmes. A number of authors have also provided conceptual frameworks for course development. Hugen et al (2001) suggests a framework for understanding the various religious/spiritual perspectives as a minimum criterion for the knowledge that practitioners working in this area should have. This includes an understanding of the history of various traditions, the important events within the life cycle of each tradition and an understanding of the perspective held by particular traditions with regards to health, welfare, the nature of problems, social issues and well being, the spiritual resources, customs, ceremonies and rituals associated with each tradition and the implications of this for social work practice. Derezotes’ (2005) textbook introduces seven paradigms for social workers to address spirituality in practice at a micro through to macro level and spiritual diversity issues are explored.
Similarly, Canda and Furman (1999) suggest a conceptual framework of understanding that explores the origin and contemporary varieties of various traditions, the basic beliefs attributed to each, the basic values and the implications of the above for social work practice. Within these frameworks is the recognition that social workers need to be aware of the tendency towards reductionism. This is likely to occur if a lack of knowledge or negative perceptions are present in this area. This may then lead to the possibility of reverting back to deficit based models, for example viewing the metaphysical aspects of spirituality and or religion as indicative only of personal pathology.

In the social work curriculum in Aotearoa New Zealand there is evidence of inclusion as provided by Nash (2002) in a chapter entitled ‘Spirituality and Social Work in a Culturally Appropriate Curriculum’ in Nash and Stewart’s (2002) ‘Spirituality and Social Care: Contributing to Personal and Community Well-being’ at an undergraduate and postgraduate level at Massey University (Nash, 2002).

Mary Nash offers a chapter on the implications of integrating spirituality into the social work curriculum in Aotearoa New Zealand. Central to this integration is the importance of establishing a culturally appropriate curriculum (Nash, 2002). This is important given our treaty based context and the diversity of belief systems found amongst social work students.

Hodge (2003a) also raises the issue of the challenge to social work with regards to the diverse nature of our societies, and the danger of discrimination and excluding groups in this area. Nash (2002) pays attention to the implications of the Treaty of Waitangi (1840) for the social work curriculum and outlines the ANZASW position and policy commitments to Tangata Whenua.

In the New Zealand context social services have an obligation to honour the central precepts of the 1840 Treaty of Waitangi that include partnership, protection and participation which guarantees the protection of Māori culture and what Māori consider Taonga, and the right to self-determination. Spirituality is Taonga and central to a Māori worldview (Jenkins, 1988; Barlow, 1996; Alpers, 1964). The right to express Māori spiritual, cultural beliefs and practices is upheld further in the fourth article of the 1840 Treaty of Waitangi which also

\[22\] Taonga: precious or valuable item: definition provided by Kiro (2004).
protects varying religions. The article states: “The Governor says the several faiths (beliefs) of England, of the Wesleyans, of Rome, and also the Māori custom shall alike be protected by him” (Project Waitangi, 2005: no pagination).

Discussion is also given to the structure of the integration of spirituality into the Massey social work curriculum. A module has been included in the Bachelor of Social Work program for eight years. This was included to acknowledge the need to explore Māori concepts of spirituality and to provide students with an opportunity to develop critical awareness with regards to their own belief systems, motivation and values against the professional social work standards of the ANZASW (Nash, 2002).

From this inclusion Nash (2002) outlines a number of challenges that have arisen whilst integrating religion and, or, spirituality, which have been touched on prior in this chapter. They include sensitivity to the subject matter that raises the question again, do we have the authority to teach these topics if we don’t belong to, or, have the mandate from the communities that this body of knowledge and beliefs belong to. For the communities of origin the material and knowledge is sacred and is treated with the utmost respect, which has implications for practice that raise the questions whether it is appropriate for social workers outside of the communities to utilise this? Also, if they are able to do so safely will they have the endorsement to do so? These are central questions that need to be explored from the perspective of the relevant communities.

Unitec, in their Master of Social Practice (2005) program, have included course content on spirituality and social practice which is designed to provide social work students with the opportunity to explore the meaning and relevance of spirituality in social practice. This is designed to promote the students ability to explore the social and cultural constitution of spirituality by deconstructing ideas, beliefs and practices in order to enable conversations about spirituality.
New Horizons: Research Directions

It is in the above area of social work education that research into the integration of spirituality within social work has primarily focused. This began with early investigations by Joseph (1988), Sheridan, Bullis, Adcock, Berlin and Miller, (1992), Canda, (1988), Canda and Furman (1999). These studies have taken a variety of methodological approaches to investigating the perception of social workers towards the role of religion and spirituality in social work. In 1988, Joseph surveyed 57 field instructors in a faith based education program in the United States. This study revealed a lack of integration of spiritual and religious issues and a discrepancy between the importance of this area for clients and the instructors (Joseph, 1988). In 1988, Canda undertook interviews with 18 professionals considered to be major scholarly contributors in this field and their ability to integrate spirituality within their work with clients without compromising their own faith perspectives (Canda, 1988). In 1992, Sheridan undertook the first large scale survey of practitioners in Virginia in the United States to explore their attitudes towards religion and spirituality. This study was mainly quantitative but included a number of open ended options for respondents. This study found that social workers were favourable to including religious spiritual content in their work with clients. A large number of respondents in this study identified the need for more training in the social work curriculum (Sheridan et al, 1992).

In 1995, Derezotes and Evans undertook a similar study in Utah and Idaho which again explored the attitudes of practitioners towards religion in practice. This study indicated that a large number of practitioners were integrating religion and spirituality in their work with clients. Once again a strong theme surfaced about the lack of training in this area (Derezotes & Evans, 1995).

In 1999, Canda and Furman undertook the first national survey in the United States. This study explored social workers attitudes towards including religion and spirituality, lists of interventions being used and content in education. This study revealed that social workers had utilised a number of religious and spiritual intervention strategies in their work with clients (Canda and Furman, 1999). A similar study was also undertaken by Mattison, Jayaratne and Croxton in 2000 which also found that social workers employed spiritual and religious practices such as prayer in their work with clients (Mattison, Jayaratne and Croxton, 2000).
Canda and Furman’s 1999 study also revealed that respondents reported they felt the inclusion of religious issues in social work did not conflict with the profession’s ethical codes.

Canda (1988) recognised the importance of cross cultural comparisons in this field and the need to integrate multiple cultural perspectives. As a result Canda and Furman’s (1999) United States national study has also been modified and undertaken in Norway (Furman, Zahl, Benson and Canda, 2007) and the United Kingdom (Furman, Benson, Grimwood and Canda, 2004).

All three of the above studies showed that there is an increasing awareness amongst social workers of the importance of spirituality in their respective contexts, that spirituality is the preferred term of use and that a level of resistance exists towards religion. The above research also confirmed a lack of attention to this subject within the social work curriculum, practice approaches and theoretical developments. Additionally, the Norwegian research identified issues of difference around the separation of church and state.

Research thus far has largely been quantitative in this field (Canda and Furman, 1999; Sheridan, Bullis, Adcock, Berlin, & Miller, 1992; Sheridan, Wilmer, & Atcheson, 1994; Sheridan & Amato-von Hemert, 1999; Furman, Benson, Grimwood, & Canda, 2004; Furman Benson, Zahl & Canda, 2007).

Furman et al (2004) also note that a number of studies and discussions have been undertaken in specific areas of practice, where an integration of religion and spirituality can be beneficial for clients particularly around issues of loss, chaos, and crisis.

These include:

- The treatment of substance abuse and addiction (Furman et al, 2005)
- The treatment of spiritual and religious delusions among the mentally ill (Walsh, 1999 cited in Furman et al, 2004)

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23 At the time of submission (2008) of this thesis Canda and Furman had just completed a second larger national survey in the United States. Canda and Furman are also in the process of completing the second edition of their book ....
The treatment of families in the midst of crises (Garland, 1999 cited in Furman et al, 2005), and the potential problems and complications that arise when religious issues are a part of therapy (Becvar, 1997 cited in Furman et al, 2004)

The exploration of existential questions (Kimble, 2000 cited in Furman et al, 2004)

The management of stress (Furman et al, 2004)


The inclusion of religious beliefs and spiritual practices in illness and recovery (Dossey, 1993 cited in Furman et al, 2004)


The treatment of the poor and minority clients who often bring to therapy the effects of their hurtful history and difficult socioeconomic circumstances (Aponte, 1999 cited in Furman et al, 2004)

The care of the elderly (Erikson, Erikson & Kivnick, 1986; Ramsey & Bliessner, 1999 cited in Furman et al, 2004)

In 2000, Gilbert undertook focus group interviews with 14 social work clinicians highly experienced in group work which found an endorsement for including religion and spirituality in social work, recognised the need for attention to be given to spiritual assessment, practitioner reflexivity in this area (Gilbert, 2000). Gilbert’s (2000) study above represents one significant qualitative study. Furman et al, (2005) recognise the need for more qualitative exploration in this field.

The client’s perspectives have also received small scale attention thus far particularly focused on varying cultural or age related groups such as Washington and Moxley’ (2001) study of the use of prayer in group work with African American women within a chemical dependency recovery program (Washington and Moxley, 2001); Gotterer’s (2001) exploration of spirituality from the client’s perspective in a clinical social work setting (Gotterer, 2001) and Williams’ (2004) study of spirituality and religion in the lives of runaway and homeless youth (Williams, 2004).
Research in this field has also explored social work students perspectives about religion and spirituality, such as Bethel's (2004) evaluative study of students attitudes, values, spiritual wellness and the impact upon students of courses in spirituality integrated into social work curricula (Bethel, 2004) and Kamya's (2000) study of social work students, their level of spiritual wellbeing and the implications for social work education (Kamya, 2000).

Sheridan (2004) points out that studies in this field have provided valuable information about practitioners' views towards the appropriateness of inclusion, level of education required, and practice integration. Sheridan (2004) observes that there has been limited data collected on practitioners' behaviours and more is needed about what social workers actually do in this area with clients. Furman et al (2004), also propose service user led initiatives for exploration of assessment intervention models.

According to Sheridan (2004), integrating spirituality within social work practice is still a contentious issue. However, it is recognised that there is a shift in focus in this from discussions and explorations that are concerned with the question whether content on spirituality and/or religion should be included, to recognition and later step that seeks to explore and posit how integration can occur in an appropriate manner. In this regard Sheridan (2004) is emphatic that research must now turn to discussion that seeks to provide social workers with the appropriate methods and practical tools for integrating this dimension into their work with clients (Sheridan, 2004).

In the past few decades, very little research, teaching or publication dealt with religion, spirituality, and social work in the UK, with the exceptions of Brandon (1976) and Thompson (1992), who challenged conventional social work thinking with insights from existentialism, Taoism, and Zen; specialists writing in the context of ageing, death and dying, and bereavement and loss (see Marris, 1974; Poss, 1981; Marris, 1983; Bhaduri, 1990; Peberdy, 1993; Sermabeikian, 1994; Lloyd, 1997; Parsloe, 1999); and academic inquiries on the influence and effects of secularism within the profession (see Bowpitt, 1985; Cree, 1996; Bowpitt, 1998) and addressing Christian concerns related to social work (Philpot, 1986).

Since the late 1990s, interest in spirituality has increased in UK social work, due to growing religious diversity resulting from the influx of immigrant and refugee groups such as Hindus and Muslims; the occurrence of religiously motivated acts of terrorism (Modood, 2005); the recognition of religion as an important feature of culture within anti-racist practice approaches
(Patel, Naik, & Humphries, 1998); and legislation such as the Children Act 1989 (Crompton, 1998) and the Children Act 2004 (Department for Children, Schools and Families, nod.), which require child welfare services to consider the spiritual needs of the child and birth parents in planning placements.

Moss (2005a) discusses additional legislative imperatives in relation to religion and spirituality, including the Human Rights Act 1998, the United Nations Convention on the Rights of the Child 1989, the Crime and Disorder Act 1998, and the employment equality regulations of 2003, which are in alignment with the EC Equal Treatment Framework Directive. But spirituality is still not generally addressed as a basic aspect of human experience and development (i.e. transpersonal experiences or the quest for meaning) as is happening increasingly in US social work (e.g. Robbins, Chatterjee, & Canda, 2006).

Parsloe (1999) and Henery (2003) have observed that spirituality has achieved a prominent role in healthcare professions, especially nursing, in the UK and abroad, yet social work in the UK has been slow in its response to the religious and spiritual dimensions of holistic care. The first empirical study to address this dilemma was Lloyd’s (1997) 1991 postal survey of chaplains and social workers, which was later compared with the findings from the BASW sample reported by Furman and colleagues (Furman et al., 2004; Holloway, 2007). Evidence from these studies reveals that some UK social workers are sensitive to religion and spirituality in their assessments of and interventions with service users, but:

Nevertheless, social work practice in the UK is marked by confusion, ambivalence and helplessness when it tries to address spiritual and religious need and continues, in the main, to confine its recognition of the significance of religion and spirituality to its relationship with ethnic minority cultures (Holloway, 2007, p. 277).

Moss (2003) surveyed diploma in social work programmes in England to determine the extent to which religion and spirituality was integrated in social work curricula. Among the 30 programmes willing to participate, 26% reported that their syllabi did not cover religious and spiritual issues, although 46% claimed that these subjects were included in cultural diversity coursework, and 36% reported modules dealing with death and dying, and ageing. Three programmes provided workshops on religion and spirituality.
Gilligan (2003) and Gilligan and Furness (2006) also conducted empirical research in 2003 and 2004 on the relationships between religion, spirituality, and practice, amongst students and practitioners. Regardless of religious belief, students generally were less accepting of religious and spiritual interventions than practitioners, although Muslim students and practitioners were more likely to view the interventions as appropriate. Based on their findings, Gilligan and Furness (2006) advocate for culturally competent practice that is sensitive to the religious and spiritual needs of service users.

Conclusion

This chapter has explored the Aotearoa New Zealand social services context and literature relevant to religion and, or, spirituality. Attention has been given to a number of statistical data sources including census data and varying social survey data to construct a picture of the context in which this research is taking place. A number of overall questions have guided this exploration: what place does religion and spirituality have in Aotearoa New Zealand Society? What is the relationship between the church and state in Aotearoa New Zealand? What is happening in Aotearoa New Zealand with regards to processes of secularisation? In turn this has highlighted a number of relevant areas that are considered such as the implications of secularism, anti institutionalism and anti religious sentiments, social work education, Taha Wairua for Tangata Whenua and research developments in this field. This discussion has provided important contextual background for the investigation undertaken in this research.
Chapter 4: Methodology: Mapping the Journey

In this chapter the research design, methodology and methods used in the research, are discussed. A pragmatic paradigmatic approach (Cherryholmes, 1992; Smaling, 1994; Greene and Caracelli, 1997, 2003; Maxcy, 1991, 2003; Onwuegbuzie and Leech, 2005), and a mixed method research design has been employed (Tashakkori and Teddlie, 2003). In adopting a mixed method approach to this research I have been guided by a proposed model for mixed methods research designs, suggested by Onwuegbuzie and Teddlie (2003) and built upon further by Johnson and Onwuegbuzie in 2004 (Johnson and Onwuegbuzie, 2004).

This design suggests an approach to mixed methods research that combines the collection and use of quantitative and qualitative data at different stages of the research process. In my own research the design has involved two stages. Stage one involved the collection of quantitative data using an adapted survey instrument combined with the concurrent collection of participants’ qualitative comments. Then stage two followed with the sequential collection of qualitative data using focus groups. Concurrent designs incorporate quantitative and qualitative approaches and are used to confirm, cross validate, or corroborate findings within a single study; sequential designs combine quantitative and qualitative approaches to elaborate/expand the findings of one method with another (Creswell, 2003).

To clearly distinguish the two stages in this research the acronym NZIRSSOWK (New Zealand Investigation into the Role of Religion and Spirituality in Social Work) is used. The label NZIRSSOWK I is employed when referring to stage one and NZIRSSOWK II when referring to stage two. The rationale and challenges faced whilst undertaking this research are also discussed.

Sandelowski (2003) observes that one of the difficulties of undertaking mixed methods research is being able to present both quantitative and qualitative findings in a way that is accessible to quantitative and qualitative researchers.
Creswell (2002) has noted that within mixed methods research the question often arises, how do you go about evaluating a mixed methods study?, because of the complexity of dealing with both qualitative and quantitative data. Creswell (2002) suggests several criteria of quality for mixed methods research, and these have been adhered to within this investigation, they are:

- The use of multiple forms of data
- A distinct model or design
- Labelling the study as mixed methods
- Including a visual diagram of the design
- Discussing the design in detail.

Research Problem
The first step in the research process for a mixed method research design involves the recognition of a research problem. Creswell (2003) recognises that adopting a mixed method approach involves an appeal to pragmatic knowledge claims, where inquiry is based upon the assumption that collecting diverse data types is the best means to provide an understanding of a research problem. Likewise, Tashakkori and Teddlie (1998) believe that at the heart of pragmatism and mixed method approaches is the concern to use “what works” to most effectively address the research problem and answer research question/s. Additionally, Tashakkori and Teddlie (1998) observe that pragmatists consider research question/s to be more important than either the method used or the worldview underlying the method.

D’Cruz and Jones (2004) apply pragmatism to the specific field of social work research and seek to combine pragmatism (as a technical exercise in answering questions) with ideology (where research is a political approach to social questions). D’ Cruz and Jones (2004) support the concept of ‘opportunism’ (Feyeraband, 1975), which involves ‘the ability to adopt any procedure that fits the occasion’, which according to the authors, positions the research process within reformist politics. This is a position that fits with and includes the ethical and political dimensions essential to social work research, such as attention to social justice, processes of empowerment and anti oppressive values. D’Cruz and Jones (2004) recognise the importance of relating social work’s professional ethics and values to the research process as an ethical and political practice which provides another avenue for social work to achieve change.
Tashakkori and Teddlie (2003) identify an agreement between scholars that states: “Research questions do not emerge in a vacuum. Rather, they emerge or are influenced by the culture of the investigator as well as through political and cultural agendas” (Tashakkori and Teddlie, 2003: 34). Similarly Riessman (1994) noted: “We are not robots who collect pure information, but humans with emotions, social biographies and institutional locations. They shape the problems we choose the ways we go about studying them and the eyes we bring to observation” (Riessman, 1994:135).

Identifying the research problem for this research stems from recognising a lack of knowledge-base in this field, my own experiential journey through social work training, a background in theology and pastoral counselling, through discussions with colleagues, conversations with leading academics and researchers in this field at a national and international level, and engagement with the literature. I also recognised the need to be reflexive about how my own spiritual religious belief systems affected my values and approach to social work and professional development in this area.

In Aotearoa New Zealand, investigations into the role of spirituality and, or, religion within the professional practice of social work have largely not been undertaken in comparison to international interest. Little was known in the Aotearoa New Zealand context about what social workers are doing in this area prior to conducting this research. Sheridan (2004) notes that little is also known at an international level about what social workers’ behaviours and actions involve in the area of spirituality and religion within practice. Sheridan (2004) stresses the need for research to investigate how social workers are assessing the spiritual propensity of clients, the appropriateness of including spiritual and religious issues within their practice, what intervention strategies they may be employing with clients in this area, what the implications of their own attitudes/perceptions about this topic are and how this will impact upon or influence their work. Additionally, findings from international research confirm a lack of practice guidelines, information, professional development and training in this area of professional social work practice. Social workers are, largely, left to make their own way when working with spiritual or religious issues with their clients.

More specific guidelines and practice protocols are available for workers operating within kaupapa Māori services, particularly within social work in the health sector. The lack of
professional guidelines, education and investigations into this area of practice raises concerns
about the ability of the social work profession to work in an ethically appropriate spiritually
sensitive manner.

Noticeably, throughout my own professional social work education there was a lack of
attention given to the impact and implications of differing religious and spiritual perspectives
that one may find themselves working with. Also, limited space was given to explore my own
belief system and spiritual worldview and how this would influence and affect my own
approach to practice. The (1840) Treaty of Waitangi determines that attention to this topic is
required and inclusion is recognised as part of cultural competency requirements. The
literature suggests that attention and discussions have occurred to ascertain how to include
this dimension in work with tangata whenua and Tagata Pasifika peoples and a number of
protocols have been established in a range of social service agency settings. Little information
however, has been collated as a resource for agencies or practitioners to refer to, that provides
adequate guidelines for practice in this area cross culturally. An awareness of these issues
spurred me to contemplate the implications that this paucity of information might have within
social work in Aotearoa New Zealand, and to question how much is occurring in practice in
the area of integrating religion and, or, spirituality.

Justification for this research

Given the above position, an investigation was required, and timely, when we consider the
rise of attention to this topic at an international level over the past two decades, and the
growing interest in spirituality amongst the Aotearoa New Zealand population (Morris et al.,

This investigation was also justified by a number of requirements and developments within
social work in Aotearoa New Zealand that have been discussed in Chapter two and three.
Chapter two of this research has shown that there is a growing body of literature, and
international awareness in this area. Chapter three discussed that for many within social work
and the population in general in Aotearoa New Zealand spirituality is recognised as important.
Recognition is also occurring in New Zealand about the importance of spirituality as a fundamental component of human existence. Chapter three also outlined the following considerations:

- The New Zealand Bicultural context of practice requires a commitment to the Treaty of Waitangi (1840) which includes recognition of the importance of spirituality for different cultural groups in Aotearoa New Zealand particularly for Tangata Whenua.

- The growing multi-cultural nature of New Zealand society, immigrant communities from non-western cultures introduces a diverse range of religious and spiritual expressions that are central to the worldview of these groups.

- The long and varied influence of Judeo Christian values and beliefs upon New Zealand society and cultural groups and the possible impact of these upon social work as a value based profession.

- A perceived negativity, and relegation, of spiritual concerns to the peripheral of professional practice.

- The tensions between the division of church and state and effects this will have within the practice of social work within statutory settings.

- International and National standards for competent ethical social work practice require that attention be given to this area.

- Human rights’ requirements to recognise the importance of religious and spiritual belief systems, and areas of discrimination that occur associated with these that may be counter to the profession of social work’s commitment to practice across difference in an anti-discriminatory manner.

Given the above considerations and review of the literature a number of overall aims for this research were established as follows:

- Develop an understanding of the perspectives and experiences of social workers in Aotearoa on the role of religion and spirituality within their practice.

- Ascertain what is occurring in New Zealand social work with the inclusion of religious and spiritual concerns.
• Provide a platform for future discussions and developments of frameworks and models for practice, including guidelines and ethical considerations for practitioners working in this area with clients.

To achieve these aims and explore the research problem a number of questions evolved from discussions with social workers, colleagues and social work educators and my personal reflections in interaction with the literature. As this is a fully integrated mixed method approach the research questions reflect this and include the requirement of being answered by both quantitative and qualitative approaches to data collection and analysis.

Research Questions

1. What is the role of religion and/or spirituality in the social service context of Aotearoa/New Zealand?

2. To what level is spirituality and religion being integrated, within the context of social work practice and education in Aotearoa New Zealand?

3. How do social work practitioners integrate religion and spirituality within their approaches to practice in Aotearoa New Zealand?

4. What are the perceptions and attitudes of social workers and their agencies towards the appropriateness of including spirituality and/or religion in social work practice in Aotearoa?

5. How will this affect professional practice?

Approach (Purpose of Mixed Research)

In the early planning of this research I discovered a lack of collated information about what was occurring within social work in Aotearoa New Zealand in this field. I could find no local research that explored the extent to which social workers were dealing with religious and spiritual issues in their practice. There was varying literature that indicated that this should be included and a number of different models developed for use with Tangata Whenua and
Tangata Pacifica. But little was known about the extent social workers are, if indeed they are, integrating religion and spirituality in their practice, how they are going about it and whether they felt they should be working in this area.

I had up to this point in planning the design of this study focussed on a solely qualitative investigation to explore the attitudes and feelings of social workers towards this field of practice. But I realised it would be prudent to take a step back and first find out what was occurring by way of integration of spirituality and religion within social work in general in Aotearoa New Zealand. As this was the first national study of this kind there was a need for an exploratory/descriptive investigation (Tashakkori and Teddlie, 1998; Patton, 1990; Punch, 1998) of what was occurring in New Zealand social work. This would help ascertain the level of integration of religion and spirituality that was occurring and provide a broader picture and much needed baseline data. Creswell (2003) recognises that quantitative studies provide a level of breadth within an investigation but lack depth, or provide broad but shallow data (Davidson and Tolich, 1999). Babbie (1992) defined exploration as an attempt to develop an initial, rough understanding of some phenomenon, and description as the precise measurement and reporting of the characteristics of some population or phenomenon under study.

An exploration of this kind was important to ascertain the level of integration of religion and spirituality occurring in New Zealand Social Work. To ascertain this I recognised that a national survey of social workers would provide the most efficient way to undertake this initial investigation and would provide the quantitative data required to measure the level of integration occurring. I also had a concern that taking a predominantly quantitative approach as with the international investigations (Canda and Furman, 1999; Furman, Benson, Grimwood, and Canda 2004; Furman, Zahl, Benson and Canda, 2007), might lead to a shallow approach to the topic which may not capture differing perspectives, multiple voices and the generation of understandings from within Aotearoa New Zealand’s unique bicultural social work setting. To address the above concerns I began to explore the suitability of adopting a mixed method approach.

Creswell (2003) stresses that when researchers choose to mix methods they must establish a clear rationale to justify their mixing of quantitative and qualitative data. Likewise, Johnson and Onwuegbuzie (2004) posit the importance of establishing a clear purpose for justifying the mixing of methods. A number of authors have proposed that pragmatism offers the best
paradigm for justifying the use of a mixed method approach to conducting research (Howe, 1988; Rossman and Wilson, 1985, 1991; Tashakkori and Teddlie, 1998).

Tashakkori and Teddlie (1998) observe that pragmatism rejects the notion of taking an either-or approach as maintained by the incompatibility thesis. The incompatibility thesis argues against mixing methods, as research paradigms utilise differing logics, epistemologies, axiology, ontology’s and methods which are considered incompatible. However, despite the criticisms and arguments against mixing methods it has become a well accepted practice to mix methods (Cheetham, Fuller, McIvor and Petch, 1992). According to Bazeley (2004), it is generally agreed that the paradigmatic approach of the researcher does not preclude the collection of some data types, nor does using a particular set of data or tools imply adherence to a particular research paradigm.

A pragmatic paradigm offers a position closely akin to social work practice in that it provides the social work researcher with an ability to take a consistent and coherent eclectic approach. Payne (2005) recognises that it is accepted that in general social work practice is eclectic. Additionally, it could be expected that social workers will be drawn to or give preference to qualitative means of enquiry when we consider Lincoln and Gubas (1985) observations:

When we assert that qualitative methods come more easily to hand when the instrument is a human being, we mean that the human-as-instrument is inclined towards methods that are extensions of normal human activities: looking, listening, speaking, reading and the like. We believe that the human will tend, therefore toward interviewing, observing, mining available documents and records, taking account of non-verbal tasks and interpreting inadvertent unobtrusive measures (Lincoln and Guba, 1985: 199).

Tashakkori and Teddlie (2003) suggest: “Study what interests you and is of value to you, study it in the different ways you deem appropriate, and utilise the results in ways that can bring about positive consequences within your value system” (2003: 30). Brewer and Hunter (1989) observed that a multi/mixed method approach allows a researcher the ability to attack a research problem with an arsenal of methods that have non-overlapping weaknesses in addition to their complementary strengths” (Brewer et al, 1989: 17). Johnson and Turner (2003) identify this combination of non-overlapping weaknesses and complementary strengths as the fundamental principle of mixed methods research.
Tashakkori and Teddlie (2003) observe that the ultimate goal of any research project is to answer the research questions. Mixed methods offer an approach that can provide better opportunities for answering research questions. Tashakkori and Teddlie (2003) also note that:

- Mixed methods can answer questions that other methodologies cannot.
- Mixed methods can provide better and stronger inferences.
- Mixed methods provide a way of presenting a greater diversity of divergent views.

The first decision facing the researcher is to consider the purpose of mixing methods within a research design. Greene et al (1989) presented five purposes of mixed method research; triangulation, complementarity, development, initiation and expansion.

Tashakkori and Teddlie (2003) recognise that the first two of these purposes (triangulation and complementarity) are related as they both can lead to multiple inferences that complement or confirm each other. Denzin (1978) discussed the concept of triangulation in four typologies including methodological triangulation which involves using multiple methods to study a research problem. If methodological triangulation is the purpose as is the case within this research combined with complementarity then both quantitative and qualitative data types are required, the quantitative and qualitative data collected can be utilised to measure the same phenomenon (Onwuegbuzie and Teddlie, 2003). Methodological triangulation involves combining differing types of data collection and the use of multiple methods to provide an alternative or complimentary viewing of the same phenomena (D'Cruz and Jones, 2004). Neuman (2000) observes that triangulation provides a better look at something from several angles than to look at it in only one way. Neuman (2000) also notes that triangulation of method means mixing qualitative and quantitative data collection strategies. Central to mixing is the realisation that collecting different types of data has the potential to develop a fuller and more comprehensive picture by utilising the different and complementary strengths of the different approaches. Patton (1990) deemed this approach to involve reconciling quantitative and qualitative data across methods.

Johnson and Onwuegbuzie (2004) recognise that mixing methods provides a number of differing strengths within a research project that can:

- Answer a broader and more complete range of research questions.
- Be utilised to overcome the weaknesses of one method by utilising the strengths of another.
- Provide stronger evidence for conclusions through convergence and corroboration of findings.
- Add insights that may be missed by utilising a single method.
- Increase the generalisability of results
- Combining qualitative and quantitative research can lead to more complete knowledge necessary to inform practice and the development of theory.

Likewise, Johnson and Onwuegbuzie (2004) identify a number of strengths and weaknesses that quantitative and qualitative approaches to research have. Attention to these within this research allows the ability to design research with triangulation and complementarity in mind. This allows the researcher the ability to explore and describe a phenomenon from varying vantage points.

**Methodological choice**

Given the above and the decision to combine methods for the purpose of complementarity, triangulation and expansion I am left with another methodological choice. How should I combine both quantitative and qualitative approaches within this research to best achieve the above purpose? Should I undertake a mixed model or mixed method approach to design? Should the data be collected concurrently, sequentially, or both? Creswell (1994) identified mixed method designs to involve combining both qualitative and quantitative elements of data collection into the research methodology of a single study or a multi-phased study. On the other hand mixed model approaches are said to differ in that they combine qualitative and quantitative approaches within different stages of the research process albeit during the formulation of research questions, data collection, analysis and interpretation of findings (Tashakkori and Teddlie, 1998).
Within a mixed model approach, mixing can occur sequentially, concurrently, or both, as in a fully integrated mixed model design (Tashakkori and Teddlie, 2003). In concurrent, parallel, or simultaneous designs quantitative and qualitative data are collected at the same time, then analysed with complementarity in mind (Tashakkori and Teddlie, 1998).

Creswell (2002) suggests for evaluation purposes within mixed methods research that a visual diagram of the process should be included. As such Figure 8 diagrammatically represents the design of this study. I have used a mixed model approach following the suggestions of Johnson and Onwuegbuzie (2004), using the combination of quantitative and qualitative aspects throughout the research design.

In Figure 8, stage one the concurrent stage (NZIRSSOWK I) is represented by the first set of rectangles and ovals. Stage two, the sequential stage (NZIRSSOWK II) is represented in the second set of ovals. The second phase (NZIRSSOWK II), commenced once analysis of the data collected from phase one (NZIRSSOWK I), was completed. Phase two (NZIRSSOWK II) involved utilising a purely qualitative method (focus groups) to expand the findings from phase one (NZIRSSOWK I). Phase two (NZIRSSOWK II), represents a sequential mixing of methods. Tashakkori and Teddlie (1998) observed that sequential designs consist of a distinct phase of either quantitative or qualitative data collection techniques within a single study. Thus within this study a combination of concurrent (NZIRSSOWK I) and sequential (NZIRSSOWK II) methodologies were employed (Figure 8).

This design has included the combination of quantitative and qualitative approaches during the formulation of the research questions, combining the collection of statistical data and participants comments concurrently within stage one (NZIRSSOWK I), followed with the sequential collection of data in stage two focus groups (NZIRSSOWK II). Furthermore, mixing of quantitative and qualitative data has also occurred in the interpretation of findings that has used processes of consolidation, correlation and comparison. Taking this approach has led to the integration of both data types when discussing the findings with triangulation and complementarity in mind.

Complementarity has occurred in both phases (NZIRSSOWK I and NZIRSSOWK II: Figure 8), by collecting quantitative and qualitative data within the adaptation of the survey instrument followed sequentially with focus group discussions.
Purposes/Questions
What is the role of religion and/or spirituality in the social service context of Aotearoa/New Zealand?
To what level is spirituality and religion being integrated, within the context of social work practice and education in Aotearoa/New Zealand?
What is occurring in this field of practice compared to international developments within social work?

Data Collection
Survey: Closed quotations

Data Collection
Survey: Open questions

Data Analysis
SPSS: Descriptive statistics, cross tabulations

Data Analysis
Nudist: Content analysis thematic coding

Inference
Statistical findings Chapter 5

Inference
Qualitative responses Chapter 5

Global Analysis/Inference

Figure 8 Concurrent Sequential mixed model research design process model

Notes: rectangles equal quantitative method; ovals equal qualitative methods, both combined influences from open audit findings.
Data Integration (NZIRSSOWK I and NZIRSSOWK II)

Choosing to take a mixed method approach to research is not without complications as the researcher is faced with a number of difficulties, one of which is how to present the data in a way that it is accessible to varying audiences. To an extent this can be accommodated within a mixed approach such as taken here with the provision of empirical data that has appeal to both audiences. However, although the data can be presented and analysed separately utilising the appropriate analytical strategies and approaches at some point the researcher is required to construct a picture from the data in its entirety as an integrated whole.

Erzberger and Kelle (2003) provide a discussion of the varying ways quantitative and qualitative approaches may relate to each other in ways that are meaningful. Indeed Erzberger and Kelle (2003) point out that questions about the relationship between qualitative and quantitative aspects of a mixed methods study often arise. The authors recognise that the "paradigm wars" have led to a lack of literature that deals with the logical relationships between the data, and how theoretical suppositions can be constructed from a synthesis of both quantitative and qualitative findings (Datta, 1994). Paradigmatic purists would argue that never the twain shall or should meet.

Miller (2003) notes that research involving mixed methods approaches are involved in potentially complex epistemological and ontological claims. Miller suggests the following question is a central concern and needs to be asked in relation to mixing methods “do findings in mixed methods research posit findings that provide a unique ontological claim” (pp. 453). Miller states “Do they characterise “reality” in a way that is truthful yet different from other ways of coming to know” (Miller, 2003:453).

Miller goes on to observe that “the implied uniqueness of mixed methods and models lies in the fact that they do, presumably, give us in some sense both a different and a more unique ontological picture” (Miller, 2003: 453). Miller concludes his discussion stating:

I believe that among all the issues that I have tried to address here, the central one for mixed methods models remains this ontological one. At this time a partial but broadly satisfactory response to it may lie in the acceptance of two assumptions: first that an external independent (social) reality exists and can in principle be accessed by mixed methods and, second that this reality may be consistent with the idea that it may have multiple characterisations. This is, after all, why we are
doing, for pragmatist or other reasons, mixed methods and models research (Miller, 2003: 453).

Miller alludes to the possibility that the qualitative perspective "interacts" with those subcategories generated by the quantitative perspective (Miller, 2003: 453).

Erzberger and Kelle (2003) suggest three possible paradigms24 for combining qualitative and quantitative findings in a mixed methods study and the relationship between the varying data. The authors note that the relationship between the data and how it is integrated inferentially within research findings can be convergent supplementary or contradictory.

In NZIRSSOWK I attention to collecting and analysing the quantitative data was dominant. This meant that the statistical data was analysed first and the qualitative data in the form of the participants' additional comments was collected to supplement the analysis. In this way the participants' perspectives were used to provide important depth and interpretations that could be used to explore the convergences and contradictions within the data. Miller (2003) suggests that all mixed method approaches should begin with a quantitative phase.

Following this first analytical layer and resulting findings a subsequent supplementary analysis and data collection occurred throughout NZIRSSOWK II. This data was collected sequentially to deepen the understanding of the data by eliciting directly the participants' interpretations and ideas about the understandings generated from the data in NZIRSSOWK I. Once these views were obtained an overall analysis of the data occurred focussing on the interaction of the varying data types again checking for convergence and contradiction. Upon reflection the analytical process in this research involved a high level of supplementary with each stage and data type, providing another level of analysis that allowed for a deeper understanding of the data.

24 The authors make note that the use of the word paradigm here denotes the original sense of the word meaning a "leading" or crucial example for a theoretical concept (Erzberger and Kelle, 2003: 485)
Data Collection (NZIRSSOWK I: the Role of Religion and Spirituality in Social Work Survey Instrument)

The first stage of data collection (NZIRSSOWK I) involved the adaptation of a survey instrument that has been used in a number of studies in the United States (Sheridan, 1999; Canda and Furman, 1999), Norway (Furman, Zahl, Benson and Canda, 2007), and the United Kingdom (Furman, Benson, Grimwood and Canda, 2004). Adaptation of the instrument was undertaken in consultation with an international research team to maintain the ability to undertake comparative analysis with international investigations.

Survey instrument

(See appendix B for the instrument)

The construction of the Aotearoa New Zealand (ANZ) Instrument involved adapting the UK survey instrument, which itself was originally adapted from a US questionnaire developed from the pioneering work of Dr Michael Sheridan. Individual items that pertained exclusively to the UK were removed and questions pertinent to Aotearoa New Zealand, particularly demographics, and Aotearoa New Zealand cultural considerations, were included.

The original US survey instrument comprised 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. Some of the items included in the US, UK, and the Aotearoa New Zealand survey instrument were identical to those used in previous studies by Dudley & Helfgott, 1990; Sheridan et al., 1992 and Sheridan et al., 1994. Items were also included from Bullis’ (1993) doctoral dissertation. The items included from Bullis’ (1993) doctoral dissertation, however, were modified by Canda & Furman (1999). The Aotearoa New Zealand survey instrument was adapted and modified for specific cultural differences between the United Kingdom and Aotearoa New Zealand (e.g. race/ethnicity categories, questions on social policy, etc.), through processes of consultation and checks for content validity.
Validity and Reliability

Efforts were made to examine the validity and reliability of the survey, despite the fact that many of the items included in the instrument were used in Aotearoa New Zealand for the first time. A number of exploratory analyses were conducted on the original instruments to initiate the process of establishing reliability and validity of 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. For the Aotearoa New Zealand instrument exploratory analyses using Chronbachs alpha yielded scales for the religion items (coefficient alpha = .97), the spirituality items (coefficient alpha = .97), and a combined religion and spirituality scale (coefficient alpha = .97). The high coefficient alphas strongly suggested a high degree of internal consistency for the religion and spirituality measurement scales. The original instrument was also subjected to content validity, criterion-referenced concurrent validity, and discriminate validity (Canda & Furman, 1999; Furman, Benson, Grimwood & Canda, 2004). A statistician was also utilised to cross check, give advice, and undertake and oversee varying analysis of the data.

Instrument Scales

The adapted survey instrument included a number of scales developed originally by Dr. Michael Sheridan in the United States subsequently replicated and used in the Norwegian and British context. Three scales were included to examine the relationships between religion, spirituality, and client issues (The Religion Practice Issues Scale (RPIS), the Spirituality Practice Issues Scale (SPIS) and the combined Religion and Spirituality Practice Issues Scale (RSPIS); see pages 170-171). All scale items were positively worded, and allowed participants to answer using a 5-point Likert-type scale ranging from 1 strongly disagree to 5 strongly agree.

Two more scales were included constructed from the questions about religious or spiritually orientated helping practices/interventions (see page 182-184). The first scale, the (HAIS) Helping Activities Intervention Scale measures the level of use for the varying helping activities. The HAIS contained 17 items, that required a 0 = no, or yes = 1 response. The second scale, the (HAES) Helping Activities Ethical Scale measures the ethical appropriateness of the varying responses from those participants providing sufficient information. This also contained 17 items and required a 0 = no, or yes = 1 response.
**Definition of Spirituality and Religion**

The New Zealand survey instrument began with conceptual definitions of religion and spirituality taken from the UK and US survey instruments. The respondents were asked to note that many of the questionnaire items distinguish between the two concepts. The respondents were also informed that in those questions where spirituality is used inclusively, both terms are mentioned. *Religion* was defined as an organised structured set of beliefs and practices shared by a community related to spirituality (Canda, 1990a, 1990b). *Spirituality,* on the other hand, 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. Spirituality may be expressed through religious forms, but is not limited to them (Canda, 1990a, 1990b). As these definitions were being applied in a bicultural context and represented conceptualisations from outside of the Aotearoa/New Zealand context respondents of the Aotearoa/New Zealand survey were asked whether they felt the definitions were appropriate for the New Zealand context. Accordingly, 85% \((n=162)\) felt the definitions were suitable for use in Aotearoa/New Zealand.

The Aotearoa New Zealand instrument contained 101 fixed-choice items and 10 open-ended items, which invited additional commentary on the subject of religion and spirituality for the purpose of collecting qualitative data concurrently with the quantitative responses. These additional questions provided a space for expansion and elaboration of the quantitative questions.

Nine of the additional questions related to the overall investigation of specific practice concerns in the survey instrument and one provided the opportunity for social workers to indicate areas they would like to discuss further. These practice concerns included: assessment of religion and spirituality in social work (appropriateness), helping interventions (use and appropriateness), referrals between social workers and religious and spiritual leaders, spirituality and, or, religion in social work education, personal spiritual religious experiences and participation, concepts personally perceived as relating to spirituality, and, or, religion; definitions of spirituality and religion.

Providing opportunities for qualitative input in the form of additional comments ensured that culturally specific understandings and concerns could also be accounted for particularly in the
area of how spirituality is conceptualised from varying cultural positions. This is an important consideration as indigenous understandings about what spirituality is and how it is conceptualised already exist in Aotearoa New Zealand, hence it was important to account for these and not assume that definitions and understandings constructed elsewhere would be appropriate. Tuhiwai Smith (1999) commented:

The values, attitudes, concepts and language embedded in beliefs about spirituality represent, in many cases, the clearest contrast and mark of difference between indigenous peoples and the west. It is one of the few parts of ourselves which the west cannot decipher, cannot understand and cannot control... yet (Tuhiwai Smith, 1999: 74).

Furthermore, allowing space for participants’ comments provided room for many voices to express their understandings and perceptions without being constrained only to responding to predetermined categories and variables.

The survey instrument was circulated within the Department of Social Work and Community Development, Otago University, where members of the faculty examined the content validity of the survey, considering its cultural suitability and appropriateness for use in Aotearoa New Zealand. Also, members of the faculty within the Department of Theology and Religious Studies at Otago University and a number of practicing social workers examined the instrument’s content validity. Comments were provided, amendments made and additional questions included throughout this process to shape the instrument’s final form in Aotearoa New Zealand (see Appendix B).

A number of areas of feedback were provided. A central issue in the adaptation of the instrument was the need to recognise and integrate aspects of Aotearoa New Zealand’s unique cultural situation. Two critical questions were how would practitioners be likely to respond to the instrument, given its lack of content unique to the context of Aotearoa New Zealand social work practice? Would the definitions of spirituality and religion constructed internationally for the survey be suitable in the Aotearoa New Zealand context? To resolve the first issue attention was given to adapting the instrument by either integrating contextual concepts or adding a section dedicated to the Aotearoa New Zealand context. Either option, however, presented difficulties with the extent of time required of participants to complete the questionnaire. It was likely that the response rate would fall given the time involved to complete the questionnaire. Modifications and variations were kept to a minimum for the
purposes of replication, without compromising cultural considerations within the Aotearoa
New Zealand social services context. The use of open ended questions throughout the survey
instrument also provided an opportunity for any cultural considerations that respondents
wished to mention.

Concerns about the instrument particularly its definitions were expressed by Tangata Whenua
colleagues who perceived the instrument as very universalistic “a general quantitative pakeha
exploration” (anonymous colleague, 2005), and likely that Māori or Pacific Island social
workers would not bother to answer. To address this it was felt the instrument needed to
include a section that provided specific questions for Tangata Whenua. The above description
fits with Tuhiwai Smith’s (1999) observation that research often represents western white
academic outsider ways of knowing (1999:42). The use of such a section also needed to be
pointed out at the beginning.

What seemed critical was the need to maximise the quality of the data collected. Attention
was therefore given to providing more opportunities to provide qualitative responses, with use
of open ended questions at the end of each section of the questionnaire, and the development
of concurrent data collection strategies for expansion and elaboration of the quantitative data.
I was concerned about response rates being diminished by increasing the content and scope of
the questionnaire, for example one of the issues raised in pilot feedback stated “any more than
three pages is likely to put people off responding” (anonymous social worker, 2005). Given
the size of the survey instrument some of this was resolved perceptually by reducing the
formatted size of the survey instrument from A4 to half A4 size. Changing the appearance of
the instrument in this way maintained a professional presentation and gave the appearance of
less content.

Also, a need was expressed to explore whether social workers would or, would not be
prepared to use the range of practice interventions included in the instrument in addition to
ascertaining a) if or not they had or had not undertaken a particular intervention or b) thought
it was an appropriate social work intervention. Therefore this was included and was not
present in the original US or UK instruments.

Another area of concern raised by colleagues highlighted the trajectory of social work in
Aotearoa New Zealand and its now unfamiliarity with some of the terminology and concepts
This was an area explored in piloting the survey as social workers were asked to comment on
the language used within the instrument, the suitability of the differing types of helping
interventions being measured and the possibility that social workers may be unfamiliar with
some of the terminology and its applicability to social work practice. The social workers’
comments indicated an understanding of the terminology and an overall endorsement for the
suitability of the differing helping interventions in the Aotearoa New Zealand context.
However, it was felt that the use of the word ‘faith’ as a concept alongside religion and
spirituality was unnecessary and led to some confusion as the term was not used widely in the
Aotearoa Social services context to refer to a specific social service sector or provision of
services such as the case in the international context where reference to faith-based
organisations or faith-based service provision is more widely used.

There was also a level of frustration evident when being restricted to answering the
quantitative aspects of the instrument and pre defined response sets. This may reflect two
factors in the Aotearoa New Zealand social work context when considering quantitative
methods. Firstly social workers favoured the opportunity to provide qualitative responses
being more comfortable with the use of narrative means to provide information and secondly,
culturally narrative or story telling is preferred. Indeed feedback from Tangata Whenua social
workers indicated that they are very interested in sharing stories and exploring in more depth
particularly because of the importance of this area for the future. Accordingly a level of
frustration was evident with the quantitative elements of the survey and an emphasis placed
on the need for ample opportunity for qualitative inputs. It was also suggested and will be an
important consideration for future research in this area that specific Hui (meeting, gathering)
be facilitated that will explore a shared understanding in this area as opposed to individual
responses. The focus groups in NZIRSSOWK II allowed some space for this to occur but
more is needed.

**Sample**

An online version of the instrument was initially developed utilising Microsoft FrontPage and
ASP forms development. PHP script was utilised to modify the content and forms were
returned via a secure server to a database developed to capture the responses from the forms
in a format that was easily transferred to SPSS for analysis purposes. Schaeffer and Dillman
(1998) discovered that email surveys achieved response rates similar to those of mail surveys but yielded better quality data in terms of item completion and more detailed responses to open ended questions. A very poor response was received via online and I had to revert to a mail out approach for survey purposes.

A simple random sampling procedure was utilised to select the respondents for the survey instrument. The sampling frame was obtained via the Aotearoa New Zealand Association of Social Workers (ANZASW) deVaus (1995). The sampling frame included Full, Provisional and Life members of the Association. Non practicing members and students were excluded from the sample. The inclusion criteria stipulated that respondents were required to be professional social workers who are members of the Aotearoa New Zealand Association of Social Work, Social workers employed and in current practice within statutory, voluntary, private and Christian social service organisations and, or, social work educational settings.

The sampling frame was selected in March 2006, and at the time of sampling the ANZASW membership consisted of: 1509 Tauiwi full members; 338 Tangata Whenua full members; 733 Tauiwi provisional members; 251 Tangata Whenua provisional members; 16 Tauiwi life members and 4 Tangata whenua life members. Overall, the ANZASW membership at the time of sampling consisted of 2851 members.

The Members of the Association are each allocated a unique membership number that could be used for the purpose of sample selection. A sample of 500 required a sampling fraction of 1/5 thus 1 in every five numbers was selected until the sample size of 500 was selected.

In March 2006, 500 surveys were sent to respondents: Fifteen were returned with unknown addresses and 5 returned by participants who indicated they did not wish to participate leaving a total sample size of 480. Responses were received over a four month period between March 2006 – July 2006. Overall, 168 (35%) of the surveys were returned completed. In the first month of data collection 97 (20%) of the total responses were received and the remaining 71 (15%) continued to be returned until July 2006. A better response rate may have been achieved by sending participants more than one follow up request, this however was not practical due to financial restraints.

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Data analysis (NZIRSSOWK I)

Prior to and during data collection for stage one (NZIRSSOWK I) the data were coded and input by direct entry into a SPSS database for statistical analysis. Once the data entry process was completed it was checked. Two procedures were used to clean the data and check for errors, wild code cleaning and consistency checking (Neuman, 2000). Errors relating to impossible codes were located and rectified and the data checked and modified accordingly. After checking the data was analysed with exploratory/descriptive aims and was subjected to descriptive analysis using frequency distributions, measures of central tendency, measures of variation and inferential statistics. Varying analysis was overseen and checked by a statistician from the international research team.

Limitations

There are methodological concerns in cross-cultural research, such as (1) the quality of data collection and accuracy of data entry, (2) the selection of appropriate analytic techniques for comparative research, and (3) the influence of bias in interpreting findings (Midgley, 1995, pp.1490-1493). Such concerns in this research were mitigated by involving researchers from the UK, US and New Zealand in data collection. Steps were taken to ensure data was entered accurately by checking the data entry process twice. Also, a multinational team from the US, UK, Norway and New Zealand was used to guard against cultural bias in the design and adaptation of the survey instruments 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. Overall, we do not know if the results are representative of Aotearoa New Zealand social workers' views on this topic. The items in the survey instruments dealt with broad areas of practice and did not focus on populations at risk for discrimination. Additionally, as highlighted by Holloway (2007), the sample population for this survey as with those undertaken in the US, UK and Norway are restricted to social workers who were members of their respective professional associations. Accordingly, a large percentage of social workers in Aotearoa New Zealand do
not belong to the Aotearoa New Zealand Association of Social Workers (ANZASW), and were not included in the sampling frame, therefore their views about this topic have not been explored.

A further limitation of this research is that the focus and data collected has investigated only the perceptions of professional social workers about the role of religion and, or spirituality in practice. It will be equally important to explore the role of religion and, or, spirituality from the perspective of clients. This would provide a useful comparison to ascertain whether or not the way this aspect is being constructed in practice is congruent with the meanings attributed to it by clients and what role they might see the role of spirituality and, or religion to be in Aotearoa New Zealand Social Work.

**Data Collection (NZIRSSOWK II Focus Groups):**

The data for (NZIRSSOWK II) was collected sequentially using focus groups undertaken in Auckland, Hamilton, and Wellington. This provided a level of differing regional and geographical perspectives and experiences. Obtaining a regional variation was an important consideration as the level of spiritual/religious factors in day to day practice differed significantly due to the cultural makeup of the macro practice context. For example, Auckland social workers reported dealing with spiritual and religious issues more regularly than other locations due to the high multicultural make up of Auckland with communities in which religion plays a significant role such as within Asian, Muslim and Pacific Island contexts. It would have been useful to undertake further focus groups in other centres but resource constraints limited this.

Prior to each focus group interview the participants were provided with a case study (Appendix E) and tables of findings from the national survey (NIRSSOWK I). The case study provided a scenario that stimulated discussion around the varying themes emergent in the data from stage one of this research (NZIRSSOWK I). The central themes in the case study included self determination, prosyletising, education, value conflict, propensity, resilience, and referral, how to integrate, negativity towards religion, tokenism and cultural
specificity. Morgan (1995) recognised that focus groups are a useful tool for following up on survey data to pursue an exploration of analytical outcomes. The case study was acquired with copyright permissions from the Council of Social Work Education.\textsuperscript{25} The case study was modified to suit the Aotearoa New Zealand social services context and to focus on the themes that emerged from the data in NZIRSSOWK I.

The case study provided stimulus for conversations with social workers in the focus groups to deepen the exploration of the themes discover new themes and check the validity of the survey findings. This is in line with Greenbaum's (1998) consideration that focus groups are more effective when participants have been provided with an external stimulus to encourage their thinking about the research topic.

**Procedures**

**Sample size and sampling procedure**

The focus group sample was obtained from the simple random sample utilised for the survey, participants of the survey were invited to participate in further focus group discussions (see appendix B) on a purely voluntary basis. This was a useful approach as it generated a database of social workers from which to draw upon who had a high level of interest in the topic which would ensure a greater level of participation. Of the 168 survey responses 66 participants indicated a wish to take part in further discussions. This provided a sample representative across fields of practice and geographical location. Obtaining the sample in this way also countered what Morgan (1995) identified as a problematic area in undertaking focus group research and the issue of recruitment difficulties. The geographical spread provided participants for groups to be undertaken with a pool of approximately 8-10 participants in each location.

**Group size and composition**

Barbour and Kitzinger (1999) acknowledged that in the literature about focus groups (particularly in market research) group size has been recommended to consist of 8-12 participants but suggest this is too many for sociological research and recommend participant numbers should consist of three-six people. Similarly Krueger and Casey (2000) suggest that

\textsuperscript{25} The original case study was sourced and extracted from the Council of Social Work Education Virginia USA and used with their permission.
smaller focus groups or mini focus groups containing four to six people are becoming more popular as smaller groups are easier to host, recruit and offer a more comfortable environment for participants. Greenbaum (1998) noted that researchers feel smaller groups provide more in-depth data by allowing more time for individual input. Morgan (1997) recognised that smaller groups are most useful when the participants have a high level of interest in the topic of study and provide the opportunity for more input from individual participants. Initially, I planned for 8-10 in each group but decided to work in line with the above minimum of three maximum often for each group as this allowed scope for participants unable to attend. It also ensured that those participants with a high level of interest in the topic were the most likely to participate. In conducting the groups a certain amount of flexibility was required as the groups very much depended upon the voluntary nature and goodwill of participants on the day.

Process

Prior to each focus group session, participants were contacted via email to confirm attendance, provide information of times, location etc. Some negotiation was undertaken to accommodate convenience for the participants for each group. Along with this information participants received copies of the provided case study and statistical data for consideration prior to each group 3-5 days beforehand. It is possible that some of the content of the case study acted as a barrier to some attending due to some of its more provocative content around issues such as proselytising and reference to specific religious issues.

At the beginning of each session participants were provided with refreshments and a small meal. Krueger and Casey (2000) recognise that eating together is an effective way of promoting conversation and communication within a group, this also allowed time for introductions after this the process of the groups and ground rules were outlined including reiterating and outlining the ethical information for participants (see appendix C), and rechecking informed consent before commencing discussions. Participants were reminded that the group discussions would be recorded to collect the data. Recording equipment had been set up and tested prior to each session ready to operate at the commencement of discussions. A lanier conference recording system was utilised for this purpose with four microphones placed unobtrusively below table and eye level. All microphones were unidirectional and the equipment enabled isolating of each participant’s input for transcription purposes and clarity.
To start the discussions a generic question was used as a further warm up and focussed on: what aspects of spirituality related to social work did the participants find of interest? This also provided stimulus for exploring further themes. A semi-structured format was then utilised to explore the varying themes that emerged during the focus groups and probes used to explore the areas of significance for the participants.

At the end of each group the discussion and themes that had arisen were summarised and participants thanked for their contribution to the discussions. An area worth mentioning and emphasising here is that the participants found it helpful to have an environment and space created to discuss this topic which they felt often unable to do.

**Data analysis NZIRSSOWK I (Qualitative Survey Responses) and NZIRSSOWK II (Focus Groups)**

**Nud*IST thematic coding**

Coding of the qualitative data for both stages (NZIRSSOWK I and NZIRSSOWK II) involved the use of CAQDAS (computer-assisted qualitative data analysis software), specifically, Nud*IST version 4.0 provided by QSR International. This software provides a toolkit to aid qualitative researchers to undertake their work. Gahan and Hannibal (1998) outline a number of tasks reported by researchers that the program supports that are relevant to the approach taken here. These tasks include:

1. Seeing the story in complicated data and finding out what’s going on;
2. Sorting data into theme areas so that all the stuff about a theme is in one place and it can be viewed all together;
3. Locating key words or phrases, sorting them and storing them in one place so that they can be reviewed;
4. Making categories for thinking about the data and then examining each category to see what it is referring to (Gahan and Hannibal, 1998: 2-3).
With this in mind I began the task of exploring the data and the task of coding in greater detail. The first step involved employing Nud*IST (QSR International) to import and integrate the qualitative data within the program's database and document explorer features. Each document had to be viewed in Microsoft Word and saved as plain text format to be of use within the Nud*IST software document explorer. I began coding the transcripts using open and positive coding (Tolich and Davidson, 1999: 140-154).

Open coding involved taking a liberal approach to the data which continued throughout the process. Using software-based analysis is suited to being liberal with the number of thematic files and content that can be extracted from the data, as the software allows the researcher to create nodes at multiple levels, reduce, manipulate and store the information coded in a simple manner (Gibbs, 2002). Care is needed however when undertaking these tasks that the researcher is careful not to lose or make errors with the data. Darlington and Scott (2002) point out the dangers with coding by computer-assisted approaches particularly the potential for sloppy data management (Darlington and Scott, 2002). During this initial stage I was guided by Tolich and Davidson's (1999: 140-154) account of positive and negative coding. Positive coding of the data was utilised to look for themes and areas of interest. Tolich and Davidson (1999:142) outline four functions of positive coding:

1. It identifies interesting data representing a research theme.
2. It throws up interesting data that appears to be outside an established research theme.
3. It signals that more data on themes is needed.
4. It flags an entry as worthy of storage within a thematic file.

During coding of the NZIRSSOWK I qualitative data, a number of themes emerged and were expanded upon that began to provide a richer description of the topic being investigated than that provided solely from the quantitative data collected. I consider that with this approach the richness of the collected data emerged from the descriptions and understandings of the participants.
From this process of data coding and reduction I began to gain a familiarity which allowed the fuller understanding of the data. A sense emerged of a conceptual framework for data into themes, which could be used to explore the topic and develop focus areas for further investigation in the second stage of this investigation of focus groups.

**Ethics**

This investigation obtained ethical approval from both the University of Otago Human Ethics Committee (appendix D) and the Aotearoa New Zealand Association of Social Workers (ANZASW). Furthermore, consultation with the Ngāi Tahu Research Consultation Committee through the University of Otago prior to the commencement of this research was also undertaken and approved.

This study included only social workers who were professional members of the ANZASW at the time of sampling. All participants provided informed consent and received an information sheet prior to the commencement of data collection for both NZIRSSOWK I and NZIRSSOWK II (see Appendix C).

**Conclusion**

Throughout this chapter significant attention has been given to describing the research methodology employed in this study. This discussion has been guided by the need to provide sound justification for mixing methods within any given research design. The approach taken has been located within a pragmatic paradigmatic perspective. Therefore, a thorough discussion of the purpose of mixing methods has been covered. Additionally, I have been cognisant of the difficulties faced by varying audiences of this research particularly the accessibility of varying data types to differing audiences. Hence the quantitative and qualitative findings are presented separately in the following chapters. The findings are
presented according to order of collection and dominance within the research design. In this case the quantitative data was collected first and is therefore presented first.
Chapter 5: Building a Base-National Survey Statistical Data (NZIRSSOWK I)

This chapter presents the findings from phase one of this research (NZIRSSOWK I). The data were collected using the adapted survey instrument used to explore the role of religion and spirituality within Aotearoa New Zealand social work. The qualitative findings from the survey are reported in the following chapter. This is the first national study of this kind in Aotearoa New Zealand and provides the baseline data for further qualitative investigation undertaken in phase two (NZIRSSOWK II) of this research. At this point the findings are not integrated with either the data from the focus groups or qualitative survey data but presented as a separate component. A number of different sections were contained in the instrument that included:

- Sample characteristics.
- The religious and spiritual affiliations of participants.
- Religious and spiritual issues in practice.
- The appropriateness and use of varying spiritual and religious helping interventions.
- Practice issues related to assessment.
- Values and ethical issues.
- Education and curriculum issues.
- Agency and social workers' approach and attitudes towards integrating spirituality and religion.
- Definitions and descriptors for spirituality and religion.
- Referrals to religious and or spiritual leaders.
- Taha Wairua (spirituality) within Aotearoa New Zealand social policy and practice.
The findings from each section are reported subsequently.

Sample Characteristics

The Aotearoa New Zealand sample consisted of a random sample of 500 social workers from the ANZASW membership. At the time of sampling the total ANZASW membership was 1847 full members of which 1509 were NS European/Tauiwi and 338 were Māori (ANZASW, 2006). Potential participants were mailed the survey questionnaire (Appendix B and C) with an invitation to participate in the study. A further postcard follow up was sent and responses were received between March and June 2006. Twenty of the sampled social workers were not able to be contacted and their surveys were returned by the postal service. From the total sample of 500, 168 questionnaires were returned, representing a 35% response rate. Thus for this study the total sample of 168 social workers consisted of 138 (82%) females and 29 (18%) males and 1 participant who did not specify their gender (Table 3). Participants reported having on average 14 years of social work experience with an average of 5 years social work experience before gaining a professional social work qualification. Participants have an average of 9 years social work experience after gaining a professional social work qualification.

The demographics of the sample are presented in Tables 3 and 4 below. As can be seen in Table 3 the majority of the participants (68%) were aged between 40-59 years; 82% were female; 74% had either a degree or post graduate.
Table 3: Frequency Distribution of Age, Gender, Ethnicity and Education for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Demographic Indicator</th>
<th>Category</th>
<th>n</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-Year Age Groups</td>
<td>20-29</td>
<td>10</td>
<td>(6)</td>
</tr>
<tr>
<td></td>
<td>30-39</td>
<td>29</td>
<td>(17)</td>
</tr>
<tr>
<td></td>
<td>40-49</td>
<td>52</td>
<td>(30)</td>
</tr>
<tr>
<td></td>
<td>50-59</td>
<td>63</td>
<td>(38)</td>
</tr>
<tr>
<td></td>
<td>60 and older</td>
<td>14</td>
<td>(8)</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>29</td>
<td>(18)</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>138</td>
<td>(82)</td>
</tr>
<tr>
<td></td>
<td>Not Reported</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>ANZ European</td>
<td>120</td>
<td>(72)</td>
</tr>
<tr>
<td></td>
<td>Moorit</td>
<td>12</td>
<td>(7)</td>
</tr>
<tr>
<td></td>
<td>Cook Island</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td></td>
<td>Samoan</td>
<td>5</td>
<td>(3)</td>
</tr>
<tr>
<td></td>
<td>Tongan</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td></td>
<td>Indian</td>
<td>4</td>
<td>(3)</td>
</tr>
<tr>
<td></td>
<td>Multi-Racial/ Bi-Racial</td>
<td>15</td>
<td>(9)</td>
</tr>
<tr>
<td></td>
<td>European (Other)</td>
<td>6</td>
<td>(3)</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>4</td>
<td>(3)</td>
</tr>
<tr>
<td>Education</td>
<td>School Certificate</td>
<td>14</td>
<td>(9)</td>
</tr>
<tr>
<td></td>
<td>University Entrance</td>
<td>19</td>
<td>(11)</td>
</tr>
<tr>
<td></td>
<td>Degree</td>
<td>52</td>
<td>(32)</td>
</tr>
<tr>
<td></td>
<td>Post Graduate Qualification</td>
<td>70</td>
<td>(42)</td>
</tr>
<tr>
<td></td>
<td>None/ Not Reported</td>
<td>13</td>
<td>(7)</td>
</tr>
</tbody>
</table>

The participants were also asked to indicate their primary work setting as shown in Table 4, 53% reported working in the statutory/public sector; 20% in private settings; 11% voluntary (community agencies/Non Government Organisations) and 18% in Christian Social Services. Additionally, in response to the question as to whether they worked in rural, urban or suburban settings, 62% indicated that they worked in urban settings, 27% in suburban settings and 8% in rural settings. Participants were asked to select as many practice areas as appropriate; the numbers and percentages reflect overlapping categories.

The majority of the social workers (73%) were employed full time. Over 50% of the participants identified that their primary area of practice was working with children and families followed by mental health (24%), hospital social work (14%) and Corrections (5%).
Table 4: Frequency Distribution of Professional Qualification and Employment for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Demographic Indicator</th>
<th>Category</th>
<th>n</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Qualification</td>
<td>National Diploma/ DipSW</td>
<td>40</td>
<td>(24)</td>
</tr>
<tr>
<td></td>
<td>Degree in Social Work</td>
<td>50</td>
<td>(30)</td>
</tr>
<tr>
<td></td>
<td>Other Professional Qualification</td>
<td>36</td>
<td>(21)</td>
</tr>
<tr>
<td></td>
<td>Post Qualifying/ Advanced Award</td>
<td>35</td>
<td>(21)</td>
</tr>
<tr>
<td></td>
<td>None/ Not Reported</td>
<td>7</td>
<td>(4 )</td>
</tr>
<tr>
<td>Areas of Practice</td>
<td>Child-Family Social Services</td>
<td>96</td>
<td>(57)</td>
</tr>
<tr>
<td></td>
<td>Corrections</td>
<td>9</td>
<td>(5 )</td>
</tr>
<tr>
<td></td>
<td>Hospital/Medical Health</td>
<td>34</td>
<td>(14)</td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td>41</td>
<td>(24)</td>
</tr>
<tr>
<td></td>
<td>Day Care</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td></td>
<td>Field Work</td>
<td>7</td>
<td>(4 )</td>
</tr>
<tr>
<td></td>
<td>Residential Work</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td></td>
<td>Elderly</td>
<td>15</td>
<td>(9 )</td>
</tr>
<tr>
<td></td>
<td>Physical Disabilities</td>
<td>12</td>
<td>(7 )</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>39</td>
<td>(23)</td>
</tr>
<tr>
<td></td>
<td>Vulnerable Populations</td>
<td>13</td>
<td>(7 )</td>
</tr>
<tr>
<td>Primary Work Setting</td>
<td>Private</td>
<td>34</td>
<td>(20)</td>
</tr>
<tr>
<td></td>
<td>Voluntary</td>
<td>18</td>
<td>(11)</td>
</tr>
<tr>
<td></td>
<td>Statutory/Public</td>
<td>90</td>
<td>(53)</td>
</tr>
<tr>
<td></td>
<td>Christian Social Services</td>
<td>19</td>
<td>(11)</td>
</tr>
<tr>
<td></td>
<td>Not Reported</td>
<td>7</td>
<td>(4 )</td>
</tr>
<tr>
<td>Location of Practice</td>
<td>Rural</td>
<td>13</td>
<td>(8 )</td>
</tr>
<tr>
<td></td>
<td>Suburban</td>
<td>46</td>
<td>(27)</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>104</td>
<td>(62)</td>
</tr>
<tr>
<td></td>
<td>Not Reported</td>
<td>5</td>
<td>(3 )</td>
</tr>
<tr>
<td>Employment Level</td>
<td>Full Time</td>
<td>123</td>
<td>(73)</td>
</tr>
<tr>
<td></td>
<td>Part Time</td>
<td>39</td>
<td>(23)</td>
</tr>
<tr>
<td></td>
<td>Not Reported</td>
<td>6</td>
<td>(4 )</td>
</tr>
</tbody>
</table>

Religious and Spiritual Affiliations

The participants were asked to identify their current religious or spiritual affiliations (Table 5). For the purpose of data reduction five categories for religious affiliation and, or, spiritual orientation were utilised. These categories were constructed for use in the international investigations (Canda and Furman, 1999; Furman et al, 2004; Furman et al, 2005) and have also been used in this research. Using these categories was an important consideration for replicating the original research as well as being able to reduce the large range of religious
and, or, spiritual expressions and orientations present in Aotearoa New Zealand for analytical purposes. The categories used are as follows:

- **Singular religious affiliation and orientation.** This category includes all participants who identified themselves as having a singular religious affiliation. It comprises of two sub categories those with a singular religious affiliation (Christian) based within the Christian tradition e.g. Catholic and protestant and those with a Singular religious affiliation (non Christian). This includes all participants who identified themselves having a singular religious affiliation based within a non Christian tradition such as Islam, Hindu and Buddhist.

- **Singular non religious affiliation or orientation.** This category includes all of the participants who identified themselves as being either agnostics, atheists or existentialists.

- **Multiple religious orientations or affiliations.** This category includes all participants who identified a combination of religious orientations, and included any combination of religious orientation such as Christian with Buddhist.

- **Multiple non religious.** This category includes participants with any non religious combination of affiliations or orientations such as atheism with existentialism.

- **No affiliation or orientation.** This category includes all participants who identified themselves as having no spiritual or religious affiliation and, or, orientation whatsoever.

As shown in Table 5; the majority of participants (73%) reported a singular religious affiliation, either Christian or non Christian. Of which 53% were Christian, from a variety of denominations.

Three orientations were included under singular non-religious affiliations and orientations agnosticism, atheism and existentialism. Agnostics represented 6% of the participants, 4% of the participants were atheists and 1% existentialists. Additionally, 5% of the participants indicated that they had multiple religious orientations or affiliations (for example, Christianity and Buddhism). Another 2% selected a multiple non-religious affiliation/orientation (any combination of atheist, agnostic, existentialist). Finally 9% of the participants reported that they had no religious affiliation or orientation. Overall 27% of the participants described
themselves as atheist, agnostic, existentialist, a combination of these and no affiliation or orientation.

Table 5: Frequency Distribution of Current Religious Affiliation/Spiritual Orientations for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Affiliation/ Orientation</th>
<th>n</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Singular Religious Affiliations and Orientations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Christian Catholic</td>
<td>17</td>
<td>(11)</td>
</tr>
<tr>
<td>Christian Protestant</td>
<td>39</td>
<td>(23)</td>
</tr>
<tr>
<td>Christian Non Denominational</td>
<td>9</td>
<td>(6)</td>
</tr>
<tr>
<td>Christian Unspecified</td>
<td>18</td>
<td>(11)</td>
</tr>
<tr>
<td>Latter Day Saints</td>
<td>3</td>
<td>(2)</td>
</tr>
<tr>
<td>Maori Christian</td>
<td>3</td>
<td>(2)</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>89</td>
<td>(53)</td>
</tr>
<tr>
<td>Jewish</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td>Hinduism</td>
<td>1</td>
<td>(&lt;1)</td>
</tr>
<tr>
<td>Goddess Religion</td>
<td>2</td>
<td>(1)</td>
</tr>
<tr>
<td>Spiritism/ Shamanism</td>
<td>6</td>
<td>(4)</td>
</tr>
<tr>
<td>Other (Non Christian)</td>
<td>23</td>
<td>(14)</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>33</td>
<td>(20)</td>
</tr>
<tr>
<td><strong>Singular Non-Religious Affiliation/ Orientation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agnosticism</td>
<td>10</td>
<td>(6)</td>
</tr>
<tr>
<td>Atheism</td>
<td>7</td>
<td>(4)</td>
</tr>
<tr>
<td>Existentialism</td>
<td>2</td>
<td>(1)</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>19</td>
<td>(11)</td>
</tr>
<tr>
<td><strong>Multiple Religious Orientations Affiliations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any religious orientation in combination with any other religious orientation (eg. Christian and Buddhist)</td>
<td>9</td>
<td>(5)</td>
</tr>
<tr>
<td><strong>Multiple Non-Religious Affiliation/ Orientation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any combination of atheism, agnosticism or existentialism</td>
<td>3</td>
<td>(2)</td>
</tr>
<tr>
<td><strong>No Affiliation/ Orientation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Affiliation/ Orientation</td>
<td>15</td>
<td>(9)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>168</td>
<td>(100)</td>
</tr>
</tbody>
</table>

Religious and Spiritual Practices of Participants

A number of questions focused on the personal religious and spiritual experiences of participants during their childhood and adulthood. The survey items also addressed childhood and adult attendance in organised religious activities, current relationship with and
involvement in organised religious or spiritual support groups and participation in personal private religious or spiritual activities. Four questions also asked the participants about negative perceptions of religious and spiritual experiences in both childhood and as adults.

**Childhood and adulthood religious community activities**

Active attendance on a daily to weekly basis in religious community services during childhood often did not continue into adulthood. As shown in Table 6 below, when asked about their level of childhood attendance in religious services 49% of the participants reported childhood participation in religious services on a daily to once a week basis. Only 23% of the participants continued to participate in adulthood on a daily to weekly basis. This represents a 26% decrease in attendance on a daily to weekly basis into adulthood amongst the participants.

**Table 6: Frequency Distribution of Participation in an Organised Religious or Spiritual Support Group for the Aotearoa New Zealand Sample (N=168).**

<table>
<thead>
<tr>
<th>Frequency of Participation</th>
<th>Not Reported</th>
<th>Daily to Weekly</th>
<th>One to Three Times per Month</th>
<th>Two to Six Times per Year</th>
<th>Once a Year or Not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>During your school years, how often did you participate in religious community services?</td>
<td>- - -</td>
<td>72 (49%)</td>
<td>37 (22%)</td>
<td>15 (9%)</td>
<td>34 (20%)</td>
</tr>
<tr>
<td>How frequently do you currently participate in religious services?</td>
<td>3 (2%)</td>
<td>39 (23%)</td>
<td>32 (19%)</td>
<td>21 (13%)</td>
<td>73 (43%)</td>
</tr>
</tbody>
</table>

**Private personal religious/spiritual participation**

A number of religious and spiritual practices were identified that are used privately outside of attendance in religious services or spiritual group meetings, such as meditation, visualisation and prayer. Participants were asked to indicate the frequency of their private religious and spiritual practices. Participants were asked the question for both private religious practices and private spiritual practices. In response 49% of the participants reported that they practiced...
private religious practices at least weekly and 54% indicated that they practiced private spiritual practices at least weekly. The results are shown in Table 7.

Table 7: Frequency Distribution of Participation in Private Religious or Spiritual Practices for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Frequency of Participation</th>
<th>Private Religious Practices</th>
<th>Private Spiritual Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily to Weekly</td>
<td>82 (49)</td>
<td>91 (54)</td>
</tr>
<tr>
<td>One to Three Times per month</td>
<td>18 (11)</td>
<td>26 (16)</td>
</tr>
<tr>
<td>Two to Six Times Per Year</td>
<td>16 (10)</td>
<td>12 (7)</td>
</tr>
<tr>
<td>Once a Year or Not at all</td>
<td>51 (30)</td>
<td>34 (20)</td>
</tr>
<tr>
<td>No Response</td>
<td>1 (&lt;1)</td>
<td>5 (3)</td>
</tr>
<tr>
<td>Total</td>
<td>168 (100)</td>
<td>168 (100)</td>
</tr>
</tbody>
</table>

Present relationship to an organised religion or support group

As can be seen in Table 8 in response to the question about their present levels of involvement in an organised religious or spiritual support group 19% indicated active participation and high levels of involvement. Conversely 4% indicated a level of disdain and a negative reaction towards religion and spirituality.
Table 8: Frequency Distribution of Present Relationship to an Organised Religion or Spiritual Support Group for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Present Relationship to an Organised Religion or Spiritual Group</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active participation, high level of involvement</td>
<td>31</td>
<td>(19)</td>
</tr>
<tr>
<td>Regular participation, some involvement</td>
<td>47</td>
<td>(28)</td>
</tr>
<tr>
<td>An identification with religion or spiritual support group, very limited or no involvement</td>
<td>46</td>
<td>(27)</td>
</tr>
<tr>
<td>No identification, participation, or involvement with a religious or spiritual group</td>
<td>34</td>
<td>(20)</td>
</tr>
<tr>
<td>Disdain and Negative reaction to religious or spiritual traditions</td>
<td>6</td>
<td>(4)</td>
</tr>
<tr>
<td>No Response</td>
<td>4</td>
<td>(2)</td>
</tr>
<tr>
<td>Total</td>
<td>168</td>
<td>(100)</td>
</tr>
</tbody>
</table>

Perceptions of personal religious and spiritual experiences.

Using a five-point Likert-type scale, participants were asked to indicate their level of agreement from 1 = ‘strongly disagree’ to 5 = ‘strongly agree’, regarding negative childhood and adulthood religious and spiritual experiences. The responses are shown in Table 9 overleaf. Current negative religious experiences were reported by 11% of the participants; current negative spiritual experiences were reported by 1% of the participants; 84% felt positive about their present religious experiences and 84% felt positive about their present spiritual experiences.
Table 9: Frequency Distribution of Perceptions of Personal Religious and Spiritual Experiences for the Aotearoa New Zealand Sample (N= 167).

<table>
<thead>
<tr>
<th>I feel negative about........</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>the religious experiences of my childhood</td>
<td>44 (26)</td>
<td>64 (38)</td>
<td>33 (20)</td>
<td>21 (13)</td>
<td>5 (3)</td>
</tr>
<tr>
<td>the spiritual experiences of my childhood</td>
<td>48 (28)</td>
<td>65 (40)</td>
<td>48 (29)</td>
<td>4 (3)</td>
<td>2 (1)</td>
</tr>
<tr>
<td>my religious experiences in the present</td>
<td>55 (33)</td>
<td>52 (31)</td>
<td>42 (26)</td>
<td>15 (9)</td>
<td>3 (2)</td>
</tr>
<tr>
<td>my spiritual experiences in the present</td>
<td>74 (44)</td>
<td>65 (40)</td>
<td>25 (16)</td>
<td>2 (1)</td>
<td>---</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

The four negative perception items were also reverse coded and summed to construct a scale with a range of 4 (very negative experiences) to 20 (very positive experiences) which measures perceived past and present negative religious and spiritual experiences. To measure the inter-reliability of items on this summated scale Chronbachs alpha (Cronbach, 1951) was used to calculate the coefficient alpha (Coefficient alpha=0.82). Overall, the social workers felt positive about their childhood and adulthood religious spiritual experiences (Mean=15.67, SD=3.07, Range= 4-20).

Religion and Spirituality Practice Issues

This study investigated social workers' attitudes towards the integration of religion and spirituality in practice and how these concepts influence the therapeutic relationship. According to Bullis (1993), it is easier for social workers to maintain the client's right of self-determination if the client initiates the exploration of religious and spiritual issues, however, that silence on spiritual or religious matters may indicate to the client a level of indifference or discomfort on behalf of the clinician. This difficulty was explored in-depth via 22 questions in the survey that dealt with raising the topic of religion (Table 10) or spirituality (Table 11) with clients dealing with specific practice issues. The only practice issues in which more than 50% of the participants believed it was appropriate to raise the topic of religion included terminal illness, foster parenting and bereavement (Table 10). In comparison the participants...
were significantly more favourable about raising the topic of spirituality than religion with clients in all practice issues except for foster parenting, terminal illness, and recovery from a natural disaster or catastrophe (Table 11).

Over 50% of the Aotearoa New Zealand participants felt it is appropriate to raise the topic of spirituality with clients regarding: 57% substance abuse; 57% sexual abuse; 53% partner violence; and 52% difficult family relations. With the exception of foster parent issues, the majority of participants believed it is less appropriate to raise the topic of religion compared with spirituality. The findings shown in Table 11 suggest that social workers in Aotearoa New Zealand recognise the importance of spirituality and religion, but favour spirituality over religion when applying them to practice issues.

Table 10: Frequency Distribution of the Appropriateness to Raise the Topic of Religion by Client Issue for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>It is appropriate to raise the topic of religion when dealing with a client</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who has a terminal illness.</td>
<td>15 (9)</td>
<td>20 (12)</td>
<td>31 (19)</td>
<td>70 (42)</td>
<td>28 (17)</td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>21 (13)</td>
<td>39 (23)</td>
<td>50 (30)</td>
<td>44 (27)</td>
<td>10 (6)</td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>15 (8)</td>
<td>21 (13)</td>
<td>33 (20)</td>
<td>69 (42)</td>
<td>29 (17)</td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>24 (14)</td>
<td>23 (13)</td>
<td>57 (34)</td>
<td>58 (35)</td>
<td>10 (6)</td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence.</td>
<td>23 (13)</td>
<td>33 (20)</td>
<td>53 (32)</td>
<td>39 (23)</td>
<td>13 (8)</td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. air-line/train crash).</td>
<td>21 (13)</td>
<td>26 (16)</td>
<td>51 (31)</td>
<td>54 (33)</td>
<td>12 (7)</td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>15 (9)</td>
<td>16 (10)</td>
<td>30 (18)</td>
<td>82 (49)</td>
<td>21 (13)</td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>30 (18)</td>
<td>36 (21)</td>
<td>60 (36)</td>
<td>31 (19)</td>
<td>7 (4)</td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>29 (17)</td>
<td>31 (19)</td>
<td>64 (38)</td>
<td>31 (19)</td>
<td>9 (5)</td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>25 (15)</td>
<td>34 (20)</td>
<td>48 (29)</td>
<td>47 (28)</td>
<td>9 (5)</td>
</tr>
<tr>
<td>Who is involved in the criminal justice system.</td>
<td>26 (16)</td>
<td>34 (20)</td>
<td>58 (35)</td>
<td>35 (21)</td>
<td>11 (7)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.
Table 11: Frequency Distribution of the Appropriateness to Raise the Topic of Spirituality by Client Issue for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>It is appropriate to raise the topic of spirituality when dealing with a client</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td></td>
</tr>
<tr>
<td>Who has a terminal illness.</td>
<td>8 (5)</td>
<td>4 (3)</td>
<td>20 (12)</td>
<td>82 (49)</td>
<td>53 (32)</td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>15 (9)</td>
<td>13 (8)</td>
<td>44 (26)</td>
<td>69 (41)</td>
<td>26 (16)</td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>10 (6)</td>
<td>9 (5)</td>
<td>40 (24)</td>
<td>72 (43)</td>
<td>35 (21)</td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>17 (10)</td>
<td>9 (5)</td>
<td>45 (27)</td>
<td>68 (41)</td>
<td>26 (16)</td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence</td>
<td>16 (10)</td>
<td>14 (9)</td>
<td>47 (28)</td>
<td>66 (39)</td>
<td>23 (14)</td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. air-linestruin crash)</td>
<td>16 (10)</td>
<td>10 (6)</td>
<td>40 (24)</td>
<td>72 (43)</td>
<td>27 (16)</td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>7 (4)</td>
<td>3 (2)</td>
<td>23 (14)</td>
<td>85 (51)</td>
<td>48 (29)</td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>23 (14)</td>
<td>15 (9)</td>
<td>55 (32)</td>
<td>57 (34)</td>
<td>18 (11)</td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>19 (11)</td>
<td>13 (8)</td>
<td>59 (35)</td>
<td>54 (32)</td>
<td>20 (11)</td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>15 (9)</td>
<td>14 (8)</td>
<td>49 (29)</td>
<td>64 (38)</td>
<td>23 (14)</td>
</tr>
<tr>
<td>Who is involved in the criminal justice system</td>
<td>17 (10)</td>
<td>18 (11)</td>
<td>55 (33)</td>
<td>51 (30)</td>
<td>25 (15)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

Three scales (The Religion Practice Issues Scale (RPIS), the Spirituality Practice Issues Scale (SPIS) and the combined Religion and Spirituality Practice Issues Scale) were used to examine the relationships between religion, spirituality, and client and are shown in Table 12. All scale items were positively worded, and allowed participants to Answer using a 5-point Likert-type scale ranging from 1 strongly disagree to 5 strongly agree. The range on the RPIS and the SPIS is 11 (no interventions used) to 55 (all interventions used). The range on the RSPIS is 22 (no interventions used) to 110 (all interventions used). The Religion Practice Issues Scale (RPIS) was constructed for Aotearoa New Zealand (Coefficient alpha=0.97) by summing the 11 items on religion (Mean=33.15, SD=11.00, Range=11-55). The Spirituality Practice Issues Scale (SPIS) was constructed for Aotearoa New Zealand (Coefficient alpha =0.97) by summing the 11 items on spirituality (Mean=38.58, SD=10.45, Range=11-55). Finally, the Religion and Spirituality Practice Issues Scale (RSPIS), summed the 22 religion and spirituality items (Coefficient alpha = 0.97) for Aotearoa New Zealand (Mean=71.59, SD=10.45, Range=22-110).
Table 12: Frequency Distribution of the Appropriateness to Raise the Topic of Religion and, or, Spirituality by Client Issue for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Issue</th>
<th>Religion</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Who has a terminal illness.</td>
<td>164</td>
<td>3.46</td>
<td>1.18</td>
<td>1-5</td>
<td>1.39</td>
<td>167</td>
<td>4.01</td>
<td>0.98</td>
<td>1-5</td>
<td>1.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>164</td>
<td>2.89</td>
<td>1.12</td>
<td>1-5</td>
<td>1.26</td>
<td>167</td>
<td>3.47</td>
<td>1.12</td>
<td>1-5</td>
<td>1.26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>165</td>
<td>3.48</td>
<td>1.15</td>
<td>1-5</td>
<td>1.34</td>
<td>166</td>
<td>3.68</td>
<td>1.06</td>
<td>1-5</td>
<td>1.25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>162</td>
<td>2.83</td>
<td>1.12</td>
<td>1-5</td>
<td>1.26</td>
<td>165</td>
<td>3.47</td>
<td>1.13</td>
<td>1-5</td>
<td>1.30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence</td>
<td>163</td>
<td>2.89</td>
<td>1.17</td>
<td>1-5</td>
<td>1.37</td>
<td>166</td>
<td>3.39</td>
<td>1.13</td>
<td>1-5</td>
<td>1.27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. airline/train crash)</td>
<td>164</td>
<td>3.06</td>
<td>1.13</td>
<td>1-5</td>
<td>1.30</td>
<td>165</td>
<td>3.51</td>
<td>1.13</td>
<td>1-5</td>
<td>1.28</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>164</td>
<td>3.47</td>
<td>1.12</td>
<td>1-5</td>
<td>1.26</td>
<td>166</td>
<td>3.99</td>
<td>.094</td>
<td>1-5</td>
<td>0.88</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>164</td>
<td>2.69</td>
<td>1.10</td>
<td>1-5</td>
<td>1.22</td>
<td>166</td>
<td>3.19</td>
<td>1.18</td>
<td>1-5</td>
<td>1.39</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>164</td>
<td>2.75</td>
<td>1.11</td>
<td>1-5</td>
<td>1.25</td>
<td>165</td>
<td>3.26</td>
<td>1.13</td>
<td>1-5</td>
<td>1.29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>163</td>
<td>2.88</td>
<td>1.15</td>
<td>1-5</td>
<td>1.32</td>
<td>166</td>
<td>3.40</td>
<td>1.11</td>
<td>1-5</td>
<td>1.24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is involved in the criminal justice system</td>
<td>164</td>
<td>2.82</td>
<td>1.14</td>
<td>1-5</td>
<td>1.30</td>
<td>165</td>
<td>3.29</td>
<td>1.16</td>
<td>1-5</td>
<td>1.35</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practice Issues Scale</td>
<td>160</td>
<td>32.15</td>
<td>11.60</td>
<td>11-55</td>
<td></td>
<td>155</td>
<td>38.51</td>
<td>10.45</td>
<td>11-55</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: The Ns, variances and standard deviations are based on valid responses. Missing cases are excluded.

Sheridan (2004) observed that personal religious affiliation, particularly participation in communal/religious services may be a significant contributing factor as to whether social workers include religious and spiritual issues in practice with clients. Sheridan (2004) explores the possibility that active participation of social workers within varying religions may contribute to a positive propensity to include religion and spirituality in practice. To explore this in Aotearoa New Zealand four cross tabulations were used.
The first cross tabulation shown in Table 13 explored religious affiliation or orientation and spiritual affiliation or orientation by the appropriateness of including religion for each client issue. As can be seen in Table 13 in response to the appropriateness of raising the topic of religion by client issue participants who identified themselves as having multiple religious affiliations or orientations (e.g. any combination such as Christian and Hindu) were more positive about the appropriateness of including religion in all areas than participants with a singular religious affiliation, non religious affiliation, or no affiliation or orientation except with issues of sexual abuse and partner violence.

Table 13 shows that participants with a multiple religious affiliation were more likely to feel that it is appropriate to raise the topic of religion with clients who are experiencing issues related to: 89% terminal illness; 44% substance abuse disorders; 78% foster parenting; 67% natural disasters or catastrophes; 78% bereavement; 44% mental disorder; 33% loss of job; 55% difficult family relations and 33% criminal justice issues. Participants with a singular religious affiliation (non-Christian) were less likely to feel that it is appropriate to raise the topic of religion with clients who are experiencing issues related to: 23% terminal illness; 16% substance abuse disorder; 13% foster parenting; 19% sexual abuse; 16% partner violence; 16% natural disaster or catastrophe; 32% bereavement; 10% mental disorder; 10% loss of job; 26% difficult family relations and 13% criminal justice.

Table 13 also shows that more than 50% of the participants with a multiple religious affiliation, singular religious affiliation (Christian) and no affiliation or orientation felt it is appropriate to raise the topic of religion with clients for a number of client issues. More than 50% of participants with a multiple religious affiliation believed it is appropriate to raise the topic of religion with clients about issues involving the following: 89% terminal illness; 78% foster parenting; 67% natural disaster or catastrophe; 78% bereavement and 55% difficult family relations.

For the participants with a singular religious affiliation (Christian) more than 50% felt it is appropriate to raise the topic of religion with clients about: terminal illness 63%; foster parenting 71%; natural disaster or catastrophe 52% and bereavement 74%.
For participants with no religious affiliation or orientation more than 50% felt it is appropriate to raise the topic of religion with clients about: terminal illness 53%; foster parenting 60% and 57% bereavement.

Table 13: Cross Tabulation of Spiritual Affiliation/Orientation by the Appropriateness to Raise the Topic of Religion per Client Issue for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th></th>
<th>Singular religious affiliation (Christian)</th>
<th>Multiple religious affiliation (any religious combination e.g. Hindu and Christian)</th>
<th>Multiple non-religious affiliation (any non-religious combination e.g. atheism and agnosticism)</th>
<th>Singular religious affiliation (non-Christian)</th>
<th>Singular non-religious affiliation (e.g. atheism)</th>
<th>No affiliation or orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is appropriate to raise the topic of religion when dealing with a client..................</td>
<td>n=89</td>
<td>n=9</td>
<td>n=33</td>
<td>n=15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who has a terminal illness.</td>
<td>56 (63)</td>
<td>8 (89)</td>
<td>1 (33)</td>
<td>19 (57)</td>
<td>6 (32)</td>
<td>8 (33)</td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>32 (27)</td>
<td>4 (44)</td>
<td>1 (33)</td>
<td>9 (27)</td>
<td>4 (22)</td>
<td>4 (27)</td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>63 (71)</td>
<td>7 (78)</td>
<td>...</td>
<td>11 (33)</td>
<td>8 (42)</td>
<td>9 (60)</td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>29 (33)</td>
<td>3 (33)</td>
<td>...</td>
<td>7 (21)</td>
<td>5 (26)</td>
<td>4 (27)</td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence</td>
<td>32 (36)</td>
<td>3 (33)</td>
<td>1 (33)</td>
<td>5 (15)</td>
<td>7 (37)</td>
<td>4 (27)</td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. airline/train crash)</td>
<td>46 (52)</td>
<td>6 (67)</td>
<td>...</td>
<td>4 (12)</td>
<td>5 (26)</td>
<td>5 (33)</td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>65 (74)</td>
<td>7 (78)</td>
<td>...</td>
<td>12 (36)</td>
<td>9 (47)</td>
<td>10 (67)</td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>23 (26)</td>
<td>4 (44)</td>
<td>...</td>
<td>3 (9)</td>
<td>6 (32)</td>
<td>2 (13)</td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>24 (27)</td>
<td>3 (33)</td>
<td>...</td>
<td>4 (12)</td>
<td>5 (26)</td>
<td>4 (27)</td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>34 (39)</td>
<td>5 (55)</td>
<td>...</td>
<td>6 (18)</td>
<td>6 (32)</td>
<td>5 (33)</td>
</tr>
<tr>
<td>Who is involved in the criminal justice system</td>
<td>26 (30)</td>
<td>3 (33)</td>
<td>...</td>
<td>8 (24)</td>
<td>5 (26)</td>
<td>4 (27)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

The second cross tabulation shown in Table 14 explored the association of the participants' affiliations with their perception of the appropriateness of including spirituality by client...
issue. In comparison to the participants’ perception of the appropriateness of including religion shown in Table 13 more than 50% of participants with a singular religious affiliation (Christian) felt it is appropriate to raise spirituality with clients about: terminal illness 89%; substance 72% abuse disorder; foster parenting 82%; sexual abuse 71%; partner violence 66%; natural disaster or catastrophe 75%; bereavement 95%; mental disorder 50%; loss of job 54%; difficult family relations 66% and 56% criminal justice.

Table 14 also shows that more than 50% of participants with a singular religious affiliation (non-Christian) felt it is appropriate to raise spirituality with clients about: partner violence 72%; natural disaster or catastrophe 69%; bereavement 96%; mental disorder 57%; loss of job 70%; difficult family relations 72% and criminal justice 69%.

More than 50% of participants with a multiple religious affiliation felt it is appropriate to raise spirituality with clients about: terminal illness 100%; substance abuse disorder 78%; foster parenting 66%; sexual abuse 67%; partner violence 78%; natural disaster or catastrophe 78%; bereavement 89%; mental disorder 66%; loss of job 66%; difficult family relations 66% and criminal justice 55%.

Furthermore, Table 14 shows that over 50% of participants with a singular non religious affiliation felt it is appropriate to raise spirituality with clients about: terminal illness 58%.

More than 50% of participants with no affiliation or orientation felt it is appropriate to raise spirituality with clients about: terminal illness 80%; substance abuse disorder 53%; foster parenting 80%; sexual abuse 60%; partner violence 60%; natural disaster or catastrophe 66%; bereavement 86%; mental disorder 53%; difficult family relations 53% and criminal justice 53%.
Table 14: Cross Tabulation of Spiritual Affiliation/Orientation by the Appropriateness to Raise the Topic of Spirituality per Client Issue for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>It is appropriate to raise the topic of spirituality when dealing with a client</th>
<th>n=89</th>
<th>n=33</th>
<th>n=15</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Who has a terminal illness.</td>
<td>79 (89)</td>
<td>9 (100)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>64 (72)</td>
<td>7 (78)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>73 (82)</td>
<td>6 (66)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>63 (71)</td>
<td>6 (67)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence.</td>
<td>59 (66)</td>
<td>7 (78)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. airline/train crash).</td>
<td>67 (75)</td>
<td>7 (78)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>84 (95)</td>
<td>8 (89)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>44 (50)</td>
<td>6 (66)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>48 (54)</td>
<td>6 (66)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>59 (66)</td>
<td>6 (66)</td>
<td>1 (33)</td>
</tr>
<tr>
<td>Who is involved in the criminal justice system.</td>
<td>50 (56)</td>
<td>5 (55)</td>
<td>1 (33)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

The third cross tabulation shown in Table 15 explored the level of participation in an organised religious or spiritual support group by the appropriateness of including religion for each client issue. Overall, this cross tabulation explored the association between religious
affiliation/participation and the level of endorsement for spirituality and religion to be included in practice by participants.

Table 15: Cross Tabulation of Participation in Spiritual or Religious Services/Support Group by the Appropriateness to Raise the Topic of Religion per Client Issue for the Aotearoa New Zealand Sample.

<table>
<thead>
<tr>
<th>Issue Description</th>
<th>Daily to once a week</th>
<th>One to three times per month</th>
<th>Two to six times per year</th>
<th>Once a year or not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n=39 n=(%)</td>
<td>n=32 n=(%)</td>
<td>n=21 n=(%)</td>
<td>n=73 n=(%)</td>
</tr>
<tr>
<td>It is appropriate to raise the topic of spirituality when dealing with a client</td>
<td>Agree/ Strongly</td>
<td>Disagree/ Strongly</td>
<td>Agree/ Strongly</td>
<td>Disagree/ Strongly</td>
</tr>
<tr>
<td>Who has a terminal illness</td>
<td>24 (62) 7 (18) 19 (59) 4 (13)</td>
<td>14 (67) 2 (14) 4 (14)</td>
<td>40 (54) 20 (27)</td>
<td></td>
</tr>
<tr>
<td>Who has a substance abuse disorder</td>
<td>13 (33) 14 (56) 13 (41) 8 (25)</td>
<td>7 (33) 6 (28) 21 (29) 31 (42)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is preparing to become a foster parent</td>
<td>25 (64) 5 (13) 18 (56) 4 (13)</td>
<td>9 (43) 6 (28) 44 (60) 19 (26)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is recovering from sexual abuse</td>
<td>12 (31) 15 (38) 10 (31) 8 (25)</td>
<td>6 (28) 4 (19) 20 (27) 29 (40)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence</td>
<td>13 (33) 12 (31) 12 (38) 8 (25)</td>
<td>7 (33) 6 (28) 21 (29) 31 (42)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. airline/train crash)</td>
<td>17 (44) 10 (27) 13 (41) 5 (16)</td>
<td>11 (52) 4 (19) 27 (37) 27 (37)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is bereaved</td>
<td>24 (62) 5 (13) 18 (56) 4 (12)</td>
<td>14 (67) 3 (14) 45 (62) 18 (25)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder</td>
<td>6 (15) 15 (38) 8 (25) 9 (28)</td>
<td>4 (19) 5 (24) 19 (26) 36 (49)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is suffering from a loss of job</td>
<td>9 (23) 14 (36) 10 (31) 9 (28)</td>
<td>3 (14) 5 (24) 18 (25) 31 (42)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations</td>
<td>13 (33) 14 (36) 14 (44) 8 (25)</td>
<td>7 (33) 8 (38) 24 (33) 30 (41)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Who is involved in the criminal justice system</td>
<td>9 (23) 13 (33) 10 (31) 8 (25)</td>
<td>7 (37) 5 (24) 20 (27) 33 (45)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.
The fourth cross tabulation shown in Table 16 explored the participants' level of participation in a spiritual or religious services/support group by the appropriateness to raise the topic of spirituality per client issue.

Table 16: Cross Tabulation of Participation in Spiritual and, or, Religious Services/Support Group by the Appropriateness to Raise the Topic of Spirituality per Client Issue for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>It is appropriate to raise the topic of spirituality when dealing with a client</th>
<th>Daily to once a week (n=39)</th>
<th>One to three times per month (n=32)</th>
<th>Two to six times per year (n=21)</th>
<th>Once a year or not at all (n=73)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Agree/Strongly</td>
<td>Disagree/Strongly</td>
<td>Agree/Strongly</td>
<td>Disagree/Strongly</td>
</tr>
<tr>
<td>Who has a terminal illness.</td>
<td>34 (87)</td>
<td>2 (5)</td>
<td>24 (75)</td>
<td>1 (3)</td>
</tr>
<tr>
<td>Who has a substance abuse disorder.</td>
<td>25 (64)</td>
<td>6 (15)</td>
<td>17 (53)</td>
<td>4 (12)</td>
</tr>
<tr>
<td>Who is preparing to become a foster parent.</td>
<td>26 (67)</td>
<td>4 (10)</td>
<td>18 (56)</td>
<td>1 (3)</td>
</tr>
<tr>
<td>Who is recovering from sexual abuse.</td>
<td>26 (67)</td>
<td>6 (15)</td>
<td>16 (50)</td>
<td>4 (12)</td>
</tr>
<tr>
<td>Who is experiencing, or has experienced, partner violence.</td>
<td>22 (56)</td>
<td>6 (15)</td>
<td>18 (56)</td>
<td>4 (12)</td>
</tr>
<tr>
<td>Who is suffering the effects of a natural disaster (i.e. flood) or catastrophe (i.e. airline/train crash).</td>
<td>24 (62)</td>
<td>6 (15)</td>
<td>21 (67)</td>
<td>1 (3)</td>
</tr>
<tr>
<td>Who is bereaved.</td>
<td>34 (87)</td>
<td>1 (2)</td>
<td>24 (75)</td>
<td>1 (3)</td>
</tr>
<tr>
<td>Who is suffering from a chronic mental disorder.</td>
<td>18 (46)</td>
<td>8 (20)</td>
<td>14 (44)</td>
<td>7 (22)</td>
</tr>
<tr>
<td>Who is suffering from a loss of job.</td>
<td>18 (46)</td>
<td>8 (20)</td>
<td>16 (50)</td>
<td>5 (10)</td>
</tr>
<tr>
<td>Who is experiencing difficulty in family relations.</td>
<td>21 (54)</td>
<td>6 (15)</td>
<td>19 (59)</td>
<td>5 (16)</td>
</tr>
<tr>
<td>Who is involved in the criminal justice system.</td>
<td>21 (54)</td>
<td>7 (18)</td>
<td>15 (47)</td>
<td>5 (16)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.
Helping Interventions

Seventeen items identified a wide range of spiritually orientated helping practices/interventions used by social workers with clients (Table 17 and Table 18). Participants were asked three questions that required a yes or no response. The first question required participants to indicate whether or not they had used the specific helping practice/intervention with clients. The second question asked the participants to indicate whether or not they felt the particular helping practice/intervention is an appropriate helping intervention for social work. The third question asked participants to indicate whether or not they would be willing to use the specific helping practice/intervention with clients. The results are shown in Table 17 and Table 18 overleaf.

As can be seen more than 50% of the participants indicated for the first question that they had personally used the following helping practice/intervention with clients in their social work practice: 80% had personally helped clients consider the ways in which their religious and spiritual systems are helpful; 53% had discussed the role of religious or spiritual beliefs in relation to significant others; 65% had used non sectarian spiritual language or concepts and 50% had helped clients reflect on what happens after death. Each of these four practices is considered important for clients and indicates that a majority of the participants are integrating spirituality and religion within practice in Aotearoa New Zealand to a degree.

Additionally, 54% of the participants had recommended participation in a religious or spiritual support system or activity and 54% had helped clients develop religious or spiritual rituals as a clinical intervention.

The helping activities least used with clients by the participants included: praying with a client 35%; touching a client for healing purposes 7%; helping a client assess the meaning of spiritual experiences that occur in dreams 17% and encourage the client to do regular religious or spiritual diary keeping 26%. These least used practices are more directive and involved with a client’s personal boundaries.

In response to the second question as to whether or not the helping practice/intervention is appropriate to use in social work over 50% of the participants indicated they felt the helping
practices/interventions are appropriate in all areas except: touching clients for healing purposes (15%) and help clients assess the meaning of spiritual experiences that occur in dreams (31%).

Finally, for the third question participants were asked to indicate whether they would be prepared to undertake the varying helping practices/interventions with clients, over 50% of the participants indicated they would be prepared to use the helping practice/interventions with clients in all areas except: touch clients for healing purposes (13%) and help clients assess the spiritual experiences that occur in dreams (29%).

This indicates a level of willingness to include religious and spiritual interventions in practice by the participants. Of the participants 91% identified helping clients consider the ways their religious or spiritual support systems are helpful to be the most likely helping/practice intervention they would be prepared to use. This is an important consideration for strengths based approaches to practice (Sermabeikian, 1994).
Table 17: Frequency Distribution of Spirituality Orientated Helping Interventions for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Helping Intervention</th>
<th>Have personally used with clients</th>
<th>Activity is an appropriate helping intervention</th>
<th>Would be prepared to do this helping intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%), n (%)</td>
<td></td>
<td>n (%), n (%)</td>
</tr>
<tr>
<td>Use or recommend religious or spiritual books or writings.</td>
<td>60 (36) 95 (57)</td>
<td>96 (57)</td>
<td></td>
</tr>
<tr>
<td>Pray privately for a client</td>
<td>78 (46) 89 (53)</td>
<td>83 (49)</td>
<td></td>
</tr>
<tr>
<td>Pray with a client</td>
<td>55 (33) 90 (53)</td>
<td>93 (55)</td>
<td></td>
</tr>
<tr>
<td>Use religious language or concepts.</td>
<td>75 (45) 89 (53)</td>
<td>96 (57)</td>
<td></td>
</tr>
<tr>
<td>Use non-sectarian spiritual language or concepts.</td>
<td>105 (63) 120 (71)</td>
<td>125 (74)</td>
<td></td>
</tr>
<tr>
<td>Recommend participation in a religious or spiritual support system or activity.</td>
<td>86 (51) 115 (68)</td>
<td>115 (68)</td>
<td></td>
</tr>
<tr>
<td>Touch clients for “healing” purposes.</td>
<td>12 (7) 25 (15)</td>
<td>21 (13)</td>
<td></td>
</tr>
<tr>
<td>Help clients develop religious or spiritual rituals as a clinical intervention.</td>
<td>88 (52) 121 (72)</td>
<td>123 (73)</td>
<td></td>
</tr>
<tr>
<td>Participate in client’s religious or spiritual rituals as a practice intervention.</td>
<td>56 (33) 88 (52)</td>
<td>83 (50)</td>
<td></td>
</tr>
<tr>
<td>Encourage the client to do regular religious or spiritual self-reflective diary keeping or journal keeping.</td>
<td>42 (25) 104 (62)</td>
<td>97 (58)</td>
<td></td>
</tr>
<tr>
<td>Discuss the role of religious or spiritual beliefs in relation to significant others.</td>
<td>86 (51) 115 (68)</td>
<td>123 (73)</td>
<td></td>
</tr>
</tbody>
</table>
Table 18: Frequency Distribution of Spiritually Orientated Helping Interventions for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>Helping Intervention</th>
<th>n (%)</th>
<th>n (%)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assist clients to reflect critically on religious or spiritual beliefs and practices</td>
<td>72 (43)</td>
<td>95 (57)</td>
<td>96 (57)</td>
</tr>
<tr>
<td>Help clients assess the meaning of spiritual experiences that occur in dreams.</td>
<td>27 (16)</td>
<td>50 (30)</td>
<td>45 (27)</td>
</tr>
<tr>
<td>Help clients consider the spiritual meaning and purpose of his or her current life situation.</td>
<td>73 (43)</td>
<td>99 (59)</td>
<td>107 (64)</td>
</tr>
<tr>
<td>Help clients reflect on their belief about what happens after death.</td>
<td>81 (48)</td>
<td>113 (67)</td>
<td>122 (73)</td>
</tr>
<tr>
<td>Help clients consider the ways their religious or spiritual support systems are helpful.</td>
<td>131 (78)</td>
<td>140 (83)</td>
<td>149 (89)</td>
</tr>
<tr>
<td>Help clients consider the ways their religious or spiritual support systems are harmful.</td>
<td>77 (46)</td>
<td>110 (65)</td>
<td>110 (65)</td>
</tr>
</tbody>
</table>

Two scales are shown in Tables 19 and 20 which were constructed from the questions about religious or spiritually orientated helping practices/interventions. The first scale, the HAIS (Helping Activities Intervention Scale) measures the level of use for the varying helping activities. The HAIS contained 17 items (coefficient alpha=0.83), that required a 0= no, or yes = 1 response. The range of the HAIS is 0 (no interventions used) to 17 (all interventions have been used) (mean= 7.15, SD= 4.02, range 0-17). The second scale, the HAES (Helping Activities Ethical Scale) measures the ethical appropriateness of the varying responses from those participants providing sufficient information. This also contained 17 items (coefficient alpha= 0.88) and required a 0= no, or yes= 1 response. The range of the HAES is 0 (no interventions are appropriate) to 17 (all interventions are appropriate). The responses were summed into a single score for each participant (mean= 10.14, SD= 4.51, range= 0-17 and are shown in Table 20.
Table 19: Frequency Distribution of Spiritually Orientated Helping Interventions for the Aotearoa New Zealand Sample (N=168)

<table>
<thead>
<tr>
<th>Helping Intervention</th>
<th>Have personally used with clients</th>
<th>Activity is an appropriate helping intervention</th>
<th>Would be prepared to do this helping intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>n</td>
<td>Mean</td>
<td>SD</td>
<td>n</td>
</tr>
<tr>
<td>---</td>
<td>------</td>
<td>-----</td>
<td>---</td>
</tr>
<tr>
<td>Use or recommend religious or spiritual books or writings.</td>
<td>158</td>
<td>1.62</td>
<td>(.49)</td>
</tr>
<tr>
<td>Pray privately for a client</td>
<td>162</td>
<td>1.51</td>
<td>(.50)</td>
</tr>
<tr>
<td>Pray with a client.</td>
<td>158</td>
<td>1.65</td>
<td>(.48)</td>
</tr>
<tr>
<td>Use religious language or concepts.</td>
<td>161</td>
<td>1.53</td>
<td>(.50)</td>
</tr>
<tr>
<td>Use non-sectarian spiritual language or concepts.</td>
<td>161</td>
<td>1.34</td>
<td>(.48)</td>
</tr>
<tr>
<td>Recommend participation in a religious or spiritual support system or activity.</td>
<td>159</td>
<td>1.46</td>
<td>(.50)</td>
</tr>
<tr>
<td>Touch clients for “healing” purposes.</td>
<td>161</td>
<td>1.93</td>
<td>(.26)</td>
</tr>
<tr>
<td>Help clients develop religious or spiritual rituals as a clinical intervention.</td>
<td>162</td>
<td>1.46</td>
<td>(.50)</td>
</tr>
<tr>
<td>Participate in client’s religious or spiritual rituals as a practice intervention.</td>
<td>163</td>
<td>1.66</td>
<td>(.47)</td>
</tr>
<tr>
<td>Encourage the client to do regular religious or spiritual self-reflective diary keeping or journal keeping.</td>
<td>161</td>
<td>1.74</td>
<td>(.44)</td>
</tr>
<tr>
<td>Discuss the role of religious or spiritual beliefs in relation to significant others.</td>
<td>162</td>
<td>1.47</td>
<td>(.50)</td>
</tr>
</tbody>
</table>

Note: The Ns, means and standard deviations are based on valid responses. Missing cases are excluded.
Table 20: Frequency Distribution of Spiritually Orientated Helping Interventions for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Helping Intervention</th>
<th>Have personally used with clients</th>
<th>Activity is an appropriate helping intervention</th>
<th>Would be prepared to do this helping intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n Mean SD</td>
<td>n Mean SD</td>
<td>n Mean SD</td>
</tr>
<tr>
<td>Assist clients to reflect critically on religious or spiritual beliefs and practices</td>
<td>162 1.56 (.50)</td>
<td>153 5.37 (.49)</td>
<td>160 3.40 (.49)</td>
</tr>
<tr>
<td>Help clients assess the meaning of spiritual experiences that occur in dreams.</td>
<td>160 1.83 (.37)</td>
<td>160 5.68 (.47)</td>
<td>155 3.72 (.45)</td>
</tr>
<tr>
<td>Help clients consider the spiritual meaning and purpose of his or her current life situation.</td>
<td>160 1.54 (.50)</td>
<td>155 5.26 (.48)</td>
<td>161 3.34 (.47)</td>
</tr>
<tr>
<td>Help clients reflect on their belief about what happens after death.</td>
<td>162 1.50 (.50)</td>
<td>154 5.27 (.44)</td>
<td>161 3.24 (.43)</td>
</tr>
<tr>
<td>Help clients consider the ways their religious or spiritual support systems are helpful.</td>
<td>163 1.20 (.40)</td>
<td>155 5.10 (.30)</td>
<td>163 3.08 (.28)</td>
</tr>
<tr>
<td>Help clients consider the ways their religious or spiritual support systems are harmful.</td>
<td>163 1.53 (.50)</td>
<td>151 5.27 (.45)</td>
<td>160 3.31 (.46)</td>
</tr>
<tr>
<td>Helping Activities Intervention Scale (HAINS)</td>
<td>160 7.17 (4.02)</td>
<td>--- ---</td>
<td>--- ---</td>
</tr>
<tr>
<td>Helping Activities Ethics Scale (HAES)</td>
<td>--- ---</td>
<td>160 10.14 (4.51)</td>
<td>--- ---</td>
</tr>
</tbody>
</table>

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

Other Practice Issues

The survey explored a number of practice issues shown in Table 21 which is outlined below. A large percentage of the participants (86%) agreed that spirituality is a fundamental aspect of being human. When asked whether social work practice with a spiritual component has a better chance of empowering clients than without, 49% of the participants agreed/strongly agreed with this statement (Table 21).
Forgiveness issues

DiBlasio and Proctor (1993) define forgiveness as letting go of the need for vengeance and releasing associated feelings of bitterness and resentment. The authors also recognise the importance of assessing whether clients are ready or wish to work on forgiveness. Additionally, DiBlasio and Proctor (1993) noted that forgiveness does not mean reconciliation. McCullough, Pargament and Thoreson (2000) recognise the potential forgiveness processes have for therapeutic work with clients. Likewise, Denton and Martyn (1998) recognise that forgiveness as a process can be a useful tool to employ in dealing with varying intra and interpersonal issues. They note however, that the use of forgiveness as a therapeutic technique is met with resistance partly because of its association with religion. When participants were asked questions about working with clients in the area of forgiveness 41% agreed/strongly agreed that helping clients assess whether they wished to work on forgiveness is an important part of social work practice. A further 43% identified using techniques that deal with forgiveness in their social work practice. Finally, 34% felt that helping clients assess whether they wished to work on forgiveness is not an important part of social work practice and 34% did not use techniques that deal with forgiveness in their work with clients (see Table 21).

Spiritual Assessment and History

Cascio (1998) recognised that creating a conducive atmosphere in spiritual assessment is crucial. Hodge (2002b) defined spiritual assessment as a process of collecting and categorising spiritually-based data that is able to be utilised for intervention purposes in a way that assists social workers to understand their client's world view. If a social worker chooses to include spiritual or religious histories as part of intake and assessment this may encourage self-directed exploration of spiritual and religious issues by the client. Participants were asked whether taking a client’s religious or spiritual history should be part of intake and assessment. As shown in Table 21, 33% of the participants reported that a religious history, and 43% a spiritual history, should be part of intake and assessment. When participants were asked if self disclosure about their own spiritual/religious belief system or lack of, a belief system is important in establishing the helping relationship 12% agreed/strongly agreed with this statement and 67% disagreed/strongly disagreed (Table 21).
Table 21: Frequency Distribution of Additional Practice Issues for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Additional Practice Issue</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree (n)</td>
<td>Disagree (n)</td>
<td>Neutral (n)</td>
<td>Agree (n)</td>
<td>Strongly Agree (n)</td>
<td></td>
</tr>
<tr>
<td><strong>Spirituality is a fundamental aspect of being human</strong></td>
<td>1 (1)</td>
<td>3 (2)</td>
<td>19 (12)</td>
<td>56 (35)</td>
<td>83 (51)</td>
</tr>
<tr>
<td><strong>Social work practice with a spiritual component has a better chance to empower clients than practice without such a component</strong></td>
<td>5 (3)</td>
<td>21 (13)</td>
<td>57 (35)</td>
<td>45 (28)</td>
<td>34 (21)</td>
</tr>
<tr>
<td><strong>Taking a religious history of the client should be part of intake and assessment</strong></td>
<td>21 (13)</td>
<td>56 (35)</td>
<td>32 (20)</td>
<td>47 (29)</td>
<td>6 (4)</td>
</tr>
<tr>
<td><strong>Taking a spiritual history of the client should be part of intake and assessment even when the client is not religious</strong></td>
<td>12 (7)</td>
<td>44 (27)</td>
<td>35 (22)</td>
<td>60 (37)</td>
<td>10 (6)</td>
</tr>
<tr>
<td><strong>Helping clients assess whether they wish to work on forgiveness is an important part of social work practice</strong></td>
<td>14 (9)</td>
<td>41 (25)</td>
<td>42 (26)</td>
<td>56 (35)</td>
<td>9 (6)</td>
</tr>
<tr>
<td><strong>In my practice, I use techniques that deal with forgiveness</strong></td>
<td>18 (11)</td>
<td>37 (23)</td>
<td>36 (22)</td>
<td>61 (38)</td>
<td>8 (5)</td>
</tr>
<tr>
<td><strong>Informing a client of the Social Worker’s religious/spiritual belief system, or lack thereof, is important when establishing the helping relationship</strong></td>
<td>41 (25)</td>
<td>71 (42)</td>
<td>37 (22)</td>
<td>16 (10)</td>
<td>3 (2)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

The participants were also asked to indicate whether they agreed/strongly agreed or disagreed/strongly disagreed with two statements that explored views about introducing spirituality and, or religion with clients in their practice.

In response to the first statement ‘In general social workers should introduce spirituality and, or religion according to their professional judgement’ 20% disagreed/strongly disagreed whilst 63% agreed/strongly agreed with this statement (Table 22).
In response to the second statement ‘In general social workers should only introduce spirituality and, or, religion only if the client expresses interest first’ 25% disagreed/strongly disagreed whilst 62% agreed/strongly agreed (Table 22).

Table 22: Frequency Distribution of Responses to Notions of Introducing Spirituality and, or, Religion with Clients for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Introducing spirituality and, or, religion with clients</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Agree Strongly</th>
</tr>
</thead>
<tbody>
<tr>
<td>In general social workers should only introduce spirituality and, or, religion according to their professional judgment</td>
<td>6 (4)</td>
<td>27 (16)</td>
<td>29 (17)</td>
<td>82 (49)</td>
<td>24 (14)</td>
</tr>
<tr>
<td>In general social workers should only introduce spirituality and, or, religion only if the client expresses interest first</td>
<td>4 (2)</td>
<td>38 (23)</td>
<td>21 (12)</td>
<td>70 (42)</td>
<td>34 (20)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

Values and Ethical Issues

In response to a statement that integrating religion and spirituality in social work practice conflicts with the mission of social work 61% of the participants disagreed. In terms of whether the social workers felt that integrating religion and spirituality conflicted with social works ethics, 40% disagreed / strongly disagreed (Table 23).
Table 23: Frequency Distribution of Values and Ethical Issues for the Aotearoa New Zealand Sample (N=168)

<table>
<thead>
<tr>
<th>Values and Ethical Issues</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Integrating religion and spirituality in social work mission</td>
<td>16 (10)</td>
<td>82 (51)</td>
<td>39 (24)</td>
<td>20 (12)</td>
<td>5 (3)</td>
</tr>
<tr>
<td>Integrating religion and spirituality in social work practice</td>
<td>14 (9)</td>
<td>50 (31)</td>
<td>51 (32)</td>
<td>39 (24)</td>
<td>8 (5)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

Education and Curriculum Issues

Internationally, it has been recognised that spirituality and religion is lacking in social work education (Canda, 1989; Moss, 2003; Holloway, 2007). Participants were asked a number of questions about the level of content that they had received on spirituality and religion within their social work education. As shown in Table 24 while 52% indicated that they had received content in their social work education, a large majority (80%), felt that there is insufficient information, practice guidelines, training and professional development in Aotearoa New Zealand for social workers in the area of including religion and spiritual issues in practice (Table 24).

26 A qualitative question was used to explore the content of this in more depth and is covered in Chapter seven.
Table 24: Frequency Distribution of Education and Curriculum Issues for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>Educational/ Curriculum Issue</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Social workers, in general do not possess the skill to assist clients in religious and, or, spiritual matters</td>
<td>3 (2)</td>
<td>38 (23)</td>
<td>43 (25)</td>
<td>68 (40)</td>
<td>16 (10)</td>
</tr>
<tr>
<td>Social workers should become more knowledgeable than they are now in spiritual matters</td>
<td>2 (1)</td>
<td>14 (8)</td>
<td>46 (27)</td>
<td>63 (38)</td>
<td>43 (26)</td>
</tr>
</tbody>
</table>

These findings suggest that overall social workers in Aotearoa New Zealand feel inadequately prepared to address the topic of religion and spirituality, although they recognise its importance. Moss (2003) recognises the need to design appropriate curricula to deal with these issues in higher education.

Agency and Practitioner perceptions of integration and responses

Praglin (2004) suggested a range of approaches taken towards religion and spirituality in the literature. Stirling (2005) suggests that Praglin’s (2004) range of approaches may also reflect possible responses from practitioners and agencies alike towards the integration of religion and spirituality in practice. To explore this issue participants’ were asked to identify their attitude and approach to the integration of spirituality and religion; how they perceived their agency or work settings attitude and approach to the inclusion of religion and or spirituality. The results are shown in Table 25, Table 26 and Table 27.

Overall, the participants reported a more positive personal attitude and approach than their agencies attitude approach towards integration: 40% were willing to include both religion and spirituality but unsure how to do so; 50% believed a genuine inclusion of both religion and
spirituality was already occurring in their practice with clients whilst 5% believed they offered only a tokenistic model of inclusion (Table 25). Of the total participants, 3% rejected the inclusion of religion (Table 26) and 1% rejected the inclusion of spirituality (Table 26). The participants perceived that 26% of their agencies were willing to include both religion and spirituality but unsure how to; 28% perceived a genuine inclusion of religion and spirituality by their agencies whilst 27% identified a tokenistic model of inclusion (Table 25).

Table 25: Frequency Distribution of Participants Perception of their Own and Their Agencies Approach Towards Integrating Religion and, or, Spirituality in Practice for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Approach Towards Integrating Religion and, or, Spirituality In Practice</th>
<th>Social worker</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willing to include both religion and, or, spirituality but unsure how to</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>A genuine inclusion of spirituality and, or, religion occurring</td>
<td>68 (40)</td>
<td>43 (26)</td>
</tr>
<tr>
<td>A tokenistic model of inclusion occurring</td>
<td>84 (50)</td>
<td>47 (28)</td>
</tr>
<tr>
<td></td>
<td>9 (5)</td>
<td>45 (27)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many approaches as appropriate. The Ns and percentages reflect overlapping categories.

Table 26: Frequency Distribution of Participants Perception of their Own and their Agencies Attitude Towards Integrating Religion in Practice for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Attitude Towards Integrating Religion in Practice</th>
<th>Social worker</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total rejection of including religion</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Avoidant of including religion</td>
<td>5 (3)</td>
<td>10 (6)</td>
</tr>
<tr>
<td>Ambivalent to including religion</td>
<td>7 (4)</td>
<td>36 (21)</td>
</tr>
<tr>
<td>Resistant to including religion due to a lack of knowledge</td>
<td>26 (15)</td>
<td>43 (26)</td>
</tr>
<tr>
<td></td>
<td>9 (5)</td>
<td>22 (13)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.
Table 27: Frequency Distribution of Participants Perception of their own and their Agencies Attitude Towards Integrating Spirituality in Practice for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Attitude Towards Integrating Spirituality in Practice</th>
<th>Social worker</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Total rejection of including spirituality</td>
<td>2 (1)</td>
<td>6 (4)</td>
</tr>
<tr>
<td>Avoidant of including spirituality</td>
<td>4 (2)</td>
<td>32 (19)</td>
</tr>
<tr>
<td>Ambivalent to including spirituality</td>
<td>19 (11)</td>
<td>40 (24)</td>
</tr>
<tr>
<td>Resistant to including spirituality due to a lack of knowledge</td>
<td>4 (2)</td>
<td>21 (12)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.

Furman and Benson (2003) suggest that the context in which social workers operate may be a variable that influences whether social workers are likely to include religious and spiritual issues in their work with clients. Evidence in the US suggests that social workers operating in private practice are more likely to agree with the need to include religious and spiritual components in practice (Furman, 2006). Private practice in the US, however, differs significantly to private practice in Aotearoa New Zealand as does Aotearoa New Zealand differ with its high proportion of Christian social services. This issue is explored in this study by a cross tabulation of the participants’ perceptions of their own (Table 28 and Table 29), and their agencies attitude (Table 30 and Table 31) towards including religion and, or spirituality in practice by primary practice setting. Additionally, a cross tabulation of participant’s perception of their own approach (Table 32) and the participant’s perception of their agencies’ approaches (Table 33) towards including religion and, or, spirituality was undertaken by primary practice setting.

**Social worker attitudes towards integrating religion in practice**

The participants were asked to identify as many attitudes to the integration of religion in practice as appropriate. Participants were asked to identify their own attitudes towards the
integration of religion in practice. Four attitudinal options were provided, adapted from Praglin’s (2004) considerations, about the attitudes to including religion within social work practice in the literature. The options that the participants could select from included: a total rejection of including religious concerns; avoidant of including religious concerns; ambivalent to including religious concerns and being resistant, due to a lack of knowledge, information about religious issues (Table 28).

Overall 3% of participants who worked in a statutory setting indicated that they totally rejected including religion in practice, as did a further 1% in private settings, conversely participants who worked in a voluntary or Christian social service setting indicated that they did not reject the inclusion of religion in their practice.

In response to avoiding religion in their practice participants indicated that: 3% in voluntary; 4% statutory; 3% private and 5% Christian social services settings were personally avoidant of including religion (Table 28).

Additionally, when asked whether or not the participants were ambivalent towards the inclusion of religion: 3% of participants in voluntary settings; 20% statutory; 12% private and 5% working in Christian social services indicated that they were ambivalent towards including religion (Table 28).

Finally, 9% of participants working in voluntary settings; 4% statutory; 3% private and 5% in Christian social services indicated that they were resistant to including religion in practice because they lacked knowledge and information about how to do so (Table 28).
Social worker attitudes towards including spirituality in practice

As well as exploring the above participant attitudes towards including religion in practice the participants were asked to identify as many attitudes to the integration of spirituality as appropriate. Authors have identified that spirituality is preferred to the concept of religion (Praglin, 2004) thus to further explore this issue, a cross tabulation of attitudes towards spirituality by primary work setting was undertaken. The options that the participants were provided with were the same as those for religious inclusion: a total rejection of including spiritual concerns; an avoidance of spiritual concerns; ambivalence towards spiritual concerns and resistant, due to a lack of knowledge, information about spiritual issues (Table 29).

Overall, 1% of participants who worked in a statutory setting indicated that they totally rejected including spirituality, conversely participants in voluntary, private and Christian social services did not indicate having an attitude that rejected the inclusion of spirituality in their practice (Table 29).
When asked about avoiding including spirituality: 3% of participants who worked in voluntary; 1% statutory; 3% private 5% Christian social service settings indicated that they were avoidant of including spiritual concerns in practice (Table 29).

Additionally, when asked about ambivalence towards spirituality participants who worked in: 14% statutory; 9% private and 5% Christian social services indicated that they were ambivalent towards the inclusion of spirituality whilst participants who worked in voluntary settings did not indicate that they were ambivalent towards spirituality.

Finally, 3% of the participants who worked in a statutory setting and 5% in Christian social services indicated that they were resistant to including spirituality in practice because they had a lack of knowledge, information about how to do so (Table 29).

Table 29: Cross Tabulation of Primary Work Setting by Participants Attitude Towards Integrating Spirituality in Practice for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Social Worker Attitude Towards Integrating Spirituality in Practice</th>
<th>Voluntary n=34</th>
<th>Statutory n=90</th>
<th>Private n=34</th>
<th>Christian Social Services n=19</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Total rejection of including spirituality</td>
<td>---</td>
<td>1 (1)</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Avoidant of including spirituality</td>
<td>1 (3)</td>
<td>1 (1)</td>
<td>1 (3)</td>
<td>1 (5)</td>
</tr>
<tr>
<td>Ambivalent to including spirituality</td>
<td>---</td>
<td>13 (14)</td>
<td>3 (9)</td>
<td>1 (5)</td>
</tr>
<tr>
<td>Resistant to including spirituality due to a lack of knowledge</td>
<td>---</td>
<td>3 (3)</td>
<td>---</td>
<td>1 (5)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.

Perceived agency attitude towards integrating religion in social work
Social workers may feel a lack of support at an agency organisational level when they seek to include religion and or spirituality in their practice with clients. In Aotearoa New Zealand this may also involve differing levels of endorsement dependent upon whether the primary work setting is within a statutory setting and influenced by factors such as the secular state and the
maintenance of church state separation. To explore these issues participants were asked to identify what they perceived their agencies overall attitude towards integrating religion in practice to be (Table 30).

Participants were asked to indicate what they believed their agencies attitude to be towards religion and were provided with the same response choices given above for their own attitudes these included: a total rejection of including spiritual concerns; an avoidance of spiritual concerns; ambivalence towards spiritual concerns and resistant, due to a lack of knowledge, information about spiritual issues.

Overall, 3% of the participants who worked in a voluntary setting; 7% statutory and 3% private felt that their agencies totally rejected the inclusion of religion in practice whilst no participants in Christian social services indicated that their agencies totally rejected the inclusion of religion (Table 30).

When asked about their agencies avoiding religion: 9% of participants in a voluntary setting; 26% statutory; 15% private and 16% Christian social services indicated that their agencies had an avoidant attitude towards including religion (Table 30).

When asked about their agencies being ambivalent towards including religion: 18% of participants in a voluntary setting; 26% statutory; 15% private and 16% Christian social services indicated that their agencies were ambivalent towards including religion in practice.

Finally, when asked about their agencies resistance towards including religion: 3% of the participants in voluntary settings; 13% statutory; 12% private and 16% Christian Social Services indicated that their agencies were resistant to including religion because of a lack of knowledge about how to do so (Table 30).

Overall, the participants’ agencies in all settings had a less favourable attitude towards the inclusion of religion in practice than the participants’ individually had towards including religion. This may create a level of tension between agencies and participants due to the lack of agency endorsement for an area of practice that the participants are undertaking with clients to varying degrees. This may also indicate that an endorsement to include religion
varies according to primary work setting albeit voluntary, statutory, private or Christian social services.

Table 30: Cross Tabulation of Primary Work Setting by Participants Perception of their Agencies Attitude Towards Integrating Religion in Practice for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Perceived Agency Attitude Towards Integrating Religion in Practice</th>
<th>Voluntary n=34</th>
<th>Statutory n=90</th>
<th>Private n=34</th>
<th>Christian Social Services n=19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total rejection of including religion</td>
<td>1 (3)</td>
<td>6 (7)</td>
<td>1 (3)</td>
<td>---</td>
</tr>
<tr>
<td>Avoidant of including religion</td>
<td>3 (9)</td>
<td>23 (26)</td>
<td>5 (15)</td>
<td>3 (16)</td>
</tr>
<tr>
<td>Ambivalent to including religion</td>
<td>6 (18)</td>
<td>23 (26)</td>
<td>5 (15)</td>
<td>3 (16)</td>
</tr>
<tr>
<td>Resistant to including religion due to lack of knowledge</td>
<td>1 (3)</td>
<td>12 (13)</td>
<td>4 (12)</td>
<td>3 (16)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.

Perceived agency attitude towards integrating spirituality in social work

Participants were also asked to identify what they perceived their agencies attitude to be towards the inclusion of spirituality. Overall, 3% of the participants who worked in private and 3% in the statutory setting felt that their agencies totally rejected the inclusion of religion in practice, whilst no participants in Christian social services and voluntary settings indicated that their agencies totally rejected the inclusion of spirituality (Table 31). When asked about their agencies avoidance of spirituality: 12% of the participants who worked in a voluntary setting; 23% statutory; 9% private and 16% Christian social services indicated that their agencies avoided including spirituality. Additionally, when asked about their agencies ambivalence to spirituality: 12% of participants who worked in a voluntary setting; 27% statutory; 12% private and 16% Christian social services indicated that their agencies were ambivalent towards the inclusion of spirituality in practice. Finally, when asked about being resistant to including spirituality: 3% of participants who worked in voluntary settings; 13% statutory, 12% private and 16% Christian Social Services indicated that their agencies were
resistant to including spirituality because they had a lack of knowledge about how to do so (Table 31).

Table 31: Cross Tabulation of Primary Work Setting by Participants Perception of their Agencies Attitude Towards Integrating Spirituality in Practice for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>Perceived Agency Attitude Towards Integrating Spirituality in Practice</th>
<th>Voluntary n=34</th>
<th>Statutory n=90</th>
<th>Private n=34</th>
<th>Christian Social Services n=19</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Total rejection of including spirituality</td>
<td>---</td>
<td>---</td>
<td>3 (3)</td>
<td>1 (3)</td>
</tr>
<tr>
<td>Avoidance of including spirituality</td>
<td>4 (12)</td>
<td>21 (23)</td>
<td>3 (9)</td>
<td>3 (16)</td>
</tr>
<tr>
<td>Ambivalent to including spirituality</td>
<td>4 (12)</td>
<td>24 (27)</td>
<td>4 (12)</td>
<td>3 (16)</td>
</tr>
<tr>
<td>Resistant to including spirituality due to a lack of knowledge</td>
<td>1 (3)</td>
<td>12 (13)</td>
<td>4 (12)</td>
<td>3 (16)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.

Social workers’ approach to including spirituality and, or, religion in practice

The participants were also asked to indicate what they felt was their overall approach towards the integration of spirituality and, or religion in practice. Participants could choose from three possible responses: willing to include religion and, or, spirituality but unsure how to; a genuine inclusion of religion and, or, spirituality in their practice and a tokenistic model of inclusion (Table 32).

Overall, 23% of the participants who worked in voluntary settings; 40% statutory; 26% private and 53% in Christian social service settings indicated their willingness to include religion and, or, spirituality in practice but were unsure how to do so.

Additionally, 26% of the participants who worked in voluntary settings; 39% statutory; 56% private and 74% Christian social service settings indicated that they currently practiced a genuine inclusion of both spirituality and religion in their practice with clients.

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Finally, 3% voluntary; 4% statutory; 3% private and 5% Christian social service indicated that their practice involved only a tokenistic model of inclusion (Table 32).

Table 32: Cross Tabulation of Primary Work Setting by Participants Approach Towards Integrating Religion and, or, Spirituality in Practice for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>Approach Towards Integrating Religion and, or, Spirituality in Practice</th>
<th>Voluntary n=34</th>
<th>Statutory n=90</th>
<th>Private n=34</th>
<th>Christian Social Services n=19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willing to include both religion and, or, spirituality but unsure how to</td>
<td>8 (23)</td>
<td>36 (40)</td>
<td>9 (26)</td>
<td>10 (53)</td>
</tr>
<tr>
<td>A genuine inclusion of spirituality and, or, religion occurring</td>
<td>9 (26)</td>
<td>35 (39)</td>
<td>19 (56)</td>
<td>14 (74)</td>
</tr>
<tr>
<td>A tokenistic model of inclusion occurring</td>
<td>1 (3)</td>
<td>4 (4)</td>
<td>1 (3)</td>
<td>1 (5)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many approaches as appropriate. The Ns and percentages reflect overlapping categories.

Agency approach to including spirituality and, or, religion in practice
Additionally, the participants were asked to indicate what they felt was their agencies overall approach towards the integration of spirituality and, or religion in practice. As with the above section participants could choose from three possible responses: willing to include religion and, or, spirituality but unsure how to; a genuine inclusion of religion and, or, spirituality in their agency and a tokenistic model of inclusion (Table 33).

Overall, 15% of the participants who worked in voluntary settings, 27% statutory, 18% private and 26% Christian social service settings indicated that their agencies were willing to include religion and, or, spirituality in their primary work setting but were unsure how to do so.

Additionally, 18% of the participants who worked in voluntary settings, 18% statutory, 29% private and 63% Christian social service settings indicated that their agencies provided a genuine inclusion of both spirituality and religion in their agency setting (Table 30).
Finally, 26% of the participants who worked in a voluntary setting, 27% statutory, 20% private and 16% Christian social services indicated that their agencies provided a tokenistic model of inclusion (Table 33).

Overall, the social workers' agencies, primary work settings are likely to have a less favourable approach to integrating religion and, or, spirituality than the social workers in all settings other than Christian social services. It is also likely that context has implications for the participants and whether they feel supported to include religion and, or spirituality in varying primary work settings and have the agencies endorsement to do so.

Table 33: Cross Tabulation of Primary Work Setting by Participants' Perception of their Agencies Approach Towards Integrating Religion and, or, Spirituality in Practice for the Aotearoa New Zealand Sample (N= 168).

<table>
<thead>
<tr>
<th>Perceived Agencies Approach Towards Integrating Religion and, or, Spirituality in Practice</th>
<th>Voluntary n=34</th>
<th>Statutory n=90</th>
<th>Private n=34</th>
<th>Christian Social Services n=19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Willing to include both religion and, or, spirituality but unsure how to</td>
<td>5 (15)</td>
<td>24 (27)</td>
<td>6 (18)</td>
<td>5 (26)</td>
</tr>
<tr>
<td>A genuine inclusion of spirituality and, or, religion occurring</td>
<td>6 (18)</td>
<td>16 (18)</td>
<td>10 (29)</td>
<td>12 (63)</td>
</tr>
<tr>
<td>A tokenistic model of inclusion occurring</td>
<td>9 (26)</td>
<td>24 (27)</td>
<td>7 (20)</td>
<td>3 (16)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many approaches as appropriate. The Ns and percentages reflect overlapping categories.

Participant's definitions of spirituality and religion

This survey also explored the ways that the participants personally understood the terms spirituality and religion. Definitions of spirituality and religion were provided at the beginning of the survey instrument so that participants would have common meanings for the terms when completing the survey. To explore the participants understanding of the terms they were asked to identify the descriptors (e.g. meaning, purpose, faith and community) that they relate to the concepts of spirituality and, or, religion apart from the predefined definitions provided.
The participants identified: (83%) personal, (83%) values, (82%) meaning, (82%) belief and (73%) purpose as the top five descriptors associated with spirituality. The top five descriptors associated with religion identified by the participants were (79%) prayer, (77%) belief, (76%) organisation and scripture (73%), fellowship (73%) and faith (73%) (Table 34).

The descriptors least associated with religion by the participants were (26%) meditation, (44%) miracles and (44%) ethics. The descriptors least associated with spirituality were (11%) organisation, (19%) sacred texts and miracles (24%) and scripture (24%) (Table 34).
Table 34: Frequency Distribution of Concepts Associated with Religion and, or, Spirituality for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Concepts Associated with Religion and, or, Spirituality</th>
<th>Association with Religion</th>
<th>Association with Spirituality</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n (%)</td>
<td>n (%)</td>
</tr>
<tr>
<td>Meaning</td>
<td>93 (55)</td>
<td>138 (82)</td>
</tr>
<tr>
<td>Ethics</td>
<td>74 (44)</td>
<td>105 (63)</td>
</tr>
<tr>
<td>Ritual</td>
<td>116 (69)</td>
<td>55 (33)</td>
</tr>
<tr>
<td>Organisation</td>
<td>127 (76)</td>
<td>18 (11)</td>
</tr>
<tr>
<td>Belief</td>
<td>129 (77)</td>
<td>137 (82)</td>
</tr>
<tr>
<td>Morality</td>
<td>109 (65)</td>
<td>96 (57)</td>
</tr>
<tr>
<td>Hope</td>
<td>92 (55)</td>
<td>116 (69)</td>
</tr>
<tr>
<td>Values</td>
<td>115 (69)</td>
<td>139 (83)</td>
</tr>
<tr>
<td>Meditation</td>
<td>43 (26)</td>
<td>90 (54)</td>
</tr>
<tr>
<td>Personal Relationship with a Divine or Higher Power</td>
<td>113 (67)</td>
<td>112 (67)</td>
</tr>
<tr>
<td>Personal</td>
<td>87 (52)</td>
<td>139 (83)</td>
</tr>
<tr>
<td>Prayer</td>
<td>132 (79)</td>
<td>77 (46)</td>
</tr>
<tr>
<td>Purpose</td>
<td>86 (51)</td>
<td>122 (73)</td>
</tr>
<tr>
<td>Miracles</td>
<td>74 (44)</td>
<td>41 (24)</td>
</tr>
<tr>
<td>Scripture</td>
<td>123 (73)</td>
<td>41 (24)</td>
</tr>
<tr>
<td>Community</td>
<td>107 (64)</td>
<td>68 (41)</td>
</tr>
<tr>
<td>Faith</td>
<td>123 (73)</td>
<td>98 (58)</td>
</tr>
<tr>
<td>Sacred Texts</td>
<td>103 (61)</td>
<td>32 (19)</td>
</tr>
<tr>
<td>Discipline</td>
<td>96 (57)</td>
<td>57 (34)</td>
</tr>
<tr>
<td>Fellowship</td>
<td>122 (73)</td>
<td>66 (39)</td>
</tr>
<tr>
<td>Other</td>
<td>25 (15)</td>
<td>40 (24)</td>
</tr>
</tbody>
</table>

Note: Participants were asked to select as many attitudes as appropriate. The Ns and percentages reflect overlapping categories.

A number of descriptors were identified by participants as applicable to both spirituality and religion not significantly differentiated between the two terms. Participants identified belief,
morality, hope, values, and personal relationship with a divine or higher power, miracles and faith with both spirituality and religion to similar degrees (Table 35).

Conversely, a number of descriptors were associated with both terms but to a lesser or greater degree as evidenced in Table 35. The descriptors that were significantly different and that identified more favourably with religion than spirituality are prayer ($p<0.001$); scripture ($p<0.001$); fellowship ($p<0.001$); sacred texts ($p<0.001$); ritual ($p<0.001$ Level) and organisation ($p<0.001$). The descriptors identified to relate more significantly to spirituality than religion are meditation ($p<0.01$); personal ($p<0.01$); meaning ($p<0.01$) and purpose ($p<0.01$ Level).
Table 35: Cross tabulations and Chi square tests of Concepts Associated with Religion and, or, Spirituality for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Concepts Associated with Religion and, or, spirituality.</th>
<th>Association with Religion</th>
<th>Association with Spirituality</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>Mean</td>
</tr>
<tr>
<td>Meaning</td>
<td>168</td>
<td>1.44</td>
</tr>
<tr>
<td>Ethics</td>
<td>168</td>
<td>1.55</td>
</tr>
<tr>
<td>Ritual</td>
<td>168</td>
<td>1.31</td>
</tr>
<tr>
<td>Organisation</td>
<td>168</td>
<td>1.24</td>
</tr>
<tr>
<td>Belief</td>
<td>168</td>
<td>1.23</td>
</tr>
<tr>
<td>Morality</td>
<td>168</td>
<td>1.35</td>
</tr>
<tr>
<td>Hope</td>
<td>168</td>
<td>1.45</td>
</tr>
<tr>
<td>Values</td>
<td>168</td>
<td>1.31</td>
</tr>
<tr>
<td>Meditation</td>
<td>168</td>
<td>1.74</td>
</tr>
<tr>
<td>Personal Relationship with a Divine or Higher Power</td>
<td>168</td>
<td>1.33</td>
</tr>
<tr>
<td>Personal</td>
<td>168</td>
<td>1.48</td>
</tr>
<tr>
<td>Prayer</td>
<td>168</td>
<td>1.21</td>
</tr>
<tr>
<td>Purpose</td>
<td>168</td>
<td>1.49</td>
</tr>
<tr>
<td>Miracles</td>
<td>168</td>
<td>1.56</td>
</tr>
<tr>
<td>Scripture</td>
<td>168</td>
<td>1.26</td>
</tr>
<tr>
<td>Community</td>
<td>168</td>
<td>1.36</td>
</tr>
<tr>
<td>Faith</td>
<td>168</td>
<td>1.26</td>
</tr>
<tr>
<td>Sacred Texts</td>
<td>168</td>
<td>1.38</td>
</tr>
<tr>
<td>Discipline</td>
<td>168</td>
<td>1.42</td>
</tr>
<tr>
<td>Fellowship</td>
<td>168</td>
<td>1.27</td>
</tr>
<tr>
<td>Other</td>
<td>168</td>
<td>1.85</td>
</tr>
</tbody>
</table>

Note: The Ns, means and standard deviations are based on valid responses. Significance Levels: ns (not significant); * (p<.05); ** (p<.01); *** (p<.001).

Participants were also asked questions about the appropriateness of using the predefined definitions in Aotearoa New Zealand. A majority of the (86 %) participants answered affirmatively to the suitability of the provided definitions and 9% believed they are not suitable for use in New Zealand. A large percentage 77% of the participants also felt that the concept of spirituality can be separated from religious understandings and 17% felt it could not be separated.
Referrals to spiritual and, or, religious leaders

Participants were asked a number of questions about the use of referrals to religious and, or, spiritual leaders. In response to a question about whether or not the participants had made referrals, 63% of the participants reported that they had referred clients to religious and, or, spiritual leaders (Table 36).

Table 36: Frequency Distribution of Participants Responses to Making Referrals to Spiritual and, or, Religious Leaders for the Aotearoa New Zealand Sample (N=168).

<table>
<thead>
<tr>
<th>Have you ever referred a client to a clergy person or other religious or spiritual helper or leader?</th>
<th>Yes</th>
<th>No</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever referred a client to a clergy person or other religious or spiritual helper or leader?</td>
<td>106</td>
<td>62</td>
<td>168</td>
</tr>
<tr>
<td></td>
<td>(63)</td>
<td>(37)</td>
<td>(100)</td>
</tr>
</tbody>
</table>

Participants were also asked if they perceived the involvement of religious and, or, spiritual leaders in interventions with clients to be appropriate: 41% agreed strongly/agreed that this is appropriate whilst 17% disagreed/strongly disagreed. Additionally, 39% indicated that assessment for referral to religious and or spiritual leaders is appropriate and, or, necessary whilst 35% felt this was not necessary or appropriate (Table 37). The participants were also asked whether they felt overall it was appropriate to involve religious and, or, spiritual leaders in work with clients 7% indicated that it is never appropriate, 11% that is seldom appropriate, 27% that it is occasionally appropriate, 54% sometimes appropriate and 2% indicated that it is always appropriate.
Table 37: Frequency Distribution of Other Practice Issues Involving Referrals to Spiritual and, or Religious Leaders for the Aotearoa New Zealand Sample part a (N=168).

<table>
<thead>
<tr>
<th>Involving Religious and, or, Spiritual Leaders</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment for referral to religious and, or, spiritual leaders is appropriate and, or, necessary for clients</td>
<td>18 (11)</td>
<td>40 (24)</td>
<td>45 (27)</td>
<td>58 (35)</td>
<td>7 (4)</td>
</tr>
<tr>
<td>Involving religious and, or, spiritual leaders in intervention with clients in appropriate</td>
<td>10 (6)</td>
<td>18 (11)</td>
<td>68 (41)</td>
<td>60 (36)</td>
<td>9 (5)</td>
</tr>
<tr>
<td>It is appropriate to involve religious and, or, spiritual leaders in work with clients</td>
<td>12 (7)</td>
<td>18 (11)</td>
<td>45 (27)</td>
<td>90 (54)</td>
<td>3 (2)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.

Amato von Hemert (1994) suggested social work ethical codes include encouraging client’s use of religious sponsored services. Furman and Fry (2000) recognised that this can help broaden the client-in-environment paradigm and provide an opportunity for a more holistic view of clients.

Other authors have however, identified a number of barriers to collaboration between social workers and religious and or spiritual leaders as negative perceptions of clergy and differences of values between social workers and religious spiritual leaders (Hong and Wiehe, 1974; Furman and Chandy, 1994).

To explore these issues participants were asked a range of questions about differences of beliefs and values. Additionally, participants were asked about any trust or confidence issues they may have about making referrals to clergy.

In response to the question about whether or not referrals to religious leaders are prevented because of problems with values or beliefs, 58% indicated that at times problems do occur that prevent referrals because of differences in beliefs or values between social workers and
religious leaders. A further 56% indicated that at times differences of beliefs or values between social workers and spiritual leaders prevented referrals. In response to questions about trusting and having confidence in religious and, or, spiritual leaders, 48% of the participants indicated that at times they have lacked trust or confidence in religious leaders which has prevented referrals and 38% indicated that at times a lack of trust in spiritual leaders has prevented referrals (Table 38).

Conversely, a number of participants felt that problems never occurred that prevented referrals to religious and or spiritual leaders in the above areas whilst less than 10% felt that differences of beliefs, values and a lack of trust or confidence always prevent referrals (Table 38).

Table 38: Frequency Distribution of Other Practice Issues Involving Referrals to Spiritual and, or, Religious Leaders for the Aotearoa New Zealand Sample part b (N=168).

<table>
<thead>
<tr>
<th>Other practice issues involving referrals to religious and, or, spiritual leaders/helplers</th>
<th>Never</th>
<th>Seldom</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do problems concerning differences of beliefs or values between social workers and religious leaders prevent referrals to religious leaders</td>
<td>33 (20)</td>
<td>33 (20)</td>
<td>43 (27)</td>
<td>50 (31)</td>
<td>3 (2)</td>
</tr>
<tr>
<td>Do problems concerning differences of beliefs or values between social workers and spiritual leaders prevent referrals to spiritual leaders</td>
<td>32 (21)</td>
<td>34 (22)</td>
<td>43 (28)</td>
<td>43 (28)</td>
<td>3 (2)</td>
</tr>
<tr>
<td>Has a lack of trust or confidence in religious leaders prevented you making referrals to religious leaders</td>
<td>54 (33)</td>
<td>24 (15)</td>
<td>38 (23)</td>
<td>41 (25)</td>
<td>5 (3)</td>
</tr>
<tr>
<td>Has a lack of trust or confidence in spiritual leaders prevented you making referrals to spiritual leaders</td>
<td>64 (39)</td>
<td>33 (20)</td>
<td>32 (20)</td>
<td>29 (18)</td>
<td>3 (2)</td>
</tr>
</tbody>
</table>

Note: Percentages and Ns are based on valid responses. Missing cases are excluded.
Taha Wairua and New Zealand Social Policy

Challenges to incorporate spirituality as a legitimate area of concern for social work in Aotearoa New Zealand have come most strongly from Tangata Whenua. In 1988 authors challenged the Royal Commission on Social Policy about the necessity of incorporating attention to spirituality within social policy in New Zealand (Jenkins, 1988; Benland, 1988). When participants were asked whether they felt this had been achieved to varying degrees 12% felt there has been no inclusion, 48% some inclusion, 30% were unsure, and 8% believed there is significant inclusion of Taha Wairua (spirituality) included in social policy.

Conclusion

In this chapter the quantitative findings from NZIRSSOWK I the first stage of this investigation, have been presented. These findings relate to the role of religion and, or, spirituality in Aotearoa New Zealand social work. As such they provide a wide range of quantitative information pertaining to the topic that will provide a sound basis for future research. Furthermore, as the findings were generated using an adapted instrument it leads the way for comparative cross country studies in which Aotearoa New Zealand considerations can be given a voice within the international research community.
Chapter 6: Beneath the Surface - Part One

In this chapter findings from the qualitative (NZIRSSOWK I) survey are presented. The survey included nine qualitative questions. These provided participants with the opportunity to comment and further elaborate on a number of areas that the quantitative survey had focussed on in the collection of data. Each question related to various sections within the survey instrument. The questions were open-ended and intentionally broad to allow for flexibility of responses. Each section of the survey explored different aspects of spirituality and religion in relation to social work. Such aspects included; spiritual and, or, religious assessment (appropriateness), spiritual and, or, religious helping interventions, referrals to spiritual and, or, religious leaders, religious and, or, spiritual content in social work education, personal spiritual and, or, religious experiences, concepts and definitions for religion and, or, spirituality and Aotearoa New Zealand contextual concerns particularly related to conceptualising spirituality, Taha Wairua and social work inclusion.

A descriptive summary approach (Kreugar, 1998) has been utilised to present these findings. This approach outlines the question then provides a summary description and quotes from the participants that highlight the findings. The findings are presented according to six overall categories that include: practice issues; educational content in the social work curriculum; definitions and concepts for spirituality and religion; participants' experiences and perceptions of spirituality and religion; inclusion of Māori spirituality in practice and areas for future discussions. For each category the themes that emerged from the participants' comments are outlined. Additionally, statistical information for each question has been included to give the reader an idea of the level of participant contribution to the question and associated demographic information to highlight the participants' context and their particular identification with spirituality and, or, religion.

Some participants indicated that they found aspects of the quantitative section of the survey difficult to answer. This difficulty involved the requirement to provide only yes or no answers in response to the appropriateness of varying practice interventions. It was felt that often the appropriateness of a particular spiritual and, or, religious intervention or assessment needs to
be ascertained on a case by case basis. An overall answer was considered difficult to provide about the appropriateness of using varying assessments and interventions for social work in general relative to spirituality and, or religion within their social work practice and that the appropriateness of each depended on the client and context. Providing the opportunity to comment further via an open ended question provided a space for participants to highlight some of their concerns, experiences and reflections.

One participant stated:

As I have said it is contextual. It is not appropriate for social workers to cross boundaries and self disclose or preach when intervening in a person's life. If the client and social worker are both religious and this is out there it may be appropriate to cross such ground however the worker needs to be very clear about their purpose and boundaries! (30-40 year old female NZ European child and family social worker).

Another participant reflected:

These questions are about social workers practice. If social worker is client focused then any of the questions could probably be answered in the affirmative if it is led by the client and not by the social worker. If the social worker is directing the inclusion of religious or spiritual component as a tool then there is doubt raised about the appropriateness. I found answering these questions as directed difficult as often I wanted to respond sometimes for some clients. The questions pose a black or white response I gave up answering the questions at times as a sometimes, never, seldom etc response would have suited how I wanted to respond) (50-60 year old female NZ European children and family social worker).

Practice Issues

Participants were provided with two open ended opportunities to comment further about specific practice issues. The purpose of which was to obtain further comments about assessment and intervention issues in practice. One of these questions also provided an opportunity to comment about spiritual and, or, religious referrals. The questions stated:

---

27 When referring to child and family social workers for the participant's responses throughout this chapter I am not indicating an association with the Department of Child Youth and Family. I have not separated participants in this field of practice into statutory, private or voluntary categories.
1. Please use the space below to make any additional comments you would like about the appropriateness of including religious and, or, spiritual practices in intervention and, or, assessment with clients.

2. Please use the space below to make any comments you would like about assessment and referral as it relates to the topic of religion and, or, spirituality.

Of the 168 completed surveys 113 participants (67%) contributed additional comments about assessment and, or, intervention as requested in response to question one and two above. The participants who provided qualitative feedback represented varying demographics across fields of practice, religious and non-religious affiliations, and primary work settings. Of the 113 who responded to this question, 66 worked with children and families; 15 hospital social work; 29 within mental health; 9 in disability services; 3 were social work educators; 9 with vulnerable populations; 10 worked with the elderly and 5 with Corrections. Thus feedback was provided from a broad range of practice contexts.

Additionally, participants who responded to this question included 66 participants with a singular religious affiliation and orientation (Christian); 26 with a singular religious affiliation or orientation (non-Christian); 12 with a singular non-religious affiliation or orientation such as agnosticism or atheism; 9 with multiple religious affiliations or orientations (i.e. any combination of differing religious affiliations such as Christian and Hinduism); 2 with multiple non-religious orientations affiliations and 10 had no affiliation or orientation. Additionally, 12 worked in voluntary settings; 60 within statutory settings; 23 in private settings and 15 within a Christian Social Service context. In response to question two above 66 of the participants (41%) provided additional comments. Participants who responded consisted of 40 working with children and families; 9 in hospital social work; 16 within mental health; 9 with vulnerable populations; 5 with the elderly and 4 in Corrections. Additionally, 8 worked in voluntary settings; 33 statutory; 13 voluntary and 8 in Christian Social Services.

Ten themes emerged from the participants comments and are shown in Table 39. Each theme is listed with the corresponding number of participants who commented. Overall 113 participants responded to both questions. Each theme is discussed in the following section.
Table 39: Frequency distribution of themes for practice issues from participants comments NZIRSSOWK

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Service user led approach to including spirituality and or religion in practice.</td>
<td>37 (33)</td>
<td></td>
</tr>
<tr>
<td>2) Concerns about imposing beliefs (prosyletising).</td>
<td>30 (27)</td>
<td></td>
</tr>
<tr>
<td>3) Inclusion differences because of practice setting or client issue.</td>
<td>26 (23)</td>
<td></td>
</tr>
<tr>
<td>4) Client initiation of attention to spirituality and, or religion in practice setting.</td>
<td>24 (21)</td>
<td></td>
</tr>
<tr>
<td>5) Spiritual and religious referral</td>
<td>21 (19)</td>
<td></td>
</tr>
<tr>
<td>6) Inclusion a requirement of cultural competency</td>
<td>17 (15)</td>
<td></td>
</tr>
<tr>
<td>7) Spiritual assessment should be included</td>
<td>14 (12)</td>
<td></td>
</tr>
<tr>
<td>8) Spiritual and or religious knowledge base required for practice</td>
<td>12 (10)</td>
<td></td>
</tr>
<tr>
<td>9) Binary between spirituality and religion</td>
<td>9 (8)</td>
<td></td>
</tr>
<tr>
<td>10) Social worker self disclosure of own religious and or spiritual positioning</td>
<td>8 (7)</td>
<td></td>
</tr>
</tbody>
</table>

Practice issues theme one: A service user led approach to including spirituality and or religion in practice

Thirty-seven participants commented about the need to ensure that attention to spiritual, and or religious practice issues must be led by the client. A level of concern is evident about the propensity to violate the client’s rights in this area particularly if the social worker directs an exploration of this topic with clients. One participant stated:

*Religious spiritual beliefs must at all times be the supported persons lead. It is not social workers job to make any recommendations or influence however if information is sought by the person appropriate referral to field. For social worker to engage would be a conflict of interest and misuse of power inequality in*
the relationship (40-50 year old female NZ European intellectual disability social worker).

And another commented:

*In any of these the practice is to be client led i.e. assessing the clients felt need to explore and apply spiritual practices, culturally appropriate and focus on the client's needs with the social worker only a facilitator of access* (60-65 year old female NZ European hospital social worker).

Closely related and included with this were comments that illustrate a strong awareness of the need to ensure the client’s right to self determination. The concept of client self determination is a core value within professional social work practice (Chenoweth and Mc McAuliffe, 2007).

*I believe in the client’s right to self determination. If they sought my help in anything spiritual I may offer an opinion depending on the circumstances. My faith is for me and is a source of strength and wisdom. I would never use my professional position to take any sort of advantage over clients* (60-65 year old male NZ European children and family social worker).

*I engage in religious spiritual intervention according to what the client indicates is needed and is comfortable for them. I.e. self determined and client centred practice. I would not initiate a spiritual or religious practice without the client indicating this is what they want and what assists them* (40-50 year old female NZ European drug and alcohol social worker).

Participants indicated that social workers should not introduce spiritual or religious issues in their work with clients as this would breach the client’s right to self determination.

Participants suggested that it is more appropriate for clients to initiate discussions about religion and, or, spirituality or rely on clear indicators from the client that this should be included if important to the client. As a result a level of uncertainty was evident amongst the participants and strong views about not introducing spirituality and, or, religion into assessment unless clients initiate this first by giving some verbal or non verbal indicators to show that this is appropriate and, or, important for the client.

Overall, this concern relates to the next theme discussed by the participants: proselytising.
Practice issues theme two: Concerns about imposing beliefs on clients (prosyletising)

Proselytising is defined as an act of persuading someone rigorously to abandon one particular religious position in favour of the religion of the person doing the persuading.

Canda and Furman (1999), identified concerns about proselytisation and violating clients rights to self determination as key reasons for opposing the inclusion of religion with clients. As such they commented that opposition was raised because “Involving religion increases the danger of proselytisation and violation of clients’ self determination” (Canda and Furman, 1999: 64). Netting, Thibault and Ellor (1999) recognised that it is never appropriate to proselytise or promote one’s own particular religious position. Walsh (1999) also cautions against proselytising in professional practice.

The participants in this survey also identified the issue of proselytising. Thirty participants raised concerns about the propensity for social workers to impose their spiritual and, or, religious belief systems on clients. This theme received the highest textual attention in the participants’ comments for practice issues with 27% of the coverage in this area. Who should direct the inclusion of spirituality and, or, religion was an overarching concern for the social workers in this study. It was perceived that the introduction of spirituality and, or, religion in practice may equate to proselytising or at least raise the danger of this occurring.

This concern was often expressed with an acute awareness of how this issue could impact upon their practice. The participants acknowledged the danger of violating the client’s right to self determination when working with spiritual and, or, religious issues. A number of comments were provided about proselytising or imposing one’s own beliefs onto clients. The most pertinent are as follows:

I believe that using a professional client relationship for the purposes of proselytising is unethical and inappropriate. Negotiating an understanding of the client’s spiritual belief system and religious expression could be highly valuable to an intervention depending on circumstances and expressed client need. It is important that this process be conducted respectfully and at the client’s pace. Also I believe it is important for a professional to be able to provide a simple overview of their own spiritual belief system if a client asks about it also (30-40 year old male NZ European children and family social worker).
Discussion about spirituality religion is important when it is important to the client. It is never okay to try to get clients talking about your own personal beliefs nor is it okay to try to make them practice your practices. It also depends on the setting this is used in and should always be led by the client (20-25 year old male NZ European hospital social worker).

I think it is important to be respectful of clients' spiritual religious beliefs but not to push your own beliefs on them. I'm happy to discuss my personal beliefs with clients and have a spiritual discussion with clients if they initiate the topic. Some of the behaviours listed would be more appropriate interventions from a religious leader rather than a social worker (25-30 year old female NZ European child and family social worker).

To an extent the issue of proselytising is addressed within the Aotearoa New Zealand Association of Social Workers Code of Ethics (2008) which states:

A member’s moral position or religious convictions do not override their duty to ensure client independence. They will maintain professional objectivity, advise clients of any potential and relevant personal, moral or religious conflict, and if indicated, offer appropriate referral to another social worker (ANZASW, 2008: 8).

Furthermore, the participants involved in this study exhibited a high level of awareness about the danger of proselytising and were clear about the inappropriateness of this.

Practice issues theme three: Inclusion differences because of differences in practice setting or nature of client issue.

Despite the concerns to ensure the client's right to self determination, concerns about imposing beliefs on clients and ensuring a service user led approach to the topic of spirituality and, or, religion, in practice the participants recognised that inclusion levels can also be influenced by two additional factors. The additional factors relate to two areas: firstly agency setting and secondly the nature of the clients presenting problems.

Twenty-six participants indicated that the level of willingness to introduce and include spirituality and, or, religion in practice was often influenced by their primary work setting particularly whether or not this setting provided a level of endorsement for religious and, or, spiritual beliefs, or whether or not the participants perceived a negative or positive agency disposition towards the topic. For example, participants working within the Christian social
service sector perceived a higher level of endorsement than participants working in statutory settings.

Three participants stated:

*What I do find appropriate in one social work setting e.g. cyfs is not necessarily appropriate in former work setting where as part of Christian agency I felt free to use Christian belief and practice e.g. prayer for some clients also was in different role counselling rather than just social work* (40-50 year old female NZ European children and family social worker)

*I work for a Christian child and family support service which encourages social workers to understand their own beliefs and how these can impact both positively and negatively when working with clients* (40-50 year old male NZ European children and family social worker).

*This is an essential part of who I am and also the organisation that I work for. My responses would flow from careful listening and reflecting on where the client is at and mutual agreement on the value/possibility inherent in spiritual religious foci* (50-60 year old female NZ European children and family social worker).

Alternatively, participants in statutory contexts expressed a need to be more careful in this area. This may reflect some tensions around maintaining the separation between church and state and, or, the impact of secularisation.

*I am a statutory social worker and as such need to be very careful in this area. However I have joined with Māori clients in karakia at the start and end of FGC Hui etc. I have also participated when Grace is said. I believe it is important to be respectful of clients. If clients raise issues of religion or spirituality with me and ask my opinion, again I would discuss but would not consider it appropriate for me to impose my views* (50-60 year old female NZ European children and family social worker).

*Beliefs value policy practices and expectations of employers determine some of the practices etc of workers. Statutory social workers in a position of power need to tread very warily when engaging in conversation information exchange involving spirituality and religion* (40-50 year old female NZ European children and family social worker).

Additionally, two participants felt that it is seldom included in statutory settings:

*I work for CYFS religion and spirituality is never part of the equation when working with clients families unless it forms part of the notification* (30-40 year old female British, Statutory social worker).
As a CYFS social worker I can’t buy into much of the client’s whanau’s religion, spirituality although I do acknowledge its importance (50-60 year old female NZ European Statutory social worker).

Three participants did identify that in some cases in statutory settings some approaches to intake and initial assessment required an exploration of the client’s religious beliefs and was incorporated into assessment procedures. Often this requirement relates to the nature of the work being undertaken such as the need to ascertain the beliefs of caregivers when undertaking child placement.

In my limited experience seven years I have worked in a few different fields with many issues I have noticed that we tend to ask about religion and spirituality in assessment and referral if perceived by whom policy maker writer for referral forms as relevant for example when I worked in foster care we asked about these issues as we did when working in the refugee to migrant service however when working with children and families instability death etc it was not necessarily asked about or discussed there seems to be an unspoken assumption that religion spirituality might only matter in some situations (50-60 year old female NZ European children and family social worker).

Furthermore, participants recognised that sometimes there is a natural tendency to consider and, or, include spirituality and, or, religion because of the nature of the client’s situation and issues involved such as when faced with terminal illness, bereavement and abortion. Holloway (2007) observes that confronting issues around mortality can often raise existential issues. These issues for some people become highly significant issues to be resolved.

It depends entirely on circumstances. In dealing with terminally ill children and young people I was often involved in both spiritual and religious discussions with clients and their families. Similarly when assessing foster and adoptive parents, exploring religious and spiritual views is important. Otherwise I would only explore if client raised the issue or client was Māori or PI (50-60 year old female British children and family social worker).

Very much dependent on the client’s culture and belief system. I have often discussed death with suicidal young people and that experience has influenced my responses (50-60 year old female British youth social worker).

Throughout the above there is a tension around who should initiate attention to this topic, the client or the social worker.
Practice issues theme four: Client initiation of attention to spirituality and, or, religion

Who should introduce attention to religion and, or, spirituality in practice is a contentious issue. On one hand the participants recognise the need to allow a service user led approach in this area as identified in theme one on the other social workers who take this approach may be compromising commitments to anti-oppressive approaches to practice. Although this theme is similar to theme one it varies in that it evidences a level of reductionism under the guise of self determination.

Moss (2005a) reminds social workers of the implications of the Human Rights Act 1998 particularly sections 1 and 2 of Article 9 when addressing the question about who should introduce religion and, or, spirituality within the therapeutic relationship. Moss (2005a) states:

> The implications of the Human Rights Act are far reaching, and can impact upon every aspect of human service practitioner’s work. To take these two sections seriously lays a heavy burden of responsibility upon the worker. First of all to recognise that the issues of religion and spirituality are important, the demands of best practice mean that social workers must be willing to take the initiative and test out the extent to which these issues are important to the people with whom they are working. Secondly, human services practitioners must respond sensitively and appropriately when such issues are brought forth (Moss, 2005a: 31; emphases added).

Additionally, 24 participants in this study commented about the importance of clients taking the initiative to raise spiritual and, or, religious issues in practice.

Participants stated:

> Discussion or reflection on spiritual practices etc are appropriate only if initiated by the client. Also it is important that the focus is on the client beliefs/practices and is not coloured by the practitioner's beliefs/practices (50-60 year old female NZ European children and family social worker).

> I would never raise the issue of spirituality or religion with a client because I feel this would undermine the work that is happening by trying to find a solution meaning or purpose which I don't feel is my role. Also a lot of clients I work with have been harmed spiritually and have been the targets of people trying to rescue them by trying to get them to find God. If the client raises the issue of religion or spirituality I am more than happy to explore it and use it as a tool for strength if appropriate. I am comfortable in my own spirituality and think it is very valid if a client chooses to explore these issues (30-40 year old female NZ European child and family social worker).
I am more likely to include religious and, or, spiritual practices in intervention with clients if raised by the clients themselves first (50-60 year old female NZ European mental health social worker).

This raises questions about clients' level of comfort or willingness to initiate discussions about spirituality and, or, religion with their social workers. Two participants recognised that they will look for indications of the client's propensity for the inclusion of spirituality and, or, religion by observing the clients surroundings at home:

I feel more equipped to respond to clients who raise religion or spirituality as a topic and would invite discussion only if there were signs around the house of spiritual or religious beliefs or involvement (40-50 year old female NZ European hospital social worker).

In my practice I find it helpful to get a feel for where clients are at in the religious/spiritual life by chatting and observing their environment. Often it is possible to pick up pointers in this way. I believe it is more appropriate to be guided by the client in this way rather than “jumping in” with my own belief system (50-60 year old female Māori/Samoan children and family social worker).

Another participant recognised that failure to seek religious and, or spiritual information from clients may be detrimental:

I now work in mental health and do supports needs assessments for accommodation. I ask a standard question about spirituality in my social work and this often was the most useful topic of discussion for the client yet would not have been addressed if I hadn't initiated it through my question although at times a client would raise the issue and an important opportunity for healing empowerment may have been lost if I couldn't respond (40-50 year old female NZ European mental health social worker).

Practice issues theme five: Spiritual and religious referral

Another practice issue elaborated on in comments relates to the area of spiritual and religious referrals. In relation to referrals, 21 participants provided additional comments for this theme. The participants recognised that often the appropriate approach to intervention in this area is referral:

When working holistically with a person it is important to acknowledge the spiritual component. However, people's spiritual beliefs are varied and complex. It is important to know their spiritual beliefs but I feel from this point they may be referred on to whatever support is available for their beliefs (40-50 year old female NZ European Corrections social worker).
In comments, four participants recognised that often they were not the appropriate people to deal with religious and, or, spiritual interventions due to lack of knowledge about spirituality and religion:

Difficult section. The issue of my knowledge suitability to give treatment in spirituality. Very likely I would refer to help outside who had better knowledge than me" (30-40 year old male NZ European mental health social worker).

I would be very careful not to involve my personal belief system in interventions with clients but would be guided by them at all times if I was asked about my personal beliefs practices I would answer however would again be careful not to impose my beliefs on them. I would never try to interpret any of their own spiritual experiences but would encourage contact or assist client to seek a range of options for those who might be qualified to assist (40-50 year old female NZ European child and family social worker).

It is my opinion that it is important social work practitioners ask clients if they have unmet religious and, or, spiritual needs during the assessment process. I strongly believe intervention of a religions and, or, spiritual nature should be undertaken by professionals in these fields and the extent of intervention by social work practitioners should be referral to such experts (40-50 year old female NZ European mental health social worker).

As with practice issues in general the theme of self determination and service user leading is important when making referrals one participant acknowledged this stating:

I do not believe that religious/spiritual practices should be encouraged in intervention/assessment by the social worker. Appropriate referral on is a fine and should be offered/explained to client if necessary. This should be client-driven (30-40 year old male NZ European hospital social worker).

Two participants recognised that social workers should refer on in this area as it could involve role conflict. Additionally, it is important to recognise the limits of the social worker’s personal ability to work in this area:

In my clinical work (trauma counselling) I frequently engage clients in relation to religious/spiritual life elements. I only take this as far as they wish to go and refer on if I get to a place of feeling unable to go further. I would inform clients of all in this process (40-50 year old female NZ European hospital social worker).

Another participant recognised the potential for value conflict in this area:

If spiritual religious values emerges and is important the social worker needs to be respectful but engage someone with knowledge for support unless their values are the same (30-40 year old female NZ European child and family social worker).
Additionally, dependent upon culturally appropriate practice some participants recognised the importance of religious and, or, spiritual leaders for Tangata Whenua and the importance of referring on to the appropriate cultural spiritual leaders such as Tohunga.

Religious or spiritual needs should be led and dictated by the client/Tangata Whaiora and their family/whanau. Clients/Tangata Whaiora usually identify a key individual that will have an association with the whanau. I.e. minister Tohungas that they are familiar with (50-60 year old female Māori hospital social worker).

I would always consider when working with tangata whenua the use of a kaumatua or refer on to a Tohunga (50-60 year old female Māori mental health social worker).

Elsewhere I have questioned the appropriateness of social workers taking a role in Spiritual and, or, religious interventions (Stirling, 2005). On the basis that differing religious and, or, spiritual traditions have leaders who are selected and given endorsement by their respective communities to work in this area whereas social workers necessarily do not. Considering this it may be likely that the appropriate path for intervention is through referrals and collaboration between religious and, or, spiritual leaders and social workers in this area wherever possible. This however is also problematic as authors have observed that there can be a level of mistrust and conflicts between religious leaders and social workers because of differing values and worldviews (Furman and Fry, 2000).

In recent years I have seen the church as a man-made structure with many crippling rituals and have found it very difficult to overlook them. Therefore I would find it difficult for a social worker to encourage any clients into religion spirituality yes but not religion (50-60 year old female NZ European child and family social worker).

To explore issues of referrals further, participants were asked to make any additional comments they would like about referral involving religion and, or spirituality particularly as it relates to assessment.

In response, six of the participants expressed the need for caution when making assessments or referrals in this area partly because this may compromise the client’s right to self determination and partly due to reservations about religious beliefs and the potential for conflict in this area. Participants also observed the need to be more cautious about religion than spirituality:
Because of the very big differences in religious belief and expression I would be very wary of introducing it as part of assessment or referral. Also because of potential for workers religious beliefs to be imposed on clients (40-50 year old female South African hospital social worker).

I would just strongly agree with the statement that spirituality is a fundamental aspect of being human so it is always appropriate to consider the spiritual aspect of the clients circumstances though only with caution and sensitivity to introduce religion or religious practices (30-40 year old female British child and family social worker).

I think it’s fine to ask about spirituality and the role it plays in a person’s life but we need to be more careful about religion there is the potential to alienate clients because of religious differences with their social worker (60-65 year old female NZ European social work education).

Of the 21 participants who made comments about referral 16 raised concerns about religion which they often perceived negatively. The participants had a number of reasons for these concerns. Firstly, three participants felt that including religion in practice with clients has the potential to harm:

I am concerned about some of the questions raised here people involved in the system are often vulnerable with limited choices, to further introduce or recommend seeking religion spirituality is abusive to the person to have some personal spirituality may allow personal development (40-50 year old female NZ European mental health social worker).

I myself do not support practice where the client feels morally responsible to forgive or be good, I don’t like the moral connotations particularly because a lot of the clients I work with portray themselves as bad anyway (30-40 year old female Māori corrections social worker).

I don’t believe in a capricious judgemental God and I don’t believe in sin. I believe that when working with very damaged people the potential to harm them is very great and as a social worker I am trying not to do that (50-60 year old male Māori social work education).

Furthermore, two participants raised concerns about the propensity for value conflicts in this area. Canda and Furman, 1999; Sermabeikian, 1994 and Van Hook, Hugen and Aguilar, 2001 recognised the potential for value conflicts in this area:

I work in DV and abortion counselling often brings up religious spiritual matters women would like support but religion is generally very pro life and pro keeping families together very difficult for women would be helpful to have more supportive religious leaders for referral (40-50 year old NZ European mental health social worker).
Working with pregnancy termination I was asked to get a chaplain to bless the foetus I needed to checkout that this chaplain would not be judging the client i.e. views about termination of pregnancy (50-60 year old female NZ European child and family social worker).

Two participants recognised that religion is often perceived negatively at a larger social level which could prove to be a barrier to inclusion. It was felt that it may be useful to pay attention to the language we use in this area. Crisp (2008) suggests a framework for introducing spirituality that promotes the use of employing language that avoids some of the pitfalls associated with using religious terminology.

Referring to coping strategies or belief systems is preferable than words like religion or spiritual practices which can scare off clients if they are presented with them and are not ready the term higher power is used often in addictions and has become comfortable for practitioners and clients alike in general (30-40 year old female NZ European child and family social worker).

Very many people are made uneasy by the topic religion spirituality today I think it would provide another barrier to social work intervention with reluctant clients if social workers were to bring a religious spiritual dimension to every piece of work and for every client (50-60 year old female NZ European alcohol and drug social worker).

One participant also raised the issue of proselytising again in relation to referral and felt that often this is the overarching agenda of the religious leaders involved in referral. Whilst another participant wouldn’t refer on to a number of agencies:

This is a difficult area to integrate into practice well within social work and community development work is spiritual it needs to be closely tied to notions of ethics and respect diversity of beliefs to often use of religion can be inappropriate and a form of recruitment to the beliefs of the social workers own worldview, religious doctrine church (25-30 year old female NZ European child and family social worker).

I do not have any negativity apart from the intrusiveness of the questions and intrusiveness of some religious sectors. Religion/social work often underlines to a person "we know better, we know what is right for you" (40-50 year old female NZ European mental health social worker).

Of the 21 participants who contributed comments about referrals five were positive. One participant felt that as social work is in the best interests of clients we should employ whatever means to assist them. Participants were more positive and open about making referrals:
I believe social work is in the best interest of the client what they need to assist life change if this is required should be achieved whether counselling, therapy or prayer (30-40 year old female NZ European child and family social worker).

I would ask any client if they raised spirituality religion directly with me just what they would like me to do I have no problem in assisting them to contact an appropriate person but I would not counsel them around either topic (40-50 year old female NZ European child and family social worker).

Practice issues theme six: Inclusion a requirement of cultural competency

As well as raising the importance of considering referrals as an important aspect of cultural competency requirements 17 participants commented about cultural competency requirements in general. This aspect also involved another exception to concerns about who should introduce spirituality in practice and if it should be included or not. 14 participants commented about the importance of including spirituality as a requirement of bi-cultural practice with an awareness of the importance of spirituality for Māori.

The current assessment documentation in the area of I work has religious spiritual questions spirituality is an important part of bicultural practice (30-40 year old female NZ European child and family social worker).

Our indigenous people naming Māori always offer karakia (prayer) as an integral part of daily life around meeting and also eating. It would be inappropriate to ask them not to offer karakia. With other ethnicities one has to understand why and the intent of the practice if it was to be that was to be appropriate (50-60 year old female ethnicity unspecified child and family social worker).

Practice issues theme seven: Spiritual assessment inclusion

Overall, 14 participants provided additional comments about including a spiritual assessment with clients. They felt that spirituality should be included but often is not. McDonald and Friedman’s (2002) note there is now an abundant range of standardised assessment tools available specifically designed to assess spirituality and, or, religion. Only one participant reported using a specific assessment tool that included attention to spirituality and, or religion with clients:

In my place of work we have a questionnaire with clients every six months which asks about community support, questions cover where clients get support and what places they might be involved in supporting others including marae cultural groups churches or any other organised context it does not specifically ask about
Another participant recognised that spiritual assessment should be a central aspect of our approach to understanding the client's situation:

*I consider non-judgmental openness about spirituality (and religion within this rubric) to be as essential an aspect of social work psychosocial assessment as any other aspect e.g. mental status, social networks, physical well being, sexuality etc. This assists a holistic assessment of the client. Whether it continues to be part of intervention depends entirely on the client's belief system and the assessment findings* (25-30 year old female NZ European hospital social worker).

**Practice issues theme eight: Spiritual and, or, religious knowledge**

Closely linked to the level of spiritual and, or, religious inclusion and whether or not it is formally included is the participants' recognition that their own level of competency and knowledge of the subject helps determine their ability to include this area or not. 12 participants recognised that often they do not have the required knowledge to proceed in this area. Additionally, some concern was expressed that this can also be influenced by varying perceptions held about religion.

*I have a theology degree but would never profess to be an expert on religious spiritual matters with a client. I believe chaplains are the most appropriate people for a range of religious spiritual matters. As social workers are not formally trained in such things I believe it is dangerous and unethical to work with interventions. However by allowing the client to lead discussion in exploring their own meaning about spiritual matters is okay but that such themes may be client initiated* (40-50 year old female European (other) mental health social worker).

*I believe religion and spirituality to be the fundament of which I am who we are as a person/ people. Therefore my worldview, my person, my interactions with people and crucially my social work practice are influenced by this. Those who dismiss religion and spirituality are equally influenced by this outlook which impacts on their practice. I believe social work practitioners have a responsibility (to themselves to their clients) to be sufficiently self-aware regarding issues of spirituality and religion when interacting with clients. A skilled social worker should be able to ask respectfully about religion/ spirituality issues in assessment and interventions. My knowledge and skill level influences and limits my confidence in this area and I feel this is quite typical in social work practice. I sense an "us and them" attitude i.e. a relative ease when asking clients about religious and spiritual issues when from a culture different from ones own and a quiet ill ease about mainstream Christianity in Aotearoa New Zealand* (30-40 year old female British, child and family social worker).
Practice issues theme nine: Binary between spirituality and, religion

Often in the literature the subject of religion and spirituality are viewed in a binary fashion in opposition to each other. In comments, nine participants provided reflections about the differences between spirituality and religion in the context of framing spirituality positively and religion negatively.

Henery (2003) critiques the binary viewing of spirituality and religion evident in the literature noting that texts carefully distance themselves from religion preferring spirituality. Henery suggests this occurs because spirituality is often presented as individualistic in nature. Henery states:

The spirituality discourse is wrapped up in the dominant discourse of self-identity as a process of continual exploration and self-expression. Here everything is subject to the individual journey of ‘testing and tasting’. In this project, religion is suspect because its beliefs, customs and practices threaten to place limits on individual exploration (Henery, 2003: 1111).

Schneider (2003) suggests a number of positions are held about the relationship between spirituality and religion. Firstly spirituality and religion are strangers at the banquet table; both are considered separate entities unrelated to each other. Secondly the two are rivals if not enemies; each vying for supremacy over the other.

Participants’ comments reflected this binary and the tensions between spirituality and religion.

Religion and spirituality are very different for me. Religion equals a prescribed belief and organised way of experiencing these, power and control. Whereas spirituality is choice, the power and control is the persons engaging in the practice e.g. Meditation (40-50 year old female NZ European alcohol and drug social worker)

I think that some people are bothered by notions of religion more than they are by notions of spirituality. I am comfortable with the idea of religion because I had no religious upbringing. I am a lapsed Baha sort of; my partner is an atheist and our daughter veers between Buddhism and Wicca (40-50 year old female NZ European diverse practice setting).

Spiritual well-being of all clients is paramount. However religion is a different matter. I will only pursue religion when clients initiate discussions about it (50-60 year old female NZ European child and family social worker).
Practice issues theme ten: Social worker self disclosure of own religious and, or, spiritual beliefs

The final theme involving practice issues raised in comments by eight participants evidenced hesitancy about social workers disclosing their own spiritual and, or, religious beliefs with clients. Lines (2007) suggest that spiritually orientated work is unlike other therapeutic approaches which discourage the sharing of personal material with clients. Lines (2007) believes that spiritually orientated work requires the giving of self due to the collaborative aims of the work. Lines (2007) also recognises that this raises the need to be aware of issues around transference and counter transference.

_I would not disclose my personal values or beliefs unless I was asked then only if I thought it was relevant I would never try to influence another’s values and beliefs to do with their spirituality and life values in my social work role (40-50 year old female NZ European child and family social worker)._

Throughout the practice issues commentary a level of wariness about religion is evident and a preference for spirituality. The type of concerns expressed about religion relate to fears about prosyletising. At times however these fears seem to be mitigated by requirements to attend to cultural competency requirements particularly bi-cultural issues. Overall, it is evident that a level of uncertainty exists about how to proceed appropriately in this area.

This uncertainty is likely to be reinforced by the level of attention given to spiritual and, or, religious issues within the social work curriculum in Aotearoa New Zealand.

Spirituality and, or, religion within Social Work Education

The level of knowledge and competency that participants have about religion and, or, spirituality is an important indicator as to whether or not they will integrate spirituality and, or, religion in practice. The level of knowledge required however is problematic: “Constructivist and social construction views argue that no one view of reality can comprehensively cover what a worker needs to know” (Payne, 1997. pp. 31). Social work practitioners working in the area of spiritual/religious assessment cannot be expected to have an in-depth understanding of such a diverse and extensive field of knowledge as that
contained within the traditions and belief systems of clients. They do, however, need to be aware of some of the central tenets of their client’s belief systems and the implications of these for working with them. According to Herman (1999) this should be facilitated at an educational level and provide an opportunity for social work students to gain an understanding of the components and perceptions of various religious traditions but should also provide an environment for students to explore their own development in this area. To explore this issue participants who identified that they had received content on religion and, or, spirituality in their professional social work education were asked to comment on the type of education they had received.

Overall, 56% of the participants provided comments about the nature and content of their social work education in relation to spirituality and, or, religion. Of those who responded 26% have a national diploma in social services or equivalent social work qualification; 30% have a degree in social work and 11% a post qualifying or advanced award in social work.

Additionally, 62% of the participants who responded currently worked in the area of children and families: 15% hospital social work; 25% mental health; 5% Corrections; 12% elderly; 10% vulnerable populations. Furthermore, 52% worked in a statutory setting: 12% voluntary; 21% private and 10% in Christian social services. Importantly, responses are provided from practitioners representative of a wide range of demographics and sources of social work curriculum delivery albeit at a diploma through to post qualifying level within varying institutional contexts. In response to this question five themes emerged and are shown in Table 40 overleaf.
Table 40: Frequency distribution of themes from participants comments about spiritual and religious educational content NZIRSSOWK I (N=94)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Educational content about Māori Spirituality</td>
<td>45 (48)</td>
</tr>
<tr>
<td>2) Spiritual diversity</td>
<td>11 (12)</td>
</tr>
<tr>
<td>3) Religious educational content</td>
<td>11 (12)</td>
</tr>
<tr>
<td>4) Knowledge acquired external to the social work curriculum</td>
<td>5 (5)</td>
</tr>
<tr>
<td>5) Western theoretical approaches to religion and spirituality</td>
<td>4 (4)</td>
</tr>
</tbody>
</table>

Educational content theme one: Māori spirituality

Overall, 52% of the participants indicated that they had received content in their social work education, this is a high figure compared to other countries such as the United States (27%) and Great Britain (24%) (Furman, Benson, Canda and Grimwood, 2005). To gain an understanding of why the Aotearoa New Zealand social work context differs, participants were asked to identify the content they had received.

Forty-five participants who responded identified content associated with cultural competency requirements, particularly as part of Aotearoa New Zealand’s commitment to biculturalism and commitments, to include principles of the Treaty of Waitangi (1840) within social work education. As a result the participants who had received spiritual content in their social work education recognised a focus particularly on Māori spirituality with some acknowledgement of pacific island and other cultural beliefs.

During my study at Massey we spent a little time at a contact course talking about spirituality- how it was an important aspect in many people’s lives that has been paid little heed. We were given 3 articles that were mainly based on Māori spirituality (50-60 year old female Māori/Samoan child and family social worker).
One participant spoke of the attention given to Māori spirituality and no attention given to religion:

_I understand all education Cultural papers I have done including Treaty of Waitangi workshops to be of spiritual content. Te Taha Wairua Spirituality. The capacity for faith and wider communication. Religion no, Spirituality Māori tradition yes_ (50-60 year old female NZ European/British, mental health social worker).

Another commented that the attention given to Māori spirituality highlighted for them the lack of attention given to other belief systems:

_When immigrating to New Zealand I learnt about spiritual issues relating to Māori and Māori concepts embody concepts, the awareness and teaching material was impressive but also highlighted the paucity of awareness relating to a non Māori population_ (40-50 year old female British child and family social worker).

Additionally, four participants reported receiving content about spirituality in relation to Pacific peoples and some comparisons with Christianity:

_Spirituality issues were presented to me in training in regards to understanding better Māori and Pacific Island practices and our social work involvement_ (30-40 year old female Māori child and family social worker).

_Wairua/ spirituality in Māori models of social work practice. Christian based ideals when working with Pacific peoples_ (30-40 year old female Samoan child and family social worker).

Beach and Stewart (2002) caution practitioners and suggest that we should not make assumptions about the level of spirituality or the content of a person’s spirituality based on their association with a specific cultural group as each individual can vary greatly in terms of the depth of and relevance of their spirituality to specific cultural teachings as significant identity differences are likely to have been constructed through processes of assimilation and cross-cultural interchange. One participant recognised the need to acknowledge the variety of adherence that can be present:

_It is valuation/validation of all people. Taha wairua spirituality as the four corners is still an individual choice and level of development. We cannot assume all Māori people wish to follow Tangata Whenua traditional beliefs; we may know it assists in a person becoming whole but that decision is theirs to own_ (40-50 year old female NZ European intellectual disability social worker).
Educational content theme two: Spiritual diversity

A number of authors and social work educators are recognising the need to be more inclusive in the social work curricula taking a spiritual diversity approach; 11 participants of this study commented about receiving what could be considered the presentation of spiritually diverse perspectives in their social work education.

Hugen, Van Hook and Aguiler (2001) suggest a conceptual framework for understanding the various religious/spiritual perspectives as a minimum criterion for the knowledge that practitioners working in this area should have. This includes an understanding of the history of various traditions, the important events within the life cycle of each tradition and an understanding of the perspective held by particular traditions in regards to health, welfare the nature of problems, social issues and well being, the spiritual resources, customs, ceremonies and rituals associated with each tradition and the implications of this for social work practice. Canda and Furman (1999) suggest a framework of understanding that explores the origin and contemporary varieties of each tradition, the basic beliefs attributed to each, the basic values and the implications of the above for social work practice. Social workers need to be aware of the tendency towards reductionism if a lack of knowledge or negative perceptions is present in this area and the possibility of reverting back to deficit based models.

Randerson (2004) recognises that there is a lack of religious understanding within the New Zealand context in general which is more apparent as we become increasingly multicultural. To respond to this issue Randerson (2004) suggests the need to develop programmes that inform and educate New Zealanders about religious and cultural diversity. Nash and Stewart (2005) observe: “Tolerance and encouragement of spiritual diversity is essential so that no single view is placed above others thereby reducing or excluding any” (Nash and Stewart, 2005: 10).

One participant described the implications for them of receiving religious content within their social work training and subsequent development in this area. This also highlighted the effect of having a limited knowledge or experiential basis from which to draw on when faced with religious and, or, spiritual issues in practice:

During my childhood I had minimal exposure to religion and spirituality. Hence at the outset of my social work training I felt uncomfortable when faced with religious rituals etc. However this is no longer the case due to the need at various
times during my training and subsequent, current social work practice to participate in religious rituals and/or events (30-40 year old female British child and family social worker).

Educational content theme three: Religious educational content

Recognising the above spiritual diversity approach within their social work education 11 participants commented specifically about religious content. The participants acknowledged that they had received specific content on varying religious perspectives. Indeed most of the participants who responded about educational content used the term spirituality in their responses as opposed to referring to content on religion.

This may reflect findings that suggest spirituality is the favoured term and that a level of avoidance exists when using the term religion or including religious content in social work education or academic attention to the topic (Praglin, 2004).

Social work education focused on religious beliefs and rituals of different cultural groups (50-60 year old female Māori, mental health social worker).

The importance of understanding religious ideas and rituals of major religions. The importance of assessing and not assuming individuals' experience and understanding of their religion (30-40 year old female NZ European child and family social worker).

One participant recognised that this had included a binary viewing of religion and spirituality:


Overall, in the responses to this question about educational content the term spirituality is used on 40 occasions, while reference to religion is used 13 times. This preference for spirituality may be accentuated within an educational context. Hodge (2005) recognises tensions within academia around notions of spirituality and religion drawing on the work of Berger (1978; 1986), Ehrenreich (1990), Smith (2003) and others using ideas of ‘new class theory’. Hodge (2005) posits that the New Class or knowledge sector (Hunter, 1991) is underpinned by the educational establishment. Hodge (2005) argues that association with the New Class engenders a particular worldview and value system that; seeks to erode traditional, orthodox theistic beliefs whilst favouring a secular/humanistic worldview and humanly
constructed conceptions of transcendent reality. Hodge (2005) observes that spiritualities associated with New Class status are seen as reasonable and advantageous whilst other systems of belief are disparaged or ignored. Hodge (2005) elaborates this point drawing on Armstrong (2000) stating:

From the perspective of some New Class academics, the secular Enlightenment is framed as having ‘liberated us from an unseemly dependence upon a ‘supernatural God’ and created tolerant, ‘secularist forms of spirituality’, which foster ‘insight, transcendence and ecstasy’ (Armstrong, 2000, p. 366). Conversely, traditional theistic believers are viewed as having ‘no time for democracy, pluralism, religious tolerance, peacekeeping, free speech, or the separation of church and state’ having ‘cultivated theologies of rage, resentment, and revenge’ (Armstrong, 2000, pp. I, 366) (Hodge, 2005: 45).

As well as the limited reference made to religious content one participant was openly negative about religion in relation to social work education:

_Nonsense especially from religious leaders_ (40-50 year old female NZ European mental health social worker).

And two participants had received content that explored some of the perceived negative aspects associated with religion:

_When abuse is justified by biblical quotes, lesson on how not to hook into the debate. On challenging respectfully with some subtle questions (Men’s anger courses) (50-60 year old female NZ European/British social worker working with violence)._  

**Educational content theme four: External sources of knowledge**

Whilst attention to religion appears to be limited within the social work curriculum five participants indicated that they had received education about religion from other sources. They recognised that they had received content in other degree programs such as theology or from self directed attendance at differing workshops available as continuing professional development options. Some of these were run by local health authorities others involved some post graduate studies.

Very few identified education at an undergraduate level as core curricula or as a source of training in this area outside of attention to bicultural requirements:

_Completed three-year diploma in Christian Ministry pastoral studies ministerial ethics. Variety of subjects the epistles/Old Testament history and individual studies of Romans, Corinthians and Hebrews (50-60 year old male Māori social work educator)._
I have been part of ongoing training as a counsellor/social worker. Attended a Christian counsellor's conference (40-50 year old female NZ European child and family social worker).

Educational content theme five: Western theoretical approaches to spirituality and religion

Authors have noted the lack of theoretical attention and development within western social work and other disciplines such as psychology and sociology about spirituality (Loewenberg, 1988; Bethel, 2003; Sheridan, 2004), four participants described receiving theoretical content about spirituality in the form of Jungian psychology. Reference to formal theoretical perspectives was limited.

Philpot (1986) recognised that the work of Jung offered a general means of reconciling religious traditions with psychoanalytic thinking. Lines (2006) argues that apart from possibly Jungian ideas all the major theoretical approaches within schools of psychotherapy contain very little if nothing in the way of attention given to religious or spiritual concerns.

Three participants had received content that recognised the inclusion of spiritual content as an important aspect of being holistic in practice and that spirituality is a central aspect of being human. Woods (2002) recognises that spirituality is a fundamental part of being human. Chiu, Emblen, Hofwegen, Sawatsky and Meyerhoff (2004) note that spirituality is considered to be a universal human phenomenon.

Spirituality as integrating part of human life. The hope and motivating factor of spirituality (40-50 year old female British/Irish or Scottish child and family social worker).

Participants' personal experiences of religion and, or, spirituality

Participants were asked to make any additional comments they would like about their experiences of religion and, or, spirituality as it relates to social work practice.
Overall, 67 (41%) of the participants provided a qualitative response to this question. Demographically those who provided a response to this question worked in: 6 (9%) voluntary settings; 31 (46%) statutory settings; 15 (22%) private and 11 (16%) Christian Social Services. Within these settings: 37 (55%) work with children and families; 8 (12%) hospital social work; 12 (18%) mental health; 7 (10%) elderly and 5 (7%) work in Corrections.

The themes that emerged from the participants' comments are shown in Table 41 below.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Personal resource</td>
<td>19</td>
<td>(40)</td>
</tr>
<tr>
<td>2) Value base, worldview and motivation</td>
<td>11</td>
<td>(23)</td>
</tr>
<tr>
<td>3) Anti religious sentiments</td>
<td>7</td>
<td>(15)</td>
</tr>
<tr>
<td>4) Religion and spiritual binary</td>
<td>5</td>
<td>(11)</td>
</tr>
<tr>
<td>5) Client strengths</td>
<td>3</td>
<td>(6)</td>
</tr>
</tbody>
</table>

Participants' personal perspectives and experiences theme one: personal resource

When the participants were asked to comment about their personal experiences of religion, and, or, spirituality 19 identified spirituality and religion to be a significant resource for them.

Thompson (2005) observes that social work is a demanding profession which can often leave workers feeling weighed down by work pressures and promotes the need to develop stress management skills. Thompson (2005) suggests the need for social workers to develop resilience factors which should involve:

- A commitment to making a success of social work as far as possible.
• A willingness to stand back from the situation and not let it get us down.

• A well developed set of coping skills.

• A support network to be drawn upon as and when required.

The participants recognised that their religious and, or spiritual beliefs were a significant contributor to self resilience:

Since I have committed myself to more time to meditation and prayer, it has enhanced my ability to tolerate the negative aspects of social work (40-50 year old female NZ European social worker working with vulnerable populations).

My spirituality has helped me maintain my own sense of self, helps me to not take responsibility for clients’ actions provides understanding of others and keeps me centred (50-60 year old female NZ European social worker working with violence).

And strength:

My religious spiritual experience is an important part of my maintaining the strength and passion to be a social worker (60-65 year old female NZ European child and family social worker).

Having a higher power to turn to as a social worker is to cast your burdens unto the Lord. He refreshes, energises me every day in fellowship with the Lord Jesus Christ. This spiritual faith personally makes me stronger when working with people. To understand this emotions, to understand them as person and not being judgemental in my views. Helps me take up challenges (50-60 year old male Māori social work educator).

I believe that I am a better social worker due to my faith. My faith is strengthened in the work I do and my work is strengthened by my faith (40-50 year old NZ European child and family social worker).

Additionally, five participants reported that their own level of religious and, or, spiritual belief provides them with an ability to connect with clients on a deeper level. They also felt that having their own spiritual and, or, religious beliefs enabled them to have a level of understanding of the clients’ beliefs. Participants also felt that having the above provided a level of legitimating for clients own systems of belief. Nash and Stewart (2005) recognise that spirituality “opens the door to integrity and genuineness in social workers’ relationships and ways of working with people” (Nash and Stewart, 2005: 1)

My own spiritual experiences have been extremely useful in helping me understand those experienced by clients. Clients feel more inclined to open up
and trust once they sense that their experiences are not going to be disregarded or judged (50-60 year old female European (other) child and family social worker).

My spiritual practice enhances my attitude towards myself and my clients. I believe it keeps me more in touch with myself and more available to connect with my client (40-50 year old female NZ European Corrections social worker).

I feel that although I choose now not to participate in religious practices, I still have a good knowledge and insight into how people can feel I react in certain situations and how different belief systems can be used both positively and negatively (50-60 year old female NZ European child and family social worker).

Participants’ personal perspectives and experiences theme two: Value base, worldview and motivation

In providing comments about personal experiences 11 participants indicated the importance of religious and spiritual beliefs as a source of worldview and values.

Sermabeikian (1994) considers an understanding of spirituality important for understanding concepts of values, possible sources of tension for workers between believers and non believers, and indeed believes workers themselves cannot be considered neutral in regards to their own belief systems in whatever form and that will reveal itself in their work (Sermabeikian, 1994). A number of the participants highlighted the influence of their own spiritual and, or, religious belief systems and how central these are to shaping their values and worldview.

It is my intention to bring an integrated person "me" to my work. That is my personal and professional self intermingled. My spiritual self's very much part of this picture and is expressed in the relationships I build with people I work with to one degree or another (depending on appropriateness)My own spirituality is ecological rather all encompassing allowing for my own evolution/ aging and self change. My background is Irish Catholic and like many of my peers in this there has been tremendous challenge and change but ritual and tradition still engage me (40-50 year old female NZ European social work supervision).

My religious beliefs are not exactly those I was brought up with but my personal values (plus social work values) are informed by them. Spiritual reflection assists life and work spiritual and religious background informs my worldview. This does not mean it imposes on my work with clients (60-65 year old female NZ European diverse practice context).
My main concern as a spiritual being is relationship with God, with others and with my own inner being. This means for me loving God, and loving others as I love myself. Integrating this with social work practice means treating other spiritual beings with respect and extending to them the compassion that I understood is a primary attribute of the divine (50-60 year old female NZ European social work supervision).

Another two participants recognised that whilst they no longer actively participated in religion it had a significant influence on their personal value system:

I believe my earlier religious practices and values (instilled from family to me at a young age) have been extremely beneficial to my personal and professional growth (50-60 year old female NZ European hospital social worker).

Conversely, three participants reported that they keep their own spiritual and, or religious beliefs separate from their approach to practice:

I do not allow my own personal beliefs on religion/spirituality to impinge on my social work practice (50-60 year old female ethnicity unspecified child and family social worker).

I am aware of a need to set clear boundaries with clients and will not discuss my own religious affiliations. However in the area of health and disability the aspect of spirituality for the client is sometimes raised (40-50 year old female Indian social worker working with physical disability).

Another participant recognised that their spiritual and, or religious belief is the motivation for working in the social work context:

I am a Christian and for me social work is a calling. My Christian upbringing and involvement with youth groups, University groups had a major influence on me choosing social work as a career (40-50 year old female NZ European hospital social worker).

Nash and Stewart (2005) recognise that social justice is an important aspect of spirituality. The authors point out that within the world’s major religions social justice concerns are intertwined. Nash and Stewart also recognise that social justice and spirituality are close in indigenous spiritualities particularly where relationship to Land is involved. Nash and Stewart (2005) state, “In this way, the Hikoi28 brought religion, spirituality and social justice together for New Zealanders and it challenged the nation to look at divisions in society and acknowledge the effects of colonisation” (Nash and Stewart, 2005: 6).

28 The Hikoi in Aotearoa New Zealand refers to a large number of people marching in solidarity to bring injustices to the attention of the state. In Aotearoa New Zealand the use of Hikoi for this purpose occurred most notably in 1975 and in 1998 (Nash and Stewart (2005).
Given the religious involvement in social justice issues historically in Aotearoa New Zealand it could be expected that social workers would show an awareness of the link between spirituality, social justice and religion. This was not the case however with only 2 participants referring to social justice connected with religion.

*My upbringing by the nuns had a strong social justice component to it; this continues to be reflected in my social work practice. Also my own life experiences (experiencing death the grieving process at an early age) has also impacted on my social work practice as religion and spirituality were both important parts of the grief process for me* (50-60 year old female NZ European/British child and family social worker).

*Focus of social justice, equity in Christian faith was strong* (40-50 year old female NZ European hospital social worker).

**Participants' personal perspectives and experiences theme three: Anti religious sentiments**

Schneiders (2003) recognises a global rejection of religion due to its institutionalisation and states:

>The danger, of course, in the institutionalisation of any religious tradition is that institutions often end up taking the place of the values they were established to promote. Institutionalisation of religion easily leads to empty ritualism, hypocrisy, clericalism, corruption, abuse of power, superstition, and other deformations familiar from the history of religions and from which no religion is totally free. Many people are so scandalised and disillusioned by these deformations that they jettison all connection with institutionalised religion (Schneiders, 2003: 171).

Likewise, Ward (2003) has observed that a strong anti institutional sentiment exists towards religion in Aotearoa New Zealand.

Some participants also commented on what they perceived to be some of the negative aspects associated with religion. Overall, seven participants indicated concerns about religion in response to questions about their religious and spiritual experiences:

*I believe a lot of people have had some experience of religion growing up and this affects them today and clouds their judgement in this area therefore not leaving them in a healthy place to assist others in this field* (30-40 year old male NZ European child and family social worker).
Religion for many of my clients has served to maintain patriarchal values of oppression and abuse by (one example) invalidating the lived experiences particularly of women (50-60 year old female NZ European/British community development social worker).

Religion - terrible things happen around the world in the name of religion. Spirituality as a Christian would see peace prevail. Religion has an organisational political agenda. A form of social control through ideology (50-60 year old female NZ European child and family social worker).

I believe most people are too scared to address their own individual personal beliefs - let alone consider being an expert. But there are some overzealous religious persons who lack awareness themselves and are a danger to the community at large (and that comes from many years experience of working for a Christian NGO (50-60 year old female NZ European context unspecified social worker).

Participants' personal perspectives and experiences theme four: Religious and spiritual binary

Taking a polarised viewing of religion and spirituality was also evident in the participants comments about personal experiences relating to religion and, or, spirituality. Five participants referred to spirituality and religion in a binary fashion.

My experience of organised religion/culture has at times been negative. I feel spirituality is beyond the bounds of culture, whereas religion can be very culturally entrenched and sometimes harmful (50-60 year old female NZ European, child and family social worker).

In recent years I have seen the church as a man made structure with many crippling rituals and have found it very difficult to overlook them. Therefore I would find it difficult for a social worker to encourage any clients into religion spirituality yes but not religion (50-60 year old female NZ European child and family social worker).

One participant felt that there is a connection between the terms which could not be easily separated:

I believe it creates a false dichotomy by splitting the terms religious and spiritual. From my perspective these concepts are intertwined at some level (30-40 year old male NZ European child and family social worker).

And another associated spirituality with Māori exclusively:
Religion has a place if the client is of the same religion. Spirituality has a place if the client is Māori (50-60 year old female Māori, child and family social worker).

Participants' personal perspectives and experiences theme five: Client strengths

Sermabeikian (1994) recognised that spiritual and, or, religious beliefs can be a source of strength for clients. Additionally, Sermabeikian recognised that often spirituality and, or, religion are only considered pathologically. Three of the participants recognised the contribution spiritual and, or, religious assessment could make to identifying client strength's in this area.

I think questions that cause clients to reflect on religion spirituality are useful they help gauge the strengths clients have to help work on the issues. E.g. concepts like faith, hope, forgiveness, openness compassion. The question needs to be asked in assessment in terms of what strengths they are able to draw on from the past if a true response referral to appropriate people if client desires that (30-40 year old female NZ European child and family social worker).

Non destructive forms of empowerment can be useful aids/skills/coping strategies for both clients and practitioners and for some individuals inner strength/spiritual beliefs/religious ritual assist in a healthier, functioning individual it must be the individual’s choice (50-60 year old female NZ European, drug and alcohol social worker).

I believe it is appropriate to raise the issue of a client’s connection to spirituality religion to ascertain the meaning of that clients experience of life for them some clients might consider the experience as some kind of spiritual or religious oppression others might find strength and empowerment in their beliefs (30-40 year old male NZ European child and family social worker).

Furthermore, 10 participants commented with a level of endorsement for the inclusion of religion and, or, spirituality particularly as it could enhance approaches to intervention.

I believe social work is in the best interests of the client. What they need to assist life change (if this is required) should be achieved- whether counselling, therapy or praying!!! (30-40 year old female NZ European child and family social worker).

Religion and, or, spirituality can have a big impact on the choices people make in their life and how they interpret their life and relationships therefore very relative to social work (40-50 year old male Māori child and family social worker).
Spirituality is worth assessing may be a valuable tool in intervention if embraced by the client needs to be entirely optional to utilise if at all possible (30-40 year old female Māori/Samoan child and family).

Definitions and Concepts associated with Religion and Spirituality

Participants were provided with four opportunities to comment further about the definitions for religion and spirituality provided for the survey; concepts and practices associated with spirituality and, or, religion and elements that they felt should be included that were not included in the list of descriptors provided in the survey instrument (see appendix B. pp. 359-360). Two opportunities were provided for further comments that separated religion and spirituality which stated:

1) Please list any other concepts or practices relating to religion that you feel need to be included.

2) Please list any other concepts or practices relating to spirituality that you feel need to be included.

Whilst two further questions asked participants:

3) Are there elements of spirituality and, or, religion important to you that need to be included in defining spirituality and, or, religion in New Zealand not included in the provided definitions?

4) Please use the space below to provide any further comments you would like about the definitions of spirituality and, or, religion provided.

The participants' responses included negative and positive descriptors. Additionally, this allowed space to incorporate additional descriptors from within our own contextual frame of reference. I felt this was important given the survey instrument utilised descriptors that may not necessarily capture the understandings of the Aotearoa New Zealand social workers, given that the descriptors provided within the instrument were constructed in the United States context. I also recognise that there are cultural specific understandings within our bicultural practice context.
Overall, 43 participants provided responses to the above questions. The themes that emerged from these are presented in Table 42 below.

Table 42: Frequency distribution of themes from participants' comments about definitions, descriptors and concepts associated with religion and, or, spirituality (N=43)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Religion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1) Negative descriptors</td>
<td>21</td>
<td>(49)</td>
</tr>
<tr>
<td>2) Positive descriptors</td>
<td>7</td>
<td>(16)</td>
</tr>
<tr>
<td>3) Religious practice form and functional aspects</td>
<td>5</td>
<td>(12)</td>
</tr>
<tr>
<td><strong>Spirituality</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1) Positive descriptors</td>
<td>25</td>
<td>(58)</td>
</tr>
<tr>
<td>2) Cultural descriptors</td>
<td>25</td>
<td>(58)</td>
</tr>
<tr>
<td>3) Intra-psychological and individual focus about spirituality.</td>
<td>23</td>
<td>(53)</td>
</tr>
<tr>
<td>4) Connection with environment, people, higher power</td>
<td>19</td>
<td>(44)</td>
</tr>
<tr>
<td>5) Association with religion</td>
<td>11</td>
<td>(26)</td>
</tr>
</tbody>
</table>

To present the findings, themes were identified that related either to religion or themes identified for spirituality. The themes for religious definitions and concepts are presented first followed by the themes for definitions and concepts related to spirituality.
Descriptors for religion theme one: Negative descriptors

In response to questions about definitions and concepts related to religion, 21 participants commented with a negative view of religion. Often religion for these participants was seen as a man made institution used to maintain control and exert a negative influence in people’s lives.

*Religion is an organised ritualistic practice designed to maintain power and control of the masses* (50-60 year old female British child and family social worker).

*Religion has an organisational political agenda. A form of social control through ideology* (40-50 year old male Māori child and family social worker).

Whilst this view is held one participant also recognised the potential personal benefit of religious belonging:

*In truth religion can be a construct of power to enforce compliance. There is no denying the positive influence of belonging that often accompanies religion/church* (40-50 year old female NZ European social worker working with intellectual disabilities).

Another participant recognised the negative impact of religion associated with colonisation and the perceived impact of this on Māori spirituality:

*As Tangata Whenua, I believe the emphasis that was placed on religion as opposed to spirituality impacted greatly on how our approach to Atua Io Iawa whatever name was put on our creator, was seen by the white man who landed upon our shores, Māori, Polynesians will always acknowledge life, its surroundings its existence with karakia to our creator for all these gifts so participating in a form of ritual is and always will be an ongoing practice social work or not* (60-65 year old female Māori hospital social worker).

Descriptors for religion theme two: Positive descriptors

Also in response to the questions about religious definitions and concepts, seven participants associated positive concepts with religion these positive aspects largely related to specific aspects of religious practices such as worship. These descriptors are shown in Figure 9 below.
Descriptors for religion theme three: Religious practice form and functional aspects

When asked to provide personal descriptors for religion five participants identified specific practices that related to the form and functional aspects of religion such as worship, confession of faith and varying liturgical practices.

Descriptors for spirituality theme one: Positive descriptors

In contrast to the dominance of negative descriptors provided for religion a number of positive descriptors associated with spirituality were provided and are shown in Figure 10 below.

<table>
<thead>
<tr>
<th>Positive descriptors for religion</th>
<th>Negative descriptors for religion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Worship</td>
<td>Restricting</td>
</tr>
<tr>
<td>Church</td>
<td>Judgmental</td>
</tr>
<tr>
<td>Confession of Faith</td>
<td>Exclusive</td>
</tr>
<tr>
<td>Observing liturgical practices</td>
<td>Dogmatic</td>
</tr>
<tr>
<td>Love</td>
<td>Repression</td>
</tr>
<tr>
<td>Afterlife, reincarnation</td>
<td>Guilt</td>
</tr>
<tr>
<td>Relationship</td>
<td>Shame</td>
</tr>
<tr>
<td>Sharing</td>
<td>Fear around death</td>
</tr>
<tr>
<td>Reflection</td>
<td>Punishment around tragedy</td>
</tr>
<tr>
<td>Singing</td>
<td>Legalistic</td>
</tr>
<tr>
<td>Serving</td>
<td>Power</td>
</tr>
<tr>
<td>Contributing</td>
<td>Control</td>
</tr>
<tr>
<td>Holy days</td>
<td>Fear</td>
</tr>
<tr>
<td>Involvement</td>
<td>Hierarchical</td>
</tr>
<tr>
<td>Healing</td>
<td>Blind Faith</td>
</tr>
<tr>
<td>Belonging</td>
<td>Dogma</td>
</tr>
<tr>
<td>Spiritual</td>
<td>Corruption</td>
</tr>
<tr>
<td>Sacred</td>
<td>Critical</td>
</tr>
<tr>
<td>Rite of passage</td>
<td>War</td>
</tr>
<tr>
<td></td>
<td>My belief or wrong</td>
</tr>
<tr>
<td></td>
<td>Dangerous</td>
</tr>
<tr>
<td></td>
<td>Distorted</td>
</tr>
</tbody>
</table>

Figure 9 Participants' concepts and descriptors associated with religion
Positive descriptors for spirituality  | Cultural descriptors for spirituality  
--- | ---  
Trust  | About whanaungatanga  
Connection, connectedness, universal connection  | Wairua  
Relationship  | It is the ihi, wehi, mauri— the ethos of that tangata at all times— the fire that burns in their puku or the absence that causes them to lose their way. There are no culturally appropriate words here.  
Appreciation  | E Taha wairua  
Journeying  |  
Fun, Play, creativity  |  
Reflection  |  
Inner peace self awareness and harmony  |  
Inclusive, inclusion  |  
Non-judgmental  |  
Refreshing  |  
Emancipation, freedom, liberty  |  
A passion or drive  |  
Reincarnation  |  
Recognition of soul or essence  |  
Holistic  |  
Wholeness  |  
Culture, nature  |  
Paganism integral to spirituality  |  
Love, loving others and loving the earth  |  
Afterlife  |  
Giving of self  |

Figure 10 Participants' concepts and descriptors associated with spirituality

Descriptors for spirituality theme two: Cultural descriptors

Similarly participants were asked to identify important elements that they attribute to spirituality and, or religion that they considered needed to be included in definitions within the Aotearoa New Zealand context not included in the definition provided for the purposes of this research. This again provided a space to capture particular cultural nuances.

Increasingly, the concept of spirituality is being constructed with universal application and definitions in mind. Canda and Furman (1999) point out the tensions between emic and etic understandings and developments suggesting a transemic approach to constructing understandings of spirituality that are able to be both universal and allow for specific
understandings. Often definitions are unable to capture culturally specific understandings (Delgado, 2005).

Importantly, participants recognised the importance of Tangata Whenua conceptualisations of spirituality:

*I think there should be reference to the significance of spiritual values and spirituality in Māori models like Mason Durie's Whare Tapa Wha and also to the spiritual significance of the Māori and European symbols like the spiral and the circle that we see all around us in the natural environment we inhabit* (50-60 year old female NZ European social work supervision).

*I believe Māori may have a defining of spirituality around being of the land, of their ancestors etc* (40-50 year old female NZ European mental health social worker).

One participant commented on differing generational understandings, particularly older adults and how often their spirituality is expressed through a religious tradition:

*Older people will respond to religious explanations reflecting sound consciousness of their times. In many cases they are living their spirituality within their religion. Other cultures have different beliefs, creative individuals are expressing creative spirituality—the word organic-live and non static springs to mind I have heard it said our drug addicts have "lost their soul" which is a contradiction in terms—one cannot lose ones soul if it is eternal—it upsets clients to be denigrated this way* (50-60 year old female NZ European alcohol and drug social worker).

**Descriptors for spirituality theme three: Intra psychological and individualistic focus about spirituality**

Roof (1993) recognised that for many religious and spiritual expression has become a privatised and highly personal area of life. When asked to comment about concepts relating to spirituality, 23 participants felt that spirituality is a very personal and individual construct. They indicated that each person’s spirituality is different and deeply personal and open to self interpretation. Participants also described spirituality to be about the inner psychological state of the person often involving ideas of inner peace.

*I think there should always be a component of self-interpretation as spirituality and religion are very powerful words and everyone has their own way of interpreting them* (20-25 year old male NZ European hospital social worker).
Defining spirituality/religion is very subjective and interpretive, one person's truth and realm of understanding may differ from another's. This needs to be allowed for and respected (50-60 year old female NZ European, child and family social worker).

Descriptors for spirituality theme four: Connection with the environment people and a higher power

Western constructions of spirituality often fail to recognise the importance of place and space for Indigenous understandings (Zapf, 2003) and tend to compartmentalise spirituality alongside other aspects of personal ontology, rather than seeing spirituality and its super empirical elements as woven into the fabric of empirical reality and a central element of wellbeing (Jenkins, 1998; Durie, 1994).

Unification with God and the Bible, Māori terminology Kotahitanga "oneness in purpose, the spirit of wairua and tipuna (ancestors who support you in afterlife) the spirit of trees, animals etc (50-60 year old male Māori social work educator).

I think the definitions provided are on the whole suitable but perhaps not totally adequate. I think Māori concepts of spirituality and Māori words like karakia, waiata, taonga, tipuna should be included in New Zealand definitions. Whakapapa sense of others who have gone before (50-60 year old female NZ European social work supervision).

Descriptors for spirituality theme five: Association with religion

As with findings in studies by Furman Benson Canda and Grimwood (2006), Furman et al (2005), religion is more likely to be associated with negatively than spirituality. In responses to these questions participants provided no negative descriptors associated with spirituality and a number of negative descriptors for religion. One participant commented on this tension giving some illumination of the difficulties associated with using the term religion:

I've struggled with your definitions of religion and spirituality. I am spiritual, I have a favoured religion, but I am not "religious". Religious speaks to me of rules and rigidity, not joyous faith. I do accept spirituality as being broader than my own Christian beliefs/values, which is why I ask my clients about their spirituality. It is not threatening and without exception they have been happy to give me that info (50-60 year old female NZ European child and family social worker).
Inclusion of Taha Wairua in Aotearoa New Zealand Social Work

In 1988 as part of the New Zealand royal commission on social policy recommendations by Jenkins (1988) and Benland (1988) highlighted the need to include Māori concepts of spirituality within social policy. To explore this inclusion participants were asked to comment on how well they thought spiritual issue were accounted for particularly within social policy and practice approaches. In response 118 participants provided additional commentary. The themes are presented following as shown in Table 43 below.

Table 43: Frequency distribution of themes from the participants’ comments about the inclusion of Taha Wairua in social policy and practice (N=118)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
<th>N=118</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Poor inclusion of Taha Wairua</td>
<td>31</td>
<td></td>
<td>(26)</td>
</tr>
<tr>
<td>2) Inclusion dependent on context and, or, so-</td>
<td>18</td>
<td></td>
<td>(15)</td>
</tr>
<tr>
<td>cial workers involved</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3) Good Practice inclusion of Taha Wairua</td>
<td>10</td>
<td></td>
<td>(8)</td>
</tr>
<tr>
<td>4) Level of tokenistic inclusion of Taha Wairua</td>
<td>8</td>
<td></td>
<td>(7)</td>
</tr>
<tr>
<td>5) Need for further inclusion</td>
<td>5</td>
<td></td>
<td>(4)</td>
</tr>
</tbody>
</table>

In response, 31 of the participants commented that spiritual issues were not well accounted for, if at all, or if and when they were it is tokenistic. Ten felt that spiritual issues were well accounted for when working with Tangata Whenua. A further 18 commented that inclusion and how well it occurs for Tangata Whenua in practice is dependent on a number of contextual factors. One participant commented about the importance of spirituality for Tangata Whenua:

*Māoridom has a deep appreciation of the centrality of Taha Wairua in areas of mental health, iwi social services it is integral to the holism of the person* (40-50 year old female NZ European mental health social worker).
Inclusion of Taha Wairua theme one: poor inclusion

Overall, 31 of the participants who responded to this question felt that spirituality is not included very well at all despite challenges for it to be incorporated within social policy and social work practice.

*A lot of talk. Not much in terms of practical application or how to do this as a social worker in practice* (40-50 year old female NZ European child and family social worker).

*Not well at all. I think there is little acknowledgement of this centrality and even less account taken of Taha Wairua in work with Tangata Whenua and anybody else* (50-60 year old female NZ European social work supervision).

Three participants felt that often spirituality is only included genuinely in practice when led by Tangata Whenua social workers:

*Not well at all unless practitioner is Māori working with Māori and both are comfortable. As a Pakeha practitioner, I do not feel well equipped to account for taha wairua although I sometimes attempt to and am always conscious of taha wairua in my work* (40-50 year old female NZ European child and family social worker).

*Poor general knowledge in our (mainstream) service as a result of referring Māori to Māori services. Thus it isn’t our problem anymore attitude. However we still retain Māori clients and will continue to do so* (50-60 year old female NZ European child and family social worker).

Inclusion of Taha Wairua theme two: dependent on context and social worker

Also in relation to the above comment 18 of the participants recognised that the level of inclusion can be dependent on the practice context. This difference may be due to the nature of the agency including Taha Wairua:

*I have witnessed a great gamete of responses to spiritual needs of Tangata Whenua in social services agencies. Generally those agencies that have made the greatest efforts to attend to spiritual needs of Māori are kaupapa Māori services* (30-40 year old male NZ European child and family social worker).

*I think within statutory settings there is a willingness to respect other peoples beliefs but that it is inappropriate to try to change service provision based on them* (20-25 year old male NZ European hospital social worker).
Maori concepts of Taha Wairua are not robust in some agencies work certainly not in a lot of statutory agencies" (40-50 year old female Maori child and family social worker).

Or evident in differences of approach to the topic between Maori and Pakeha social workers:

*I think it is well accounted for in services by Tangata Whenua for Tangata Whenua, but among Tuiwi, there is a confusion over religion and spirituality* (40-50 year old, male NZ European mental health social worker).

One participant commented about not being the appropriate person to deal with issues involving Taha Wairua:

*Not well, but I would never become involved in spiritual issues of Tangata Whenua as Tuiwi. I have involved appropriate tangata whenua when required* (50-60 year old female NZ European mental health social worker).

Additionally, five participants felt that whilst Taha Wairua is included in practice there is little legitimation for other spiritual beliefs and the Aotearoa New Zealand context does not provide for expressions of spiritual diversity:

*It seems to me to be okay in our society to acknowledge spirituality in relationship to everyday life if it is Maori but not if it is Pakeha* (40-50 year old female NZ European child and family social worker).

*Good in our service for Maori what about other cultures. Much more accounted for in practice for Maori than Pakeha* (60-65 year old gender unspecified NZ European hospital social worker).

*Spiritual issues I think are more taken into account for Maori, PI and other cultures. New Zealand European cultures seem to be more lacking in this area* (30-40 year old female NZ European child and family social worker).

Inclusion of Taha Wairua theme three: tokenism

Also, in comments eight of the participants indicated that when Taha Wairua is accounted for outside of Tangata Whenua involvement it is often only included in a tokenistic approach.

*Not very well at all, other than token gestures, I have not seen any evidence of spirituality or religion in statutory social work* (40-50 year old female NZ European child and family social worker).

*It's still often only a token gesture and largely dependent on the individual practitioners comfort level* (50-60 year old female NZ European child and family social worker).
I think it is more accepted to allow Māori to incorporate spiritual issues into social work. In a number of areas I think even Māori are only given this as 'tokenism' (30-40 year old female Māori child and family social worker).

**Inclusion of Taha Wairua theme four: further development**

Finally, in answer to the question about the inclusion of Taha Wairua five participants recognised that although there is a level of inclusion this could be improved and needs to be developed further.

*It is in my opinion that in my current area of practice a conscious organisational effort is made to account for spiritual issues for Tangata Whenua but there is always room for improvement. I am able to comment on other areas/fields of social work practice* (40-50 year old female NZ European mental health social worker).

*This area needs to be maintained for Tangata Whenua if the wairua is to be rangimarie (peaceful)* (50-60 year old male Māori hospital social worker).

*Though recognition of bicultural practice has led to more focus on spiritual issues/needs of clients and whanau, still a lot to be done* (40-50 year old female NZ European hospital social worker).

**Areas needed to be discussed further**

The final qualitative survey question sought to ascertain the areas considered important by the participants that they thought required further discussion and exploration within professional social work in Aotearoa New Zealand. The question stated: What areas of this topic do you feel are important for future discussions? What questions about spirituality and, or, religion relevant to social work practice would you like explored?

In response to these questions, 92 participants provided additional commentary about what issues and topics they would like to see explored further. This highlighted significant gaps and areas of interest for the participants and will help provide focus areas for future research and discussion. The participants' responses relate to the following themes; practice approaches, ethics and boundaries, cultural specificity, education and curriculum issues, and the role of the social worker's spiritual self.
Frequency counts for these themes are shown in Table 44 below.

Table 44: Frequency distribution of themes from participants' comments about areas for future and further discussion (N=92)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of participants</th>
<th>N=92</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Practice approaches and concerns (the how to questions).</td>
<td>33</td>
<td>(36)</td>
<td></td>
</tr>
<tr>
<td>2) Appropriateness ethics and boundaries.</td>
<td>24</td>
<td>(26)</td>
<td></td>
</tr>
<tr>
<td>3) Social work education and professional development.</td>
<td>11</td>
<td>(12)</td>
<td></td>
</tr>
<tr>
<td>4) Barriers to inclusion.</td>
<td>9</td>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>5) Role of the social worker's spiritual self.</td>
<td>7</td>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>6) Cultural specificity.</td>
<td>5</td>
<td>(5)</td>
<td></td>
</tr>
</tbody>
</table>

Areas for further discussion theme one: practice approaches and concerns

Overall, 33 of the participants recognised a lack of understanding or guidance given about how to include religious and, or, spiritual issues in practice they felt that there needs to be continued exploration conversations about how to include religion and, or spirituality within social work practice. Secondly, and closely related to issues about how to include spirituality in practice, 24 participants raised the need for discussions and attention to be given to ethical requirements, professional boundaries and the appropriateness of including spiritual issues in practice.

Integration issues and appropriateness particularly in the area of assessment were critical, particularly questions around how to introduce spirituality, who should introduce this and is it appropriate to do so?

*How is the religious/spirituality component best broached as part of an initial assessment process?* (40-50 year old female Indian social worker working with physical disabilities).
Should social work practice, have a compulsory spiritual religious dimension? How does a social worker broach the subject of spirituality/religion? How do we provide spiritual wholeness to a community? Practical ways of integrating spirituality in social work. How to integrate into daily practice (50-60 year old female NZ European child and family social worker).

How to include religion spirituality more in practice. Defining the differences between each and looking at how these differences require a different approach to practice (50-60 year old female Māori child and family social worker).

How to include spirituality and religion into social work and religion into social work practice so it is not threatening. When a person whanau do not want to go there to have the respect to let it go (50-60 year old female Māori child and family social worker).

**Areas for further discussion theme two: Ethics and boundaries**

Participants felt that discussions need take place about the appropriateness of inclusion, necessary boundaries, safeguards and professional guidelines:

How to work in a way which supports spirituality, practically in a grounded way. Preventing harm. Worker client relationship, developing trust and respect creating the groundwork for safety where spirituality can develop (30-40 year old female NZ European social worker working with vulnerable populations).

Appropriateness of asking religious questions at intake. When and how does the use of spirituality/religion become abusive to clients? How can social workers use a spiritual dimension to assist clients from all spiritual/religious backgrounds? (40-50 year old female NZ European social work education).

Additionally, two participants raised concerns about how social workers might interpret the positive or negative nature of the client’s belief system:

Who gets to judge someone’s definition of spirituality? If incorporated into social work, who gets to assess if the religion is at fault compared to the person not interpreting their religion right (30-40 year old, female, Māori, child and family social worker).

How would social workers handle a situation where they thought a person’s religious beliefs were harmful to the persons well being or to others e.g. children. I.e. belief in physical punishment, supremacy of the male, God controlling their life they have no control, stoning, fasting, beliefs etc (50-60 year old, female, NZ European, mental health social worker).
Furthermore, three participants raised the issue of role clarification and expressed concerns about whose role it should be to work in this area, clergy or social workers.

*Is this a social work role? When clients raise religious and spirituality issues it can be discussed, but is it appropriate. There needs to be boundaries re role. Are we referrers to more appropriate people e.g. chaplains, ministers, priests’ spiritual groups (50-60 year old female NZ European hospital social worker).*

*Is it appropriate for social workers? Is it the role of the clergy to explore this area? How do social workers approach this topic? (40-50 year old female NZ European social work education).*

**Areas for further discussion theme three: Education and professional development**

Also, 11 participants recognised the need to explore education and curriculum needs in this area within social work education and further professional development.

*A question around spiritual beliefs and human rights and respecting diversity. How can you teach spirituality? As social workers we pride ourselves on our ability to work with difference. It would be valuable to continue discussions on how as professionals we develop our capacity to work with spiritual difference. Increase understanding of other religions other than Christian and their customs. Highlight and validate spirituality as being as valuable as Christianity (40-50 year old female NZ European social work education).*

*A post grad. Cert diploma in this aspect of social work would be most welcome. Metaphysical studies! The implications of inclusion in graduate studies may be different from the practice. Philosophy ethics etc are good starting points but one must do ones own spiritual walk before raising it with others. Rites rituals of the diverse religious groups now in New Zealand. Spirituality is individual and personal and not so often encountered but religious rites are (40-50 year old male British child and family social worker).*

*Social work education, professional development. Development of models of social work and therapeutic intervention that take spirituality into account in a real way for all New Zealanders of whatever religion or none (50-60 year old female NZ European social work supervision).*

*Why spirituality/religion is not openly discussed at undergraduate level in terms of a possible tool or if client raises social workers not know how to respond (30-40 year old female NZ European child and family social worker).*
Areas for further discussion theme four: Barriers to inclusion

Furthermore, nine participants commented about levels of negativity towards this topic at an organisational and social level and larger social issues related to spirituality and, or, religion.

*How to change professional culture of negativity towards it. Why is it still socially acceptable to deride beliefs* (25-30 year old female NZ European child and family social worker).

*Breaking down barriers, fears, fundamental phobia, ignorance and introducing spirituality as natural, supportive, empowering and freeing* (50-60 year old female NZ European child and family social worker).

*What has happened to religion and spirituality in New Zealand? What are kiwis worshipping today? What are Kiwis afraid of? Why has religion turned so many sceptical* (30-40 year old male NZ European child and family social worker).

Areas for further discussion theme five: role of the social worker’s spiritual self

Furthermore, seven participants included concerns about proselytising, religious differences leading to conflict and the ability to practice without imposing beliefs on clients.

*How do social work practitioners avoid imposing their own spiritual religious views on clients whilst empowering them to explore the role spirituality/religion may play in their respective lives?* (50-60 year old female NZ European child and family social worker).

*How does a social worker who has no personal spiritual or religious beliefs include discussion of such in his/her work? How can a social worker with firm beliefs and practices in religion or spirituality remain neutral when entering discussions with clients? How does a social worker identify from their own agendas? Professional practice guidelines* (40-50 year old female NZ European child and family social worker).

*Appropriateness of practitioners from a specific religious orientation working with clients from another, safety etc. Should social workers with strong evangelical religious beliefs be able to practice outside of their flock?* (50-60 year old male NZ European child and family social worker).

Additionally, one participant recognised the need to discuss the role of social workers’ own belief systems in self care.

*Explore how rituals may be practiced by practitioners to help them to cope with their work and how they might bring spirituality into their own work with confidence* (50-60 year old female NZ European hospital social worker).
Areas for further discussion theme six: Cultural specificity

Additionally, five participants recognised the need to explore specific issues in relation to Māori and Pacific Island spirituality.

Māori spirituality in relationship to Tapu i safety tapu o from a Māori Catholic perspective. Tapu is the spiritual essence of all things Tapu I tapu o relationships (50-60 year old female Māori social work education).

Māori perspective needs further exploration. Research very limited on Māori spirituality/religion. Focus group specific to Māori/Pacific Island will give the diverse views separate from western ideas. Māori have their own definition of spirituality (50-60 year old male Māori social work education).

The extent and scope of the questions and comments provided by participants’ highlights the lack of discussions, information and education in this area for social workers in Aotearoa New Zealand. This parallels international concerns (See Canda and Furman, 1999; Patel, Naik and Humphries, 1998; Gilligan and Furness, 2006) and highlights the need for further exploration and discussion.

Conclusion

In this chapter I have presented the findings from the qualitative data collected in the first stage of this investigation NZIRSSOWK I. The data has been presented thematically focussing on practice issues, spiritual and religious educational issues in the social work curriculum, personal experiences of and about religion and, or, spirituality, definitions and concepts, Taha Wairua inclusion and lastly the participants’ perspectives about what areas need to be discussed further in the form of questions and points of interest.
Chapter 7: Beneath the Surface, Part Two, the Focus Group Data (NZIRSSOWK II)

In this chapter I will present the findings from the second stage of this research obtained via focus group discussions. Krueger (1998) suggests three varying styles for reporting focus group findings; a raw data model, a descriptive model and an interpretive model. The interpretive model provides the reader with a descriptive summary of the data with illustrative quotes followed by an interpretation of the findings. A variation of the interpretive model is employed in this chapter. The participants’ conversations are presented around specific themes that they discussed within the varying focus group sessions.

Focus group demographics

The focus group participants were all women, five were aged between 50-60 years old, three between 40-50 years old, two between 30-40 years old and one under 30 years old. Six worked with children and families, four within hospital social work and one in alcohol and drugs. To preserve the anonymity of the participants, no demographic identifiers are supplied with the participants’ quotes. It would have been fruitful to conduct further focus groups but resource constraints limited the ability to undertake more.
Social Work Inclusion

There is much discussion in the literature about the importance of spirituality as an aspect of holistic practice and the need to include spirituality within social work practice approaches. Focus group participants also recognised the importance of inclusion acknowledging that inclusion amongst other aspects can provide a platform for connecting with clients on a deeper relational level that can enhance transformational processes. Participants also introduced the concept of spiritual bankruptcy and perceived change processes as also involving spiritual journeys. Lines (2006) tentatively suggests that we can view life as a spiritual journey and recommends a counselling perspective that posits an understanding of human development and growth as the process of individuation where all life is as a journey of experience.

*We talk in our social work training that people are, we are holistic, and social spiritual emotional that kind of thing, so for me it is as clear cut as that. We can't deny the spiritual side, because we are spiritual people, you know, whether you agree or disagree, I mean it's kind of just the way it is, really. I guess probably like trying to sit on a two legged stool that is designed to have three legs that's what springs to mind* (NZIRSSOWK II participant A).

*I think I agree with that. I think it adds another dimension again to what we do you know, you can be the tall bell or whatever, but you know, until you incorporate that love and compassion into what you're doing then you're not really reaching people, and that's quite an abstract thing and it's not really something that you are conscious of, it's more a way of being, a way of being with people. And that's actually what connects with people* (NZIRSSOWK II participant B).

*It occurs to me, just to talk a little bit about how, because I work in the drug and alcohol sector and one of the treatment modules in the programme the 12-step programme and the concept of spirituality and my personal sense of belonging to a particular culture is an enriching part of what I do and I think the people I work with can be quite spiritually bankrupt. Having damaged so many relationships, reached that point of desperation and lack of self-belief and belief in others, that building on a base of developing a relationship with someone that I can trust and to be able to honour that person in such a way that they can reclaim who they are in such a basic level as honesty and openness and willing to try something different. I really like those fundamental aspects of that particular fellowship and it might not influence everything I do with people, because most people aren't interested in trusting, I think it's an interesting place to come from. Persons might be that damaged that they haven't thought about themselves as being able to receive that, and what it's like to rebuild their lives and to try to move from a place of complete and utter desolation and desperation to a place of hopefulness, which I think is a spiritual journey in and of itself* (NZIRSSOWK II participant C).
Spiritual bankruptcy is a term coined by Consedine in 2001 and refers to a lack of, or loss of, spiritual connection or spiritual impoverishment, similar to Durkheim’s concept of Anomie. Consedine (2002) suggests that western culture has lost its rootedness in a spiritual dimension and associated value base resulting in social alienation and growing dysfunction. Consedine suggests the need to recognise that spiritual bankruptcy is a social problem that should be recognised and acknowledged alongside unemployment, poverty and other social issues.

Participants also spoke of concepts such as compassion and unconditional regard as being spiritual concepts, and the importance of connecting with people and the transformative potential of doing so. Participants spoke of this in cultural terms, particularly related to aroha or love experienced within and between relationships. Participants also discussed the importance of shared journeys. Lines (2006) describes spiritual journeys as including the importance of sharing the journey with fellow tourists on the way.

What comes to my mind around that is I was in a program some years ago where I entered an eight week-program “Being a spouse of an alcoholic”. And there was a chap there, who, that was down in Queen Mary Hospital, and there was a chap there who had been in the gangs, he’d been involved with just horrific stuff, and of course he entered this 12 step-program. I think that was part of that cleansing, you know. We would have this group where people would stand up and say “I’m so and so, and I’m an alcoholic and da, da, da, da, ...” or you’d say “Yes, you’re an alcoholic, and I’m a co-dependent”, which was me. And you kind of come clean and you put out, you know, what had been going on, and it was a real cleansing process, and to see this guy change. But I think what was probably most fundamental with this change was the aroha that encompassed him by the group, because there was so much, - we were in smaller groups, I think there were about six in our group – and it was the acceptance and the aroha of the group that had such a transforming effect on this fellow. So I think it was like the two went hand in hand. I think you see that in Māori communities, that kind of aroha that encompasses people, that holds people in their journey and in their process (NZIRSSOWK II participant B).

I think it's kind of like believing in people, too. Believing in people's goodness (NZIRSSOWK II participant A).

They’re inherently good, and they have the capacity to change (NZIRSSOWK II participant C).

So, it's kind of like looking past all that toughness, and staunchness and knowing that there's a heart in that person to be connected with and how that going in with just that belief is part of the healing process, you know (NZIRSSOWK II participant B).
And even helping the people that we work with to actually believe that about themselves, because you often meet people and just by the way they speak or behave they show that they have no real concept that they are spiritual beings in terms that they don’t believe that they are inherently good and do have the capacity to change and they may never have allowed themselves a chance to feel how they would feel spiritually if they opened up and let themselves do so (NZIRSSOWK II participant A).

I come from within mental health, as well, so under the diagnosis you got the access to anti-social personality type, you know, so that person’s inherently bad and will always have a terrible motif going to take advantage and rip you off. And I guess, in my role, wanting to help somebody and believing that they have the capacity to change is there, and despite the self-interest or maybe the perception of that person that they behave the way they do because they don’t care about anyone else but themselves, that’s part of the process. I suppose acceptance and unconditional love and compassion, too, to persons who’ve reached their really dark moments in their lives and to help them (NZIRSSOWK II participant C).

Assessment

Assessment is a difficult issue in this area, findings suggest this is influenced by a number of factors such as the danger of proselytising, context legitimation, cultural competency and lack of specific knowledge in the area of spirituality and, or, religion. The focus group participants discussed their experiences in and around assessment and highlighted the need for assessment in this area but perceived a level of neglect. Participants also shared a number of examples in which they have incorporated spiritual and, or religious concerns in their work with clients. Interestingly, the participants recognised that they used spiritual concepts from a range of understandings to make connections with their clients’ belief systems to assist in intervention. Again the context and type of issues that the client is presenting are a determining factor as to the level of propensity for work in this area.

For me it comes up most often in termination and pregnancy clinics, and so I ask the question to the people “How does that sit with you, you know, emotionally? Are you in peace with yourself?” That might be one of the question I ask. Or I might ask “Do you have any spiritual beliefs around this?” I will go in there directly and ask direct questions (NZIRSSOWK II participant B).

I work in hospital wards and often people are more preoccupied with their physical health which really goes without saying. I was talking today with some colleagues about it, and we don’t come across the whole concept of spirituality and we don’t get opportunities to actually discuss it with our clients, and so how
do we actually go about that and do we need to involve it more in our everyday assessments? And most of us talked about the fact that we don’t always put it out there. Sometimes I might ask the person straight out “are you involved in the community, do you go to church?” and if you do, then “do you find you have a good community...” That’s when they might talk about stuff, and if they say “no, that’s not really my thing.” You just go “sweet”. You kind of get an idea that they’re not really interested in or aware of their spiritual selves, that’s kind of an assumption, but you know you just kind of get an idea of whether to press forward or not. But it’s certainly something that we probably need to be more aware of (NZIRSSOWK II participant D).

Participants also recognised that at times it is assumed that spirituality is important and should be included as a cultural consideration that needs to be extended to recognise spirituality for other cultural groups also. They noted that a level of difference is evident between how open varying cultural groups can be about their own spirituality.

I think we do it a lot with Māori and Pacific Island cultures. Because in my perception they are much more spiritual people, outwardly spiritual people, than pakeha. This has been my experience in terms of their way of life whatever....So, I think it’s about making an effort and just being aware that even though pakeha people may not be putting it out there, it’s still an integral part of everybody’s life. I think there is heaps of room for improvement in the use of the assessment, the assessment process (NZIRSSOWK II participant E).

For me it’s like, and it always has been I suppose, it’s the same with anybody that you mix with, you pick up on their beliefs, religious values and so on. But in our work we always have to look at their religion and what it means. Some people talk more about it, than others. It’s a matter of respecting their processes for working through their problems. That’s how it’s been for me (NZIRSSOWK II participant F).

I think it’s a personal thing rather than the use of a set protocol so much. We are looking at what peoples’ belief systems are when you are doing investigation you have to look at what their belief systems are, so you’re asking that question about their beliefs (NZIRSSOWK II participant G).

It’s good to have a very strong spiritual or religious base, church base, behind them (NZIRSSOWK II participant E).

I think indications of belief start coming from the person you are talking with like when you are sitting there and talking with them about their life and at some point it comes out from them in their life term it has been important to them. And so, we don’t even need to ask direct questions (NZIRSSOWK II participant E).

We always need to know whether they are church going people or not, which church. We always need to know that. We need to know whether they’re regular, and how they’re going to practice it within this setting, and what rituals they use. That’s how it can come out, but when we’re looking at how they problem solve, it may come out. But we’ve got no idea about how it’s for us possibly. But
sometimes it's a matter of a certain way of doing it in the context of a spiritual-religious way and you respect that, because that's their way (NZIRSSOWK II participant F).

Sometimes it becomes important to know about their values that are important to them and their beliefs (NZIRSSOWK II participant D).

Social workers considering working in this area need to address questions that ascertain the spiritual propensity of their clients. They need to determine the level of importance/unimportance this area has for their clients and how relevant religion/spirituality is as part of their client's worldview and life. Social workers also need to be careful of the varying degrees of adherence to various belief systems. Being careful means allowing their clients to determine whether this area should be included or not in the assessment process. Canda and Furman (1999) offer a helpful pre-assessment guide for exploring the propensity of clients to be worked with in this area. This could form a foundational tool as part of an initial exploration of the client's world as they see it and will determine whether it is an appropriate and relevant area to include from the client's perspective. The participants indicated a number of ways that the client's spiritual propensity might be evident and varying approaches to ascertain propensity. They were queried further to explore what helped them either educationally or experientially to determine the level of importance of spirituality for clients. Most indicated that the knowledge from their own experiences or informal knowledge rather than a formal educational background had prepared them for ascertaining spiritual propensity.

What has helped you in social work to be able to do that effectively, to recognise those pointers in being able to interpret those religious aspects? (NZIRSSOWK II focus group facilitator)

I guess with me it's been basically my knowledge of my own spirituality and where I'm coming from and where I sit in relation to this and my belief (NZIRSSOWK II participant H).

And for me it's kind of respecting every person's way of looking at life. It gives me an understanding of them (NZIRSSOWK II participant I).

I suppose it's also your own background of course, your own spiritual-religious journey background you've done all your life (NZIRSSOWK II participant J).

Another participant shared a story about how they had employed different spiritual concepts to connect with the client and the client's situation. To illustrate how they drew on their own informal knowledge in this area:
There were a couple of incidents just over the last few weeks, where I have directly spoken about God in that situation. Once we were in a family meeting situation, and the woman stated that she had a very strong faith and that that was what kept her going with her very strong faith and she had a strong belief in guardian angels and this woman was also, it was quite interesting, 'cause I could look at her and see myself 20 years ago, and she was a typical co-dependent type of person who was in total risk of burn-out. She started having anxiety attacks, panic attacks. She was really at her wits end, and after she had disclosed that about herself, I started to ask her some questions about "had she noticed some correlations between her anxiety and the sort of behaviour she was doing?" And at some point, we sort of worked our way through that stuff. I said to her "have you heard of that saying 'let go and let God'? And that was kind of picked up on, you know, 'cause this was a woman who was kind of like in her boots and all trying to hang on to control, control everything and, so yeah, it came up a few times. And it was quite interesting because it kind of incorporated into that psychological behavioural type stuff, where you could say to her, well, you know, gives some clues as to ways that she might intercept some of this behaviour and perhaps use some things that she could stick up on the bathroom mirror "let go and let God" or whatever, so, you know it sort of came up quite frequently during the time at the meeting and then to say "make it your mantra", and of course I knew "mantra" is not necessarily a term she would recognise if she was strongly of Christian faith, whereas to me "mantra" is a word I have an appreciation for. But she certainly picked up on that and understood that and knew what to do. It was quite interesting to be able to do yeah, you know, that's I guess where I use spirituality directly with clients when they introduce the subject, and then kind of go with whatever comes up, and at the same time look at my own life experience and how I can sort of pull this bit and this bit and tie it in with their spiritual concept. So it's quite satisfying (NZIRSSOWK II participant A).

The Community Praxis Cooperative (2007) suggests in their “Living Community Introductory Course” strategies that draw on a range of values and understandings from varying spiritual traditions. The Coop identifies the similarities and connections between the varying value bases and highlights the ability to employ principles from the varying traditions to convey the same message.

Additionally, participants recognised the narrative potential of spirituality particularly the ability to draw on narratives from many spiritual traditions as a means of connecting clients’ stories with powerful external stories.

I really like the Jungian way of thinking about archetypes. I recently read a book. It talks about myths and how the story can parallel a journey or a process and how it’s actually spiritual, a thing of discovery of the self and for a person using a narrative, a person telling a story, thinking about what would that mean and building a meaning out of that and another person think about it in a different way (NZIRSSOWK II participant C).
Jung (1954) suggested that spirituality and religion are of importance to the human psyche. Jung argued that all human problems are spiritual, the sufferings of the soul that has not found meaning as a result of spiritual stagnation. For Jung religion and spirituality were fundamental to therapeutic healing processes. Jung believed that basic structures in the human psyche called "archetypes" are central to the process of individuation. Hannah (1981) believed that these archetypal images can be employed in the realisation of self through the use of active imagination.

One participant spoke about the narrative potential of employing archetypal imagery from within Māori oral traditions and how powerful mythology can be as a tool for connecting with clients’ stories.

So, that archetype thing being the best mother or being perfect partner or big wicket, what does that mean in playing those roles out. I suppose it’s food for thought really. Building in Māori legend, there’re so many archetypes, I recently worked with a woman who had been abused in her early teenage years and then there’s this myth that talks about ... I need to ... her name changed, and taking refuge with her mother in Papatuanuku, and being able to relate to that way and talk about this story, .. externalise that and when ... her mother figures who was she getting any support from, realising that she didn’t have any, that she related to men in a very sexual way and that was how she had power of control in relationships and then how that impacted on her drug use in terms of how she feels about that ... and need to ... herself out, so the process of the narrative opens the jar even thinking you were not able to open that ... she didn’t know about. I didn’t know about and just to ... use some. I guess by using a myth like that legend creating a safe space for her to go there without reliving the trauma (NZIRSSOWK II participant C).

**Anti religious Sentiments**

The participants also spoke of utilising the clients’ spiritual practices with them when asked to do so and recognised a level of tension in doing this. They recognised that a level of anti religious sentiment exists particularly within the statutory sector and can be a controversial area where there is little or no legitimation for the use of religious and, or, spiritual assessment and practice inclusion.

I think that spirituality in social work historically started with all religious groups and they started social work and then there was a move away from that to very PC stuff which is anti-religion within social work. Yet, I think in New Zealand we
are learning a lot from Māori spirituality and Pacific Islanders and different other groups, but I think people ought to learn from them and there has been a trend towards working back, certainly in government agencies. Like CYFS, they're still very anti, anti-religious and anti-spiritual (NZIRSSOWK II participant D).

Yes, it has been negative because I suppose with all the meetings as a social worker you don't sit there and include if you will leave it to the families to open how they want to. There's a bit of an element. That's how I found it, but not pushed, it's just a spiritual thing for everybody in CYFS everybody would agree that a lot of people would be wary of people who talk about religion (NZIRSSOWK II participant F).

It can be expressed quite openly. And I think people with a very strong faith keep working at their level and will include it like in meetings opening prayers. That is utilised. I can understand what you're saying, that some people who don't believe in, say Christian values, or any other values, they will not, go there for example if a client is talking about their religious values then some might believe "ok, it's their way of coping when they're stressed. And for some, they would think "Ok, that would be giving them some basis in their lives to cope. I think there's a difference. If you have a faith yourself then they will believe what a client is saying, but if you do not have that religious belief, you don't believe in a particular religion then for some persons it may be difficult to believe... (NZIRSSOWK II participant G).

I think it would depend on maybe each individual person or where they are at, I think we should be accepting of where people are at. But I suspect that maybe while I'm talking people out there may not be so accepting (NZIRSSOWK II participant E).

I think it impacts within offices in management about how much you're allowed to express your spirituality. There is that negativity and the clear opposition to expressing any sort of spirituality (NZIRSSOWK II participant D).

I worked for two different ones in the past. One I can remember the person running the social work part didn't see it as acceptable to include, and with the other one we started our day with a prayer, for me it was a good way of focusing on what you want to do (NZIRSSOWK II participant F).

In New Zealand I think most of the population don't go to church, and yes, I am one of them. So I think for a lot of people there are levels of wariness. I think it is across the board, yes, a lot of religious groups that, I think, there is once again a lot of people against them, who are quite anti (NZIRSSOWK II participant G).

Equally, participants recognised there could be difficulties within religious based social service organisations.

I worked with one of the Christian organisations, and there was a degree of whether you were more religious than others within the social workers, so, some people are very expressive with their religion and will pray over anything, but
other people are more reserved. I don’t know, there’s a whole continuum of a variety of things and disagreement about how much is too much, how much is acceptable or how little is acceptable. Does that make sense? If you don’t want to pray about everything, then that was criticised, passively more than anything (NZIRSSOWK II participant F).

I’m not so sure about the New Zealand context, but can we go away from that? Because I used to work in my own country, in India. I worked in a Christian based organisation. There we had this policy of starting the day with a prayer and reading the scripture about anything, any problem, because we were working with children, this idea used to come from the top level, ok, let’s put it together in prayer (NZIRSSOWK II participant G).

Ward (2004) recognises the level of anti institutional sentiments in New Zealand, participants within these focus groups observed a level of anti religious sentiment and a level of wariness both at a macro and meso organisational level. Participants also reported numerous ways this sentiment is evident in agencies. Some comment was made about identifying people who are considered overzealous religiously and efforts made to exclude them from employment.

It depends on the impressions of religious groups that are around that’s affecting people, especially even places like CYF. You’ve got atheists or agnostics or very anti-any-religion and anti-their-colleagues. We had one guy I worked with and he’d picked the religious students as soon as they came almost as soon as they walked in the door or rubbish their beliefs they do that quite vocally (NZIRSSOWK II participant D).

I am just trying to think of the many years I have been a social worker I am not aware of that many people actually who come as social workers who are regular church goers (NZIRSSOWK II participant E).

They get weeded out (NZIRSSOWK II participant D)

Sorry? (NZIRSSOWK II participant F)

They get weeded out because of the interview (NZIRSSOWK II participant D)

I think so, yes, and recently (NZIRSSOWK II participant E).

I can’t say that it does, but maybe....it does (NZIRSSOWK II participant F).

I think it also depends on the people who claim they have a strong faith (NZIRSSOWK II participant E).

Furthermore, participants recognised that sometimes their beliefs need to be kept in the background.

I think there are people who want to make a choice, they want to be free for doing certain things and like religion for a person with a strong religious faith is a kind
of choice the person is doing something which is very different from a normal person. I think how religious groups demonstrate or display themselves keeps people at a distance and so acceptance is very important when two have to work together. I think it's hidden like I didn't find anyone being very critical of people having religious beliefs or strong faith. So, in terms of social work practices, it's still a very difficult area for example if you're working with a particular faith based organisation, it's so different the way they're functioning, but if we are working with a kind of secular organisation, it has got to be kept in the background. I think we cannot be going out and saying this is where we come from. It has to be a certain balance (NZIRSSOWK II participant B).

I've only had a couple of incidents in 5 years I've been working in social work. Somebody's been asking me to pray with them that's come up over this time there has been a client in social work and relationships where I built up, it's been long-term, not sort of acute, fly by night, seen them once and you're off kind of thing, and I cannot even remember how that came about, but I think as you share or they ask you about your beliefs kind of and you tell as much information as you feel comfortable about and there has been an incident once where somebody asked me to pray, and I'm very comfortable doing that, but I do remember feeling "oooh, am I supposed to be doing this in social work?" As a person I'm very comfortable doing that and I did feel comfortable doing it and I felt it was appropriate because she had initiated it and she knew I was comfortable doing that. So it was ok. But it did go through my mind, its one thing that doesn't always sit comfortably with me only because of how other colleagues and bosses and people in general might feel about that. There's a little bit of conflict (NZIRSSOWK II participant A).

Taboo topic

Participants also felt that the area of spirituality and more particularly religion can be a subject that is Taboo and should be discussed in private. They also felt that at times there is a level of avoidance of the subject combined with negativity.

Personally, my impression of how the DHB would be endorsing that, I don't know if they put much importance on that. That's just my impression. Purely because of the medical side of things, and I'm thinking of upper management, I'm thinking particularly of people who if they hear about different things that we might be doing like say, somebody perhaps talking further about spiritual journeys and things like that, my impression would be pooh-poohed by upper management. I am sure it wouldn't be via direct boss but the organisation as a whole who are paying us and who are wanting the service to work within the hospital, I don't know if there will be a lot of understanding or a lot of endorsement on that. I mean it's reaching that state. That's my impression (NZIRSSOWK II participant I).
That’s interesting, though, isn’t it? Because at the same they would not at all pooh-pooh if you were having like a family meeting in a whanau situation and if it was perfectly opened with a karakia and finished with a karakia and do all those things. So, why is it socially and culturally acceptable to do it in that one culture but not with another culture? (NZIRSSOWK II participant J).

That’s right. It’s like the discussion we were having in the lunchroom today. It conflicts, doesn’t it? (NZIRSSOWK II participant I)

Yeah, and I think perhaps it’s in areas, even the social work association, it becomes a bit taboo to go there and yet if you look at social work assessment, you know, we are invited to incorporate a person’s spirituality in whichever way that is that they place themselves and then should be part of that holistic nature of a person and what the part is they operate from. So, I think as social workers we can actually take claim to that. We can actually claim that that is a part of what we do as social workers and that’s part of the badge we’re wearing, we’re actually legitimising that for us to go there and I think somebody said earlier it’s just that wholeness of the person, how do you live without, really, it’s part of us (NZIRSSOWK II participant K).

I remember that there was a flurry last Christmas, about somebody who didn’t like our nativity scene in our foyer and quite affectionate people who, not atheist, but very vocal sharing that the Christian idea should be so in your face for everyone that’s going to be sitting there waiting for a counselling session or whatever and how disrespectful that would be to them, that discussion ended up being a hidden conversation, because people didn’t feel safe talking about it (NZIRSSOWK II participant I).

Do you think there is an element of that with the topic, that feeling of not being safe? (NZIRSSOWK II focus group facilitator)

It depends very much when you collect your base, too, because I think it’s the same with anything, if you’re the one gay person or the one Christian person, or one atheist person or whatever, you know, you’re obviously in the minority, so you’re not going to speak out as clearly and as boldly as if you’ve got 2-3 mates sitting by you, who you know are kind of prepared, too, to come forward and engage in those conversations, too (NZIRSSOWK II participant I).

I wonder whether all social workers are themselves very comfortable going into that spiritual area. I’ve met a few social workers since I’ve been working obviously and my impression is that not everybody, a lot of people even working in our area, find spirituality threatening either because they perceive it as fundamentalist Christian or they’re just not particularly interested in it. It raises those questions for me, too, about spirituality as a very wide and broad concept whether they want to go there in terms of assessing and things like that. It’s just a question (NZIRSSOWK II participant K).

If you were practicing social work in a country where there are so many who follow religion and for people religion is the central part of their lives. Very few people would say “I don’t believe in any religion” Very few. It’s easier to talk and
discuss, and people would be quite sharing, for example, they are having some particular religious day, and you go to see them, it is quite normal for them to offer you the particular thing, for example food they offer to the god, and then it is offered to the people. So if you go there as a social worker it's a courtesy for them to offer that to you and if you refuse it, you would sometimes hurt their feelings. Whatever faith you're coming from, it's out of respect that you would accept their particular ways. They would even sometimes tell you that is the way to receive it, so you would have to put your hands in a particular way to receive it. You may keep it in your hand, and come out and may not eat it, because of your religion. But sometimes you eat, because you don't want to affect your relationship with the family. But coming here, because the people are aware of their own space and the other person's space, probably they would not tell you to do anything without asking you. So I think the social worker as well as the person they're working with is aware of their own personal space. But as a social worker to probe into their beliefs is difficult, because you do not want to get into too much of their personal space. It could become difficult to handle if you're not prepared if the person is not comfortable discussing those issues. So you have to be careful, whereas back it was a normal thing, part of life (NZIRSSOWK II participant I).

We don’t shout at the top of our lungs where we stand. We might have a quiet talk among ourselves about it. I think that’s how it is. Or you might know that someone has a strong faith, but they don’t shout about it (NZIRSSOWK II participant K).

Social Work Education

International research has shown that there is a lack of education for social work professionals in this area with limited ongoing professional development (Furman et. al, 2005; Sheridan, 2004; Moss, 2005b; Gilligan and Furness, 2006). Participants were queried about their level of educational experiences in this area. Participants also shared some perceptions of what they considered needed to happen in this area within the social work curriculum which would be beneficial.

From what I can recall from my social work training is only that there’s that spiritual dimension that needs to be part of the whole I don’t remember much more (NZIRSSOWK II participant D).

I think I got much more out of my training, I have got more out of it recently just with being with other students and colleagues and what they bring into it and talking about spirituality in Māori papers, just talking about any papers I’ve done, a sense of spirituality tends to come up. Not so much in the course material and as in relating to clients (NZIRSSOWK II participant E).
In our curriculum we didn’t have any particular paper on spirituality in social work, but there were certain aspects in the syllabus, like Ghandi in social work. Ghandi himself was a very spiritual person. That was an aspect introduced to provide some sort of example of the role of spirituality in social work, but not all of the students were reading Ghandi in social work, that was an elective paper (NZIRSSOWK II participant G).

Participants felt that the current social work educational content in Aotearoa New Zealand lacked attention to spiritual diversity.

I think what’s lacking at present is an understanding of diverse beliefs. I’ve been in an office where they had a lot of students coming in on placement and the ones we had the most trouble with tended to be I guess younger students who come from a deeply religious home and they have no other worldviews or experience with blinkers on, they have no other perspectives of life, how other people live. They can be anti-gay, they can be anti-abortion. But also just moral and ethical issues that come up in day-to-day social work, and they just don’t have a clue. They decide to become social workers when they’re 17, and now they’re 21 and find themselves out in the big world, in the real world. Somehow that needs to be brought into their training (NZIRSSOWK II participant E).

A diversity of religious perspectives (NZIRSSOWK II participant D).

That would be good, wouldn’t it? And not just Christian, you’re looking at Hindu, Muslim, and Buddhism (NZIRSSOWK II participant F).

I am sure it would be good, because I feel with my current job, you’re certainly learning from the clients the differences. I am doing a lot of learning at the moment, because it’s their story, you need to listen to it, to what they’ve got to say (NZIRSSOWK II participant D).

I’m thinking what you just said about knowing different cultures, different beliefs, and spiritual beliefs. For example, for me, to know about Māori beliefs was a new thing, it was something that I learned and it has been very positive for me to know that. So when working in social work you are sensitive to the beliefs of people and you are respecting them as a social worker (NZIRSSOWK II participant C).

When you’re working with someone similar to yourself, they’ll say something and they don’t need to explain it because you know, and then as you work with different cultures and you hear things such as, a pacific island person will say, “you know, yes, I slept with my baby” or “no, I didn’t sleep with my baby”, you understand what that means because you now know. That’s where the answer is for social work training, if this was more in the social work training. Especially with our society now (NZIRSSOWK II participant A).

I think there are certain things, for example, if you are entering somebody’s home with your shoes on, it’s quite ok to ask people if that’s okay or not some people have a special rule, they don’t like it, it could be a special prayer room for them, or something that they have kept which is specially related to their religious
beliefs, which could be in any religion, it could be Muslim, their scriptures, so we could be more aware and more respectful (NZIRSSOWK II participant B).

I wonder if in the example you gave of the young social workers coming in with their blinkers on, their way was right that if they were exposed to all these other types of religion that would probably broaden, and see other people’s points of view and be able to accept it but keep their own. A compulsory paper in religious studies or something like that (NZIRSSOWK II participant A).

They’re still not going to learn. They’re going to learn the theory, they’re not going to learn unless they want to take it onboard and be respectful (NZIRSSOWK II participant B).

But you have personally found that it has been helpful to be with a group of colleagues in your social work education and be able to talk about these issues. Or with a group of colleagues like we are now (NZIRSSOWK II focus group facilitator).

Yes. Especially when you got a whole range of ethnic groups (NZIRSSOWK II participant C).

Do you think we need to start having working groups to get social workers together around this topic exploring ethical issues, education, assessment? Would that be a helpful exercise? (NZIRSSOWK II focus group facilitator)

I think that would be good. I think that the topic needs to be brought to the surface a lot more (NZIRSSOWK II participant B).

Yes. I think so (NZIRSSOWK II participant A).

Participants also acknowledged the importance of Māori spirituality and how this added to their social work education, particularly in raising their awareness of spiritual concerns and considerations. It also promoted conversations about the integration of spiritual self reflection and spiritual journeys as a practical educational tool for social work training. Authors acknowledge the role self reflexivity plays in social work and the importance of knowing ones spiritual self first (Sermabeikian, 1994; Hodge, 2003; Fukuyama and Sevig, 1999; Lines, 2006). Participants viewed the exploration of spiritual self as a possible key ingredient to being self reflective at a very deep level. Nash and Stewart (2005) recognise the propensity for spirituality to deepen the therapeutic effect of professional helping.

I think the most significant spiritual learning for me involved a Marae stay, the local Marae was probably the most spiritual thing. We were in a building, someone did a karakia, and we were welcomed in a ritualistic way. We were in a place where ancestors were honoured, and the whole experience was about the spiritual aspects that would be the most spiritual learning for me (NZIRSSOWK II participant B).
That's very much about the people; a group of people who tend to be spiritual isn’t it? More than the actual setting. I mean the setting is part of it, but people who are spiritual are part of that too (NZIRSSOWK II participant C).

That’s right. In my training I felt as though, we were made aware, like I felt like I came out having a bit of an idea that this was quite an integral part of what we are meant to be doing, but I agree if there are people who want to talk about spirituality and spirituality is important to their own lives, then you are going to have a much better learning experience because people are going to talk in tutorial groups or whatever, as opposed to people who may not really have thought much about it before (NZIRSSOWK II participant B).

Whilst the participants recognised that the introduction of content had raised their awareness of spirituality they considered that personal development and self reflection often involves an element of spirituality. They felt however that deep self reflection is not viewed favourably by all social workers’ and that some are unlikely to be interested in spiritual self exploration processes.

I think as social workers we are challenged to look at our own personal development, our personal journey which I think can be a spiritual experience if you are allowed to be open about it, but I think a lot of people just go through the motions around that. From what I was picking up from people saying actually quite a lot of people resented having to do that (NZIRSSOWK II participant A).

I always find any chance to do a bit of self-exploration it is just invaluable but a lot of people didn’t want to go there. Some people just don’t want to go there. How they incorporated it in their practice. They are not interested in it (NZIRSSOWK II participant A).

You get people that might not talk about it too much and take everyone hostage into their own process or their own experience, without being able to have a free dialogue (NZIRSSOWK II participant C).

One participant recognised that often approaches to education in this area associate spirituality with the cultural other with an approach that excludes religious references.

We have a depiction of spirituality oriented towards other cultures and I suppose, I am not sure actually when I think about it how much time we spend thinking about religion, which can be a fundamental building block for culture. So we talked about what you do and don’t do, for example if someone was, I can’t think, worshipping cows or something, cows are sacred things which is, you know, why is that, what builds that faith and why do we need to respect that? (NZIRSSOWK II participant D)
It’s probably got something to do with really, you know, practicalities, that they drank the milk, but they couldn’t kill the cow. That’s how things start, you know, for practical reasons (NZIRSSOWK II participant E).

But if you parallel that, the cow being a nurturer of life. Māori way of thinking about women is a life bearer, being able to give birth to children, they are ways of understanding frameworks (NZIRSSOWK II participant D).

Another participant acknowledged the significance of Māori spirituality and the potential of this to enrich social work in Aotearoa New Zealand.

And I think in New Zealand we have a wonderful opportunity to incorporate spirituality through the Māori way of looking at life. There is this whole thing of honouring women, honouring the earth, you know, all that is so, to me, it does encompass, it is all spirituality. So social work is in New Zealand. I think we got quite a unique opportunity really. I remember when you asked that question, I thought mainly of a community, it was a social work course years ago, and I did three of them, dropped in, didn’t think about it for several years, but it was biculturalism and they got us to look at our own journey. First thing we had to do was just mapping out where we came from, where our standing place was, and where our ancestors were from. Kind of mirroring that Māori model. And I found that a really amazing experience, cause my ancestry is Scottish and my mother who used to really promote the fact you are from the Scottish line, we had this castle in Scotland, you know, and I used to think “blimin’ snobbery”, absolute snobbery, and I really rejected that aspect of myself, and yet when we were asked to talk about our groups, and somebody said to me “you know this thing about the castle in Scotland?” and this person said to me “but wouldn’t you like to go to Scotland?” and I said “yes, I really would like to go to Scotland and on the hills” And I really kind of touched that place in myself, you know, and so I think I found that the journey in myself and finding my own roots, my own background, was a great place to introduce spirituality into my practice (NZIRSSOWK II participant F).

The participants also considered some possible issues for social work students and how they might engage in spiritual self exploration in the curriculum. Whilst they felt this would be difficult for students they believed it could be an important starting point for self exploration.

It’s interesting, because I was just thinking as you were talking, that would be a huge challenge to ask. I don’t think we did this when I did my study, but it would be a huge challenge to ask your group of students to actually write an essay on their spiritual self, and to part of the prerequisites for that to research different faiths, different spiritual believes, whatever, and draw from those perhaps how they enact and perhaps how they’re totally irrelevant to the way you see your spiritual self, and even if some people’s spiritual self is going down the first day, chill out, you know, I think that would be a huge challenge. It would really make social work students stop and think. I don’t remember having an opportunity for
that level of self-reflection and I think it would be hugely helpful in terms of going out and practicing (NZIRSSOWK II participant D).

I was just reflecting on what it would have been like as a student. I don’t think I would be able to reflect deeply about it at all. As I’ve been practicing, working with people, having experiences, that have challenged me, challenged my worldview, challenged the assumptions I had about other people, assumptions I had about myself and re-discovering, like triggers for me, having strong feelings or anger about something and asking where is that coming from? And exploring that a little bit. And practicing being reflective and practicing a reflective practice, working and thinking about it while I’m doing it. I wonder if I would do it as a student. I would have done a superficial thing, trying to meet the questions they were asking, and come from a really intellectual space, rather than from a kind of head-body response. So I think it would have been mostly missed the process (NZIRSSOWK II participant F).

I think it would be very difficult, but I think my reasoning for that would be to at least start something. I totally agree with you. When I started when I was 18 there was no way that I would have, you know, 10 years later I’m almost a completely different person in that respect, yeah, I agree with that. I think a really good place to start, to actually start to think about the concept of spirituality, even just what does it actually mean (NZIRSSOWK II participant E).

So what about that experience that I had, kind of like mapping out and exploring my own ancestry? Would that be a place to start rather than actually have to write an essay? I mean that really worked for me, but that might just be the way I experience things (NZIRSSOWK II participant D).

As you talked about it I was thinking about my own process, it is very similar in terms of unfolding. It’s a little bit likes waves on a beach, where you have a first wave that hits and has a little impact and a little bit later the next wave hits you and then you have a king tide, it comes along and blows you away and you have to gather yourself again. So I think it’s not a process that actually finishes (NZIRSSOWK II participant A).

No, no, I’m thinking more around a starting place, really. If you’re thinking of integrating you could certainly offer that option as something that might be beneficiary and help you. And even start thinking about that process (NZIRSSOWK II participant B).

Or phrasing it in a way that it is actually a spiritual journey as well. You’re standing in the room, and those people behind you, parents who gave birth to you as well, extended whanau, all those other experiences that made you dragging along so and so behind you, thinking about the person in front of you should have done (NZIRSSOWK II participant C).
Therapeutic connection, resilience and self care

Another factor important for the participants related to spirituality was ideas of connection self care and personal resilience. Nash and Stewart (2002) believe spirituality contributes to the relationship between social workers and their clients and state: “In our view spirituality opens the door to integrity and genuineness in our relations with others who may be limited by personal difficulties, situational circumstances, or oppression” (Nash and Stewart, 2002: 11). Nash and Stewart (2002) add to this conversation drawing on the work of Martin Buber stating:

In a spiritually sensitive practice the relationship is typified by a greater sense of connection between oneself and the other. Buber talked of this when he said there are two types of relationship: the ‘I/It relationship’, in which one treats the other as different from oneself, as something of an object; and the ‘I/thou relationship’, in which the other is treated as oneself. Within an I/Thou relationship, an energised merger between the two people becomes possible (Nash and Stewart, 2002: 19).

Canda and Furman (1999) also considered the importance of spirituality for connecting with clients on a deeper level.

And connection, I think, to me is a very spiritual concept. And I always come back to, I was going to say Karl Marx, but no, Karl Rogers! He talks about it’s the way we are with people that has the biggest, greatest impact, it’s the way we are with people. You can have all the skills but if you’re not actually having that positive regard for the person, so for me that’s where it kind of comes back to, having that positive regard. Sometimes, you may be really aware when you’re not having that positive regard (NZIRSSOWK II participant D).

When you don’t have compassion you feel hardened. I worry about that sometimes within myself, I’m thinking why is this so normalised, that the person is in utter chaos and in pain, isn’t touching me? That’s something I reflect on often, because I suppose I try and practice wakefulness and gratitude as opposed to winging, moaning and sort of wishing I didn’t have to. And part of me thinks you need to be grateful for the fact you’re still alive, for the grace of God, and that the client’s a person far worse off than you, going down that road. Here you are. My life is actually not that bad, you’ve still got relationships intact or whatever. I watch that about myself (NZIRSSOWK II participant A).

It’s very easy to lose that. I remember feeling exactly the same after a couple of years. Thinking this is dreadful, you know, I’m losing myself, that’s how I felt like, because I think you do develop a bit of a skin just to cope sometimes and I can identify with that, I’m thinking I don’t really like that and what can I actually do

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to maintain my spiritual self really? So that it doesn’t become a burden? (NZIRSSOWK II participant D).

It’s about how we nurture and love and look after ourselves. I just noticed that, like starting a new job and you’re quite anxious about covering particular areas and notice how that kind of splits me as a person, you know, and because for me, too, my spirituality is very much linked with my womanhood. So when I talk about things like compassion and connection, and I think of that very much as being a very feminine part of me and when I get into this really task-centred, have to tick the boxes stuff, which I can get into and tend to get into that when I’m kind of anxious about situations, time pressures, and I get into this ticking the boxes, and I think “Oh, God I wasn’t present with that person at all”, and I don’t feel I did a good job as a social worker, and I certainly didn’t have any kind of self-satisfaction, it didn’t nourish me. When I connect with somebody, when I’m really there with somebody, it really nourishes me, too. There’s this real sense of satisfaction and pride in what I’m doing and it’s more than that, it’s not an ego-thing. It’s more about a real sense of wellbeing in me and yet when that’s missing it is kind of like “ok, it was missing from my practice, but it was really missing from me, and it’s taking away from me. And noticing all those behavioural things that are learned behaviours, that I can get into, that really impact on my spirituality and impact on me as a person. And that’s the time to take myself out and spend some time for me and get back (NZIRSSOWK II participant C).

I was just thinking that in terms of working with people I feel like I’m satisfied having done a good piece of work and having made the connection. Often I actually don’t feel that. I guess, too, that would be a reciprocal thing for your client not enjoying the process, but there is a mutuality there, whereas sometimes and most of the time for me it feels like I’m giving so much, it’s sucking all this energy out of me, and I’m doing all those things and no “thank you” at the end of the day. No acknowledgement. It’s about thinking that I’m actually not here to be patted on the back, I’m not here to have myself built up once in a while someone says “I really appreciated your time with me” or whatever. Those are the situations where I think; yes this is why I’m doing my job. This is actually not why I do my job, where I want to be thanked for, I’m not a do-gooder I’m here to address social injustice and that feeds my spirituality (NZIRSSOWK II participant A).

Participants also recognised that their varying spiritual belief system is an important part of their self care and enabled them to be resilient in the midst of difficult work. Sustaining their spiritual selves is an important part of their professional approach.

Eastham (2002) recognises the importance of social workers needing to be healthy and whole when working with others seeing spirituality as a key ingredient for what is termed the ‘interior journey’ Eastham (2002) observes that social workers deal with people in pain and states “it is imperative that they embrace this difficult inner work” (Eastham, 2002: 86).
For me, I've been reading today a research in mindfulness, meditation and that's a very simple thing of just attending to your breathing and I find when I remember to do that, which is very helpful for me. And I again, I had experienced with my new job in that I've been aware that I felt anxious and of course if I start to feel anxious then I don't perform well. What that teaches you to do is like all about being in the moment, you start to catastrophise about what might happen or worry about what did happen we are obviously not in the moment. And all it tells us to do is not to judge that in any way or to try...I know, I could get into this self-talk “its alright.”, and calm myself down with self-talk. And that can be helpful. But what this teaches has to do with spirituality. I think spirituality is about living in the moment. And all it tells you to do is just like just notice it. So, you're anxious, ok, return to the ...breathe, concentrate on the breathing. I find that as far as resources go so helpful, because what I can do is to feel anxious and actually get stuck and be anxious. As far as resourcing myself and maintaining myself I find that very helpful practice that I am learning to incorporate (NZIRSSOWK II participant D).

Being with people who are spiritual, feeds my spirit. Having people talk in a way that, again, the noticing, the things that are good and not so good, perhaps we should reflect on things that I've got, you know, good and not so good, I suppose is about feeling grounded, being grounded, and human, and being able to have flaws, and just to work towards continuous improvement. Whether that's my practice or things that I want to improve for me (NZIRSSOWK II participant A).

I guess for me my spirituality lies around a Christian base. We are really responsible as practitioners to look after ourselves in that respect if that's part of our role to make sure that our clients are seen to holistically really, and I basically I try each day to spend time, even before work starts, to spend time praying, contemplating what's before me and handing my day over, and allowing God to direct my steps for that day and trust that really that I am hopefully not determining what I'm doing because I'm going to get that horribly wrong, but that hopefully helped really, and that will actually impact on other people and I will in the right place and right time, and I'll be talking in a way that other people will basically be helped, “be helped” sounds terrible, I don't want that word “be helped” because I don’t like to think of myself as a helper, and there's the whole world with...I guess that sort of of what I'm thinking about when I talk about that, and I like being talked to 'no I can't do any other less, I'm actually looking after myself', and I do notice that when I'm not, I'm not actually sitting there partly listening to my own spirit (NZIRSSOWK II participant D).

I guess, too, I really try to make use of spirituality to be able to feel ok about my personal life and that it is manageable whilst trying to help facilitate other peoples’ lives that maybe in complete chaos, really trying not to mirror the processes going on and feel so out of control with myself and my own life, how can I possibly meddle in someone else's life, trying to attend to what they need to. I suppose that's the principle of cleaning up my own cupboard before someone else's (NZIRSSOWK II participant C).
Cultural inclusion, specificity, exclusion and giving preference

The participants also recognised that at times spirituality is an option for some and not others dependent on their particular cultural background. They also indicated that there are some problems with this approach from their perspective.

*I like that things are quite secular, that there is no Sunday school taught at school anymore and my daughter doesn’t have to sit there like I had to (NZIRSSOWK II participant A).*

*I guess I would like to think that everything was included, I still get the sense that like you were saying how you feel about it, rebellious and resentful, and I appreciate that and that the sense that I get from a lot of other people, that’s why I would like to think that Christianity in itself was included and accepted as well as Karakia. For me, I get the sense that Karakia is a very comfortable for people. It doesn’t threaten them, whereas, like I was mentioning before, prayer does threaten people. And I would like to see that that maybe became rather the norm, if that’s what people wanted to do, but of course you don’t have to, but people wanted to and asked and it was made available just like other kind of spiritual perhaps rituals, if you want to use that word, were sort of accepted (NZIRSSOWK II participant D).*

*That woman I referred to earlier about how, you know, let go and let God, and her declaring her faith in the family meeting, could it be, in a European Pakeha situation, an opportunity for me as the facilitator of the meeting to say ‘would you like to start with a prayer?’, not that I knew beforehand that she was religious, but had I known, I could have done that (NZIRSSOWK II participant A).*

*Maybe we just don’t offer our Māori clients that opportunity perhaps we offer it to everybody, regardless, we say something like “is there something that would be meaningful for you to open this meeting or would you prefer to just get under way.” You know, that’s something I never really followed through, because you get so busy, and have no time for these sort of things, but it can be quite helpful I guess to how a meeting actually flows, to help people respond, and to enhance the whole spirit of the meeting. for me, I sense a tangible spirit in meetings, whether it’s positive or negative, you know, that maybe a huge positive influence on the actual outcome and the people’s experience (NZIRSSOWK II participant C).*

*That would almost be like starting the meeting off acknowledging the sort of “higher power idea” again, but maybe even acknowledging the reason why you are at the meeting for each person you are going to talk about and talking in a positive way about that person (NZIRSSOWK II participant A).*

*I think we do. There’s a tendency to not help the situation, when we are putting our view that we think that, this should be done, one example we had, was opening a meeting with a karakia and one of my colleagues was pakeha and she*
was saying "come on, we must have a karakia, everybody come together ..." And at the time, we weren't interested. But it was the Māori thing to do, and they were Māori. I think there is a tendency to jump in there, too (NZIRSSOWK II participant C).

My adult children are Māori; they sort of feel the same way. Often people are putting things on to them that they don't want, or they don't think is necessary, or they think it's almost just for show for the pakeha people that are doing it (NZIRSSOWK II participant D).

Conclusion

The focus groups provided another layer of data from the themes that emerged in NZIRSSOWK I. It also provided a space for further analysis and a space for professional social workers to discuss the topic further and add to data analysis by encouraging group reflection on the data. This chapter has presented this data verbatim to also give the reader a sense of the discussion. A deepening of the data was able to occur that highlights a number of important issues in relation to spiritual and, or, religious integration. Macro and meso viewings of religion and, or, spirituality the implications of these and the level that these viewings are impacting upon how social workers respond to spirituality and, or, religion in practice. Significantly, this conversation has evidenced a level of uncertainty, a lack of support and restricting of conversations and open discussion in this subject amongst professional social workers. Furthermore, it has highlighted differing approaches and levels of legitimation cross culturally and the need to broaden the social work profession's ability to respond to issues of spiritual diversity.
Chapter 8: Mapping the terrain: Discussion of the Findings

In this chapter the findings from both stages of this research NZIRSSOWK I and NZIRSSOWK II will be discussed. The discussion will address each of the research questions:

1. What is the role of religion and, or, spirituality in the social service context of Aotearoa/New Zealand?

2. To what level is spirituality and religion being integrated, within the context of social work practice and education in Aotearoa New Zealand?

3. How do social work practitioners integrate religion and spirituality within their approaches to practice in Aotearoa New Zealand?

4. What are the perceptions and attitudes of social workers and their agencies towards the appropriateness of including spirituality and/or religion in social work practice in Aotearoa New Zealand?

5. How will this affect professional practice?

Given the studies’ limitations, implications drawn from these findings should be treated with caution. However, the quantitative findings, deepened with insights from the qualitative data and the literature review, lead to important considerations.

Spiritual and, or, religious Integration within the ANZASW Code of Ethics

A key aim of this research is to identify and provide a base level of information about what is occurring in practice involving the area of religion and spirituality for future discussions and developments. The starting point for this investigation was recognising a significant gap in this area in the professional social work curriculum whilst reflecting on the implications of
the Aotearoa New Zealand Association of Social Workers (1997) code of ethical practice statement:

Social workers respect the worth and dignity of each person and group, and acknowledge their age, beliefs, culture, gender, marital status, family status, intellectual, psychological and physical abilities, race, religion, sexual orientation, and social and economic status

(ANZASW Board of Competency, 1997; emphasis added).

The above statement employs the word “acknowledge” in the context of respecting the worth and dignity of clients in relation to religion and other important client factors. The uses of the word “acknowledge” requires professional social workers to recognise that religion (interestingly the use of the term spirituality is omitted) is an aspect of some clients’ lives.

Acknowledge can also be defined as accepting or admitting that a) the object of acknowledgement is true or b) that it exists actively; acknowledgement requires that social workers recognise the religious beliefs of their clients. However, does the usage of the word acknowledge within the ANZASW (1997) Code of Ethics denote more than a simple recognition into an informed and appropriate response to the client’s religious and, or, spiritual belief systems within the Social work practice context?

Interestingly, in the revised ANZASW Code of Ethics (2008) the above statement has evolved to include what could be interpreted as a move beyond acknowledgement to practical application that is concerned with an appropriate response. The ANZASW Code of Ethics (2008) states:

Members respect the worth and dignity of clients, and work in non-discriminatory ways that acknowledge the age, beliefs, culture, gender, marital legal or family status, intellectual, psychological and physical abilities, race, religion, sexual orientation, and social and economic status of clients (ANZASW, 2008: emphasis added).

Additionally, this requirement is not limited to social workers who are members of the ANZASW but is a requirement of all registered social workers and social workers in general in Aotearoa New Zealand given the adoption of the above Code of Ethics by the Social Workers Registration Board under the auspice of the Social Workers Registration Act (2003) to meet competency requirements.
Moving beyond acknowledgement into practical integration is also in line with international developments in which codes of practice explicitly recognise spirituality as an important aspect of holistic care. The IFSW (International Federation of Social Work) practice principles state that “Social work is based on respect for the inherent worth and dignity of all people and the rights that follow from this. Social workers’ should uphold and defend each person’s physical, emotional and spiritual integrity and well being” (IFSW, 2004; emphasis added).

Equally, an approach to competent practice in this area should be underpinned by social work education that pays attention to facilitating a social workers ability to work in the area of spirituality and, or, religion. The IFSW (2005) explicitly recognise this in their global standards for social work education which state:

- Knowledge of human behaviour and development and of the social environment, with particular emphasis on the person-in-environment transaction, life-span development and the interaction among biological, psychological, socio-structural, economic, political, cultural and spiritual factors in shaping human development and behaviour.
- Knowledge of how traditions, culture, beliefs, religions and customs influence human functioning and development at all levels, including how these might constitute resources and/or obstacles to growth and development. (IFSW, 2005; emphasis added).

International developments are seeking to incorporate spirituality and, or, religious beliefs practically. These developments have involved attention to theoretical understandings and discussions, the development of spiritually based practice approaches that include the development of varying assessment tools and approaches to intervention.

Importantly, at an international level, attention is being given to understanding the importance of recognising the spiritually diverse nature of our clients’ lived experiences and the development of appropriate non discriminatory approaches which are able to recognise and respond to the diverse realities of clients’ spiritual and religious beliefs. These developments recognise the importance of not only acknowledging the diverse spiritual belief systems of clients and social workers alike but are wrestling with the practical issues faced by the profession after years of neglected attention to the topic.
Recognising and respecting spiritual and, or, religious diversity is in line with professional requirements to respect diversity in general as outlined in professional codes of practice such as the International Federation of Social Works statements on diversity, also included in the Aotearoa New Zealand Association of Social Workers (2008) Code of Ethics which states that “Social workers should recognise and respect the ethnic and cultural diversity of societies in which they practice, taking account of individual, family, group and community difference” (ANZASW, 2008: 17).

Given the above considerations a number of questions can be asked of Aotearoa New Zealand Social Work practice in relation to the inclusion of religion and, or, spirituality and the requirements to work with diversity. Firstly, are religious and, or, spiritual beliefs acknowledged by professional social workers in New Zealand? Secondly, do professional social workers in Aotearoa New Zealand work with clients in non-discriminatory ways that acknowledge religion, and, or spirituality? Thirdly, is spiritual and, or, religious diversity recognised and respected within Aotearoa New Zealand social work?

The role of religion and/or spirituality with clients in the social service context of Aotearoa/New Zealand

The history of social work in Aotearoa New Zealand has been influenced by British colonisation. This influence has included ideas about the nature of welfare provision, theories and models of practice, social work education and processes of secularisation (Nash, 2001). Whilst we share many of the international considerations the Aotearoa New Zealand context varies in the above trajectory in a number of important respects. Firstly, Taha Wairua for Tangata Whenua has always had and remained a central part of understanding and integrated part of social care and well being (Jenkins, 1998; Benland, 1998; Ruwhiu and Ruwhiu, 2005). For most of the history of social work in Aotearoa New Zealand, the importance of Taha Wairua has been denigrated due to colonisation, whilst western models and theories of wellbeing, developed parallel to processes of secularisation devoid of religious and, or, spiritual considerations, were elevated to a dominant status. Aotearoa New Zealand is considered to be a highly secular country (Bluck, 1998; Ward, 2003; Spong, 1997; Consedine, 2002). One participant commented:
New Zealand is a highly secularised nation with dullness towards the spiritual second to few other countries in the world (40-50 year old female NZ European child and family social worker).

It could be expected that social workers in Aotearoa New Zealand would be cautious about incorporating religion and spirituality into social work practice due to the secularisation of public institutions and social welfare. This level of caution is likely to be maintained by the minimal inclusion of religious and, or, spiritual concerns in social work education and the profession’s ethical and philosophical alignment with empiricism, secular humanism, and medical science, (Marty, 1980; Siporin, 1982; Siporin, 1985; Loewenberg, 1988; Holland, 1989; Bowpitt, 1998; Kendall, 2000; Forsythe & Jordan, 2002). Findings from this research show that this is the case. But they also show that many social workers in Aotearoa New Zealand are to various degrees addressing spirituality and reconsidering the role religion plays in social work.

As evident in this study, many social workers include their clients’ spiritual and, or, religious matters when it is relevant or appropriate to do so. This inclusion reflects a level of endorsement amongst social workers about the importance of spirituality, and to a lesser extent religion, in their work.

Additionally, findings of this study combined with the Aotearoa New Zealand census data have shown that identification with varying religious beliefs systems amongst social workers is high. Although findings suggest regular participation or active personal involvement in a formalised sense is low.

Findings also suggest that the participants’ belief systems will impact in areas of professional practice as a source of values and worldview (Sermabeikian, 1994).

I believe religion and spirituality to be the fundament of who I am, who we are, as a person/people. Therefore my worldview, my person my interactions with people and crucially my social work practice are influenced by this. Those who dismiss religion and spirituality are equally influenced by this outlook which impacts on their practice (40-50 year old female British child and family social worker).

Findings also show that spiritual and, or, religious beliefs can be a significant source of resilience for social workers and point of connection in their relationships with clients that can enhance and deepen the therapeutic relationship.
Despite the above observations the role religion and, or, spirituality plays in Aotearoa New Zealand social work is not without complications with a number of issues and obstacles that must be addressed if religion and, or, spirituality are to be given serious professional attention.

Social welfare programmes have been transformed into bureaucratic arms of the state emphasising managerialism, efficiency, and the quantification of tasks and outcomes (Jones and May, 1992), at the expense of helping relationships and professional autonomy. Forsythe and Jordan (2002) have argued in the United Kingdom context that New Labour policies represent a re-traditionalisation of social welfare that resembles Victorian era philanthropy, embraces a moralistic ideology, and rewards (deserving) service users who display self-discipline, individualism, and a will to reform behaviours and circumstances deemed unacceptable. This is the same for Aotearoa New Zealand and meaningful helping relationships, or relationships open to service users’ religious and spiritual needs, are seriously compromised, if not impossible, in such an environment.

Another obstacle evident in these findings is the perennial concern that service users will be exposed to proselytising in a professional setting, and that service users who espouse a ‘correct’ world view will benefit over those who do not (for example, refer to Battin (1990) and Baber (2000) regarding the moral issues related to proselytising and organised religion). Findings suggest a high level of uncertainty in this area particularly in assessment and issues around breaching client self determination; additionally participants were acutely aware of the issues but little discussion had taken place about how to proceed in this area. On the other hand, merging care with secular ideologies that minimise or ignore the religious and spiritual aspects of service users’ lived realities may also be a form of proselytising (Smith, 2001; Furman et al, 2004, Hodge, 2003a).

To an extent the issue of proselytisation is addressed in the ANZASW code of Ethics (2008) which states:

A member’s moral position or religious convictions do not override their duty to ensure clients’ independence. They will maintain professional objectivity advise clients of any potential and relevant personal, moral or religious conflict, and if indicated, offer appropriate referral to another social worker (ANZASW, 2008: 8).
Arguably, this position ignores the possibility that secular philosophies are imposed on those clients for whom spirituality and, or, religion is important. This may be heightened in Aotearoa New Zealand highly due to its secular landscape. A majority of participants found a wide range of interventions to be ethically appropriate for addressing service users’ religious and spiritual needs.

Spirituality or religion polarising views

As observed in international research (Furman et al., 2005) and within the literature (Praglin, 2004), preference for the term “spirituality” over “religion” is also evident within Aotearoa New Zealand.

Findings of this research suggest that the term spirituality and, or, Taha Wairua is the preferred term of use within the Aotearoa New Zealand social work context. It may also be that reference to spirituality or understandings of spirituality are largely associated with Tangata Whenua usage within the Aotearoa New Zealand social work context. This association may be due to differing levels of legitimation (endorsement) and inclusion, particularly at an educational and practice level and acknowledgement of the importance of Taha wairua for tangata whenua at both a state (Macro) and social service organisational (Meso) level as a commitment to biculturalism.

Findings suggest the use of the term religion is subject to a level of avoidance and, or negativity which may be attributable to concerns expressed about religion in relation to social work. This includes concerns about proselytisation, secular views, and a concern to maintain the separation of Church and state (Ressler, 1998), and negative constructions (discourses) of and about religion.

Deconstructing how the terms spirituality and religion are used by social workers and how both are conceptualised including associated attributes and what each means to participants is also difficult as both constructs are viewed similarly. When asking participants to describe or
identify descriptors attributable to spirituality and, or, religion the participants varied more in associating differing practices with each (e.g. prayer with religion vs. meditation with spirituality). Participants also focussed on some of the negative institutional aspects of religion versus the intra-psychological and more individualistic aspects associated with spirituality.

These perspectives reflect processes of polarisation occurring in which spirituality is constructed as the positive alternative to the perceived negative aspects associated with religion. Pargament (1999) cautioned against this polarisation of religion and spirituality around the issue of the individual (spirituality) versus the institutional (religion) and the good (spirituality) versus the bad (religion). The participants however did prefer to separate both terms and felt that it was appropriate and important to do so. The evident negativity towards religion may prove problematic as it could lead to a distancing from its recognition in the Aotearoa New Zealand social services context to avoid the negativities associated or lead to a continuation of seeing religious beliefs and experiences pathologically (Lukoff, Lu and Turner, 1998).

Crisp (2008) suggests that a way forward in highly secularised contexts may be to avoid reference to religious language and focus on spirituality as a notion of lived experience. Crisp states:

considering spirituality in terms of lived experience makes intrinsic sense, particularly when working in a secular context with service users and carers who may have little or no experience in reading or discussing issues of religion or spirituality. It can also enable discussion of spiritual issues to be incorporated into social work practice when either practitioners or service users have no religious background or affiliation (or no shared religious background), taking care to minimise the use of explicitly religious language. Importantly, it provides a way of beginning conversations in which spiritual issues and values and beliefs may surface, and by opening up discussion on these topics, service users may choose to respond by discussing specific religious practices or beliefs which are important to them (Crisp, 2008: 368).

Pargament (1999) recognised:

Every form of religious or spiritual expression occurs in a social context. Privatisation and individualisation of spirituality are unfolding in a culture that supports privatisation and individualisation. That we tend to overlook these cultural and institutional forces does not mean they are no longer operative. Spirituality is never experienced outside of a context (Pargament, 1999: 9).
Additionally, Pargament (1999) suggested that spirituality is often about interconnection but we seek to disconnect our understandings of spirituality from the contexts of its expression:

Paradoxically, our approach to spirituality runs the risk of disconnecting people from their worlds. By polarising religion and spirituality into the institutional and the individual, we lose sight of the individual mission of the institution and the social context of the individual; we lose the opportunity to learn how people express their faiths within the context of their lives (Pargament, 1999:9).

Ruwhiu and Ruwhiu (2005) recognise the need to be both culturally and spiritually aware. The authors speak of their personal journey which includes reconciliation between the religious self and cultural heritage. Achieving reconciliation may be difficult for some amidst the angst of contemporary religious perspectives and negative associations.

One participant reflected some of the struggles around the construction of religion:

I've struggled with your definitions of religion and spirituality. I am spiritual, I have a favoured religion, but I am not "religious". Religious speaks to me of rules and rigidity, not joyous faith. I do accept spirituality as being broader than my own Christian beliefs/values, which is why I ask my clients about their spirituality. It is not threatening and without exception they have been happy to give me that info (50-60 year old female NZ European child and family social worker).

This issue requires further exploration and it will be vital to explore clients' perspectives about this and how they perceive this should be included if at all. It may be that for those for whom it is significant that we need to be careful about delegitimising people's religious associations and experiences.

Furthermore, an established Enlightenment tradition has engendered scepticism about religion. This scepticism has been exacerbated by the impact of various wars, religious conflicts, and terrorist acts in the 20th and 21st centuries which have resulted in uncertainty over absolutes and extreme anti-religious sentiments (e.g., Islamaphobia), especially against militant fundamentalisms or fundamentalist religious groups (Midgley and Sanzenbach, 1989). Participants also commented on levels of religious scepticism and negative views associated with particular religious beliefs. Findings of this research suggest a level of negativity towards religion. Other issues related to religion include the subordination of women, hostility toward non-normative sexual identity, and clerical abuse (Moss, 2005b). Alternatively, religious communities can be a source of strength and security in societies driven by risk management and social and economic inequality. Equally, participants
recognised that religion can be a source of resilience and strength. Holistic approaches to care also integrate religion and spirituality when addressing the needs of the whole person, and religious communities have been active in confronting social injustice and in tending to the needs of community at the local level (Canda & Furman, 1999; Moss, 2005a; Nash and Stewart, 2005). Structurally however, the positive aspects of religion such as addressing social justice issues, involvement in welfare provision and community involvement, are largely disregarded and the negative aspects accentuated (Bluck, 1999).

Findings also show that along with the preference given to the term spirituality the participants were more likely to work with clients’ spiritual histories rather than religious histories. The preference of participants for service users’ spiritual rather than religious histories, however, may indicate a tension among social workers regarding the affiliation of religion with absolutism and spirituality with relativism. McBeath and Webb (2002), Bisman (2004), and Gray (2006) have examined the moral dimensions of social work in the midst of Enlightenment and liberal values. Gray (2006) has observed that the profession of social work’s preference for spirituality is in opposition to anti-oppressive and emancipatory practices, because western constructions of spirituality, as an individualistic enterprise, is not “tied to moral imperatives which drive concern for the ‘other’ and for the ‘environment’” (Gray, 2006: 19). Henery (2003) has noted that the ‘spirituality-religion’ dichotomy is undergirded by the existential anxiety of modern consumer capitalism. Whereas spirituality encourages a quest for self-identity and aligns with consumer tactics of finding the right (spiritual) products to suit one’s needs and circumstances, religion limits such endeavours via truth-claims, doctrine, and subordination of the individual to a faith community and a higher authority. Thus, rather than embracing a unified, doctrinally-based worldview from one of the major religions, postmodern spiritual seekers select from the tenets and practices of multiple religious and spiritual perspectives to fashion an identity and lifestyle—an a la carte approach to religion and spirituality. Henery also notes that “rather than redress Western racism, the spirituality project may provide for a new expression of it. Internationally ethnic minorities are generally characterised as first religious and only then spiritual” (Henery, 2003: 1111).
Spiritual and Religious discourse

Given the above discussion and range of perspectives, it is clear that there is no consensus about this topic or its implications for professional practice in Aotearoa New Zealand. Whilst the role of spirituality is clear for some the role of religion is not. We need to be aware of this and the way the topic is being conceptualised.

Findings of this research show that a number of discourses and social attitudes are shaping professional responses to this topic. Nash and Stewart (2002) observed that dominant cultural beliefs influence how social workers think in the helping professions and treat this topic. Equally, it is evident that our constructions are taking place within larger global constructions that include an a la carte approach and the commodification of spirituality. Du Gay (1996) defines discourse as:

a group of statements which provide a language for talking about a topic and a way of producing a particular kind of knowledge about a topic. Thus the term refers both to the production of knowledge through language and representations and the way that knowledge is institutionalised, shaping social practices and setting new practices into play. (Du Gay, 1996:43).

Drawing on the work of Said (1979) Wong and Vinsky (2008) suggest that the construction of the ethnic other as first religious (negatively) allows the construction of the western self as spiritual (positively, free and independent). Wong and Vinsky (2008) state: “The ordering of social relations between the ‘spiritual’ western ‘self’ and the religious ethnic ‘other’ is produced” (Wong and Vinsky, 2008: 11). Similarly, Hodge (2006) cautions that these constructions occur amongst what is termed new class academics. This critique raises important considerations but limits the contextual complexities that can be operating and the various discourses involved in constructing this subject. A number of discourses are evident in this research operating in the context of Aotearoa New Zealand. These discourses construct clients and workers alike as “spiritual but not religious”. Equally, they can be constructed as “the indigenous self as spiritual and the western self as secular” or equate ‘indigeneity with spirituality’ and ‘Europeanism with religion’ and ‘ethnic minority and immigrant groups with religion’.

I think we do it a lot with Māori and Pacific Island cultures. Because in my perception they are much more spiritual people, outwardly spiritual people, than pakeha. This has been my experience in terms of their way of life whatever.... So, I think it's about making an effort and just being aware that even though pakeha
people may not be putting it out there, it's still an integral part of everybody's life. I think there is heaps of room for improvement in the use of the assessment, the assessment process (NZIRSSOWK II anonymous focus group participant, 2006).

Wetherell, Taylor and Yates (2001), recognise that discourse not only defines the world or given phenomena, but also gives it meaning and defines ongoing courses of action. Social workers and social work educators alike will need to be mindful of how these discourses are constructing responses to spirituality and religion in practice and curriculum developments.

Findings of this research suggest a number of constructions in the Aotearoa New Zealand context. What is concerning is the implications of constructing understandings whilst recognising a number of factors. Firstly, this subject is being constructed largely by social workers and academics with little research or consideration being given to clients’ perspectives. Secondly, it is bound to negative religious perspectives and tensions where discussions are often presented in a binary fashion. Thirdly, often interdisciplinary conversations are not occurring whilst a number of professional fields explore this issue (Praglin, 2004). Fourthly, the spirituality debate and developments within social work are linked to larger social changes and discourses occurring in this area. Wong and Vinsky (2008) point out the spiritual but not religious discourse may facilitate the ability of some to be able to distance themselves from the Christian religion but caution practitioners and educators alike against this stance stating:

It is important that we do not make this particular stance the dominant and defining discourse of spirituality and religion in social work. Rather we should remain curious and open to clients and students own experience of spirituality and, or, religion in the historical contexts of their lives. We believe such a tentative and humble posturing can work to reduce the risk of taking away the clients authority of meaning (Wong and Vinsky, 2008: 14).

Stirling (2005) cautions against adopting constructions and discourses generated from above and outside of our context highlighting the importance of generating understandings from the bottom up that include multiple realities and emphasising the lived realities of clients and social workers alike. Equally, we will need to be critically reflective of discourses already operating such as the spirituality vs. religion binary (Henery, 2003), commodification of spirituality (Smith, 1999), and the spiritual but not religious (Ward, 2003) discourse and how they are shaping Aotearoa New Zealand social workers’ viewings of spirituality and religion and resulting practice outcomes. Findings of this research suggest that in the Aotearoa New Zealand context Tangata Whenua are seen as spiritual first then religious or spiritual but not
religious disassociated from any religious connections. A level of concern was also expressed that a reductionist approach is taken to Taha Wairua for Tangata Whenua. At one end of the spectrum authors reject outright religious affiliations because of Christianity’s relationship with colonisation (see Benland, 1988 and Smith, 1999). Whilst others express their spirituality intricately linked to Christianity.

*Having a higher power to turn to as a social worker is to cast your burdens unto the Lord. He refreshes, energises me every day in fellowship with the Lord Jesus Christ* (50-60 year old male Māori social work educator).

Findings suggest the topic is viewed with a level of homogeneity and universality rather than recognising a diverse range of views, religious and, or, spiritual associations and connections, or non affiliation that exist. This viewpoint may be unhelpful in practice with a broad range of realities needing to be considered. De Bres (1985) cited in Davidson (1997) recognised that Tangata Whenua in Aotearoa New Zealand developed their own religious synthesis likewise Davidson (1997) cited Henares’ (1985) observation that “Today Māori traditional values and those values inherent in Christian teachings have come together in a continuing dynamic interaction, and increasingly it is Māori who determine their hierarchy of values” (Henare, 1985 cited in Davidson, 1997: 140). Consideration needs to be given to the implications of the range of expressions of spirituality and religiosity involved in the Aotearoa New Zealand Social services context, processes of synthesis that have occurred and the practice implications involved.

Wong and Vinsky (2008) caution against attempts to view spirituality divorced from historically rich and complex traditions, they believe to do so is an exercise designed to make it easier for spiritual consumers to appropriate at will and freely cultural or indigenous spiritualities that are defined as ‘spiritual but not religious’.

Panelli and Tipa (2007) suggest in relation to notions of wellbeing that an approach be emphasised that is both culturally specific and incorporates a place based analysis.

Equally important and often neglected in discussions about spirituality within western discussions about spirituality is cognisance of the metaphysical aspects of spirituality, which do not sit comfortably with western understandings that take a compartmentalised viewing of spirituality. For many, the metaphysical aspects of spirituality are interwoven with the fabric of physical reality (Ruwhiu and Ruwhiu, 2005; Jenkins, 1998). Accordingly, attention to
super empirical understandings is a vital part of spiritual consideration. Furthermore understandings of this interconnection are often associated with culturally specific ways of knowing. Discussions therefore need to be conducted with sensitivity.

**The level of spiritual and religious integration within social work practice and education**

Undoubtedly, the above issues will impact upon the level of integration of spirituality and, or, religion in professional social work in Aotearoa New Zealand, how it is perceived, resulting knowledge production, and practical application. Albeit, in the construction of spirituality in avoidance of religious understandings, or in constructing spirituality as some form of commodified individualistic phenomena, or that spirituality is primarily applicable only to Indigenous communities. All of which have and will continue to shape how social workers and educators alike will give meaning to the subjects and subsequent action undertaken. Findings suggest that these conversations have already resulted in approaches to spirituality and, or, religion and a hierarchy of discourses established which in turn are shaping the responses of social workers within this context.

We could expect that because of our heritage of secularism and above problematic areas, that participants overall would lack an appreciation of the significance of spirituality and religion in professional social work practice. Findings however, suggest that an appreciation of spirituality which social workers were likely to include in practice or see as an appropriate aspect of professional practice. Conversely, they were less likely to view religion as favourably. In the broad picture, participants displayed relatively low levels of adult involvement in formal religions as well as relatively low levels of integrating spirituality (and lower still, religion) in practice. This likely reflects the secularisation of the public domains in which European influence is strong, as Brierley (2000a; 2000b) and Bruce (1995; 1996) have noted in their research on the decline of church attendance and religious affiliation. The level at which spirituality and religion are addressed in Aotearoa New Zealand social work may be due to the Indigenous influence in domains of society that have previously been marginalised due to colonialism and that are more strongly impacting professional social work. This may also lead to a greater neglect of Christian and other religious perspectives in
professional social work (e.g., due to association with church/state separation issues and the negative role of Christianity in colonisation) than Māori worldviews.

The level of appreciation and inclusion by Aotearoa New Zealand Social Workers is likely to have resulted from the unique bicultural context in which social work takes place, and the challenges from Tangata Whenua to be mindful of Taha Wairua (spirituality), and a developing recognition by ANZASW workers of the importance of Taha Wairua for the indigenous people of Aotearoa New Zealand. This importance is evident at the level of practice and within the social work curriculum. Findings suggest that a number of social work programmes give attention to spiritual matters for Tangata Whenua or challenge the awareness of social workers in this area whilst training. Findings also suggest that these programmes need to broaden to include considering a diverse range of spiritual and, or, religious philosophies and the practice implications of these, to recognise and meet international social work standards; however broadening considerations may be met with a level of resistance or avoidance given the negativity towards religion. Findings suggest that a level of tokenism exists in this area unless Tangata Whenua social workers take an active role in ensuring this area is addressed in practice. Additionally findings suggest that despite attention to Taha Wairua within professional social work education, agencies appear to lack clear knowledge or direction in this area at the level of practical application which can lead to a lack of inclusion resistance or avoidance in practice. Ruwhiu (2005) cautions that often social workers are discouraged in this area which leads to a reliance on having the right people around to work in this area. Ruwhiu states:

Subsequently in my eyes, social workers rely on kaumatua such as myself to fulfil all the spiritual engagement points, when in fact they themselves should also be strengthening that very area within their own being, for the broader wellbeing and welfare of those they are working with (Ruwhiu and Ruwhiu, 2005: 5).

Additionally findings, suggest that there is a level of uncertainty and apprehension about the topic of spirituality and, or religion in Aotearoa New Zealand social work. This may be due to the subject being viewed as individualised and private equally it may involve the view that discussions about this topic are taboo or relate primarily to Tangata whenua concerns and objectives, and that it would be inappropriate for discussions to occur outside of this frame of reference. Findings also suggest that the level to which spirituality and, or religion is integrated in practice is very much dependent on contextual legitimation, and that the level of legitimation varies between sectors albeit voluntary, statutory or private and Christian
social services. Any integration that is occurring outside of Tangata Whenua initiatives occurs in a seemingly uncoordinated manner. Little or no attention is given to thorough assessment processes in this area and more often than not social workers rely on clients to raise the importance of this aspect of their lives, and then deal with it accordingly using an informal knowledge base drawn from their own experiences to address the matters raised. Findings also suggest a level of inequality in this respect that may be restricting the integration of religion and spirituality within practice from a spiritually diverse perspective.

That woman I referred to earlier about how, you know, let go and let God, and her declaring her faith in the family meeting, could it be, in a European Pakeha situation, an opportunity for me as the facilitator of the meeting to say 'would you like to start with a prayer?'; not that I knew beforehand that she was religious, but had I known, I could have done that (NZIRSSOWK II focus group participant, 2006).

Maybe we just don’t offer our Māori clients that opportunity perhaps we offer it to everybody, regardless, we say something like “is there something that would be meaningful for you to open this meeting or would you prefer to just get under way.” You know, that’s something I never really followed through, because you get so busy, and have no time for these sort of things, but it can be quite helpful I guess to how a meeting actually flows, to help people respond, and to enhance the whole spirit of the meeting. For me, I sense a tangible spirit in meetings, whether it’s positive or negative, you know, that maybe a huge positive influence on the actual outcome and the people’s experience (NZIRSSOWK II focus group participant, 2006).

In turn, social workers who have had exposure to a diverse range of spiritual or religious perspectives appear better placed to respond. However, reliance on client initiation itself may prove problematic given the level of negativity and secular context as clients may perceive or expect a negative response to their particular religious and, or, spiritual beliefs and therefore be hesitant about revealing such information. Despite this concern, findings suggest that to an extent clients are raising either religious and, or spiritual issues with social workers and that social workers are finding themselves having to respond in an appropriate manner. Equally, social workers may feel unsupported in their agencies and concerned about the implications of these practices requiring clear ethical and appropriate boundaries. Additionally, findings suggest that there can be a disparity between social workers and their agencies’ viewing of this topic which may lead to a lack of clear guidance and policy in this area.
Despite the above issues and lack of appropriate or recognised assessment tools, 33% of the participants agreed that a religious history should be part of intake and assessment, and 43% agreed that a spiritual history should be taken. Including a religious and/or spiritual history during intake can be a useful tool in identifying potential interventions, understanding worldviews and their influence on the bio-psycho-social-spiritual development of service users, and informing self-directed explorations of religious and spiritual issues (Ellor et al, 1999; Hodge, 2002a; Hodge, 2003b).

Gray (2006) asserts that the profession’s re-evaluation of religion “presages a return to traditional worldviews which value collective values, community, the environment, and a sense of place as implicitly spiritual and take social work back to its communitarian roots” (Gray, 2006: 19). Hennery’s (2003) ‘spirituality-religion’ binary thus provides an opportunity for social workers to explore and debate the efficacy and limits of inclusivity within larger professional concerns. In other words, given the vast array of traditional and synthesised (i.e., postmodern, consumer-driven) religious and spiritual identities and perspectives, what accommodations and practices can social workers reasonably acknowledge and implement in direct practice and education as they attempt to integrate religion and spirituality?

Practical Application and legitimation

To address these questions a space will need to be created for these discussions to occur. Casanova (1994) has noted that in secularised countries, religion is viewed as private and individualised. Religious institutions occupy a domain that often does not intersect with government and other public institutions. Participants recognised both these aspects; additionally, they recognised the difficulties in attempts to apply spiritual and religious concerns in practice. Some of these concerns have been raised in the above discussions. At least two disparities can be observed between the social workers and their agencies. Firstly, findings suggest that the social workers themselves are willing and endeavouring to include spiritual and, or, religious issues in practice whilst their agencies are reluctant or unwilling to include this aspect. Secondly, a limited amount of open discussion occurs about how to practice appropriately in this area or sharing of practitioner experience. Conducting the focus
groups for this research highlighted the usefulness of having open discussions about this topic in an open and neutral environment. The participants commented about how beneficial it was to have the discussions and a space created for them to occur. For those in statutory social work, practitioners may experience discomfort when religious issues impinge upon the public domain. On the other hand, social workers delivering services in religious-based social service organisations may be influenced by the state’s secular approach to welfare provision (e.g., acceptance of same-sex marriages and civil partnerships).

This raises questions about governments’ perceptions and laws regarding religion and spirituality in social welfare (Canda & Furman, 1999). To what extent do social workers have professional and governmental endorsement to integrate spirituality and religion in their work environments, public and private? How do the bureaucratic welfare systems view this topic? In Aotearoa New Zealand social work there is a level of endorsement by the government because it has embraced Māori spirituality (Adhar, 2004), which provides a level of legitimacy for workers dealing with religious and spiritual issues in statutory settings. Aotearoa New Zealand’s position is complex in that the state is highly selective in its endorsement of spirituality. According to Adhar (2004), no other religious belief system in Aotearoa New Zealand is given an equivalent standing to Māori spirituality. This special recognition of indigenous rights and worldview is very important, as the professional association of social workers in Aotearoa New Zealand emphasises yet ironically, if spirituality is only acknowledged for one cultural group, then the full range of spiritual diversity is not encompassed by social workers. Further, the understanding that spirituality is a central aspect of being human for all cultures, religions, and nonreligious spiritual perspectives is lost. As global social work strives to promote a holistic view of the full person and environment, as well as justice for all peoples, each nation’s social work profession is challenged how to address the full range of spiritual diversity and human potential.

Canda and Furman (1999) have developed guidelines for spiritually sensitive practice that respects spiritual diversity, state/religion separation concerns, holistic view of the person/environment, and professional ethics, which Nash (2002) has indicated holds some promise in the Aotearoa New Zealand context. However, the suitability of models developed outside of the Aotearoa New Zealand would need to be discussed and models adapted for the specific context. It is also desirable that as these conversations continue at an international level that a diverse range of representation is included. Cognisance of existing models such as
Te Whare Tapa Wha, would also need to be considered and what they add to understandings of a spiritually diverse approach. Scholarly publications on cross-national adaptation of generic frameworks for spiritually sensitive practice and the creation of nation-specific approaches, apart from indigenous models, have barely begun in Aotearoa New Zealand.

Indeed, findings from this research suggest that a level of avoidance of this topic exists in the context of uncertainty and resistance. Arguably, this has limited conversations about the role of spirituality in the widest sense and religion particularly within Aotearoa New Zealand social work. Furthermore, the findings suggest that a majority of social workers may be using some spiritually oriented helping interventions. Many workers felt that it is appropriate to do so and that it does not conflict with ethical practice codes or social work’s mission. Yet, this research reveals that practitioners are likely to feel ill-equipped in this area, to lack appropriate supervision and practical information about how to undertake religious and spiritual work with clients, and to have limited access to ongoing professional development. Some of the helping activities, such as praying with or for a service user, also may be interpreted as theological rather than social work interventions. Further research involving practitioners is needed to meet the demands of evidence-based practice. Given the nature of spiritual interventions, replicable studies measuring their effectiveness and applicability to social work practice are not feasible. An essential consideration in the use of spiritual interventions, however, is the service user’s belief and value system and the practitioner’s competence in the use of such interventions. Moreover, social workers may also want to consider the issue of informed consent in such matters (Hodge, 2007; Holloway, 2007). Sheridan (2004) has observed that there has been little information about practitioners’ behaviours and practices, rather than just attitudes or self-reports; more is needed about what workers actually do regarding spirituality. All of this reinforces the urgency for much more work to provide social work students, practitioners, educators, and researchers with preparation to address spiritual diversity.

Some strategies have been suggested in the United Kingdom that might be useful for Aotearoa New Zealand educators, such as encouraging collaborative efforts and networks between scholars and practitioners (Furman et al., 2004; Furman et al., 2005). The ANZASW could facilitate working groups for workers to share their knowledge in an environment conducive to further exploration and multinational discussions. Facilitating this could be difficult given findings of this research suggest a level of avoidance of this topic. This
avoidance may be due to spiritual and, or religious matters being seen as taboo subjects or highly privatised and individualistic topic to be discussed behind closed doors. It may also be that those who identify with varying spiritual and, or, religious worldviews find it difficult to articulate these in our secular context. Findings of this research also indicate that social workers with spiritual and, or, religious beliefs may also attract a level of negative attention to themselves if they show any overt association to a particular belief system. Gilligan (2003) noted that UK workers need to develop a working knowledge and understanding of religious and spiritual beliefs in order to perform statutory duties and to meet professional responsibilities. Likewise, social workers in Aotearoa New Zealand are increasingly required to consider this aspect.
Chapter 9: Recommendations and Conclusions

The central theme of this thesis has been to investigate the role religion and, or spirituality play within professional social work in Aotearoa New Zealand. This has had a particular focus on how well social work is responding to the challenge to include spiritual and, or, religious issues in direct practice and social work education. To a degree social work in Aotearoa New Zealand has responded to challenges to include this area cognisant of Tangata Whenua concerns and objectives. However social work in Aotearoa New Zealand is struggling to incorporate approaches that are inclusive that allow for spiritually diverse perspectives. Additionally at both an international and national level codes of ethics require social workers to move beyond acknowledging this aspect of wellbeing in their clients’ lives to an integration of the above within their work with clients. This investigation has highlighted significant gaps in assessment, models of practice and social work education in the context of uncertainty, resistance and avoidance where a number of religious and, or spiritual discourses are constructing how this topic is viewed resulting in varying practice outcomes. It is hoped that discussions will continue to explore this aspect of practice in an open environment created to explore the future possibilities so the social work profession in Aotearoa New Zealand can move beyond acknowledgement to develop non discriminatory approaches to practice in this area. To respond to this issue efforts will need to continue to move beyond acknowledgement in social work education, practice, research and professional conversations.

Recommendation One: Dialogue

Forums for discussing spirituality and religion in practice will be of vital importance as developments continue. These discussions should include both national and international conversations. As Canda (2002) has suggested, the movement to address spirituality in social work is growing in many countries around the world, and scholars are beginning to network
and collaborate across these countries. As the momentum and synergy in this movement grows, it is more likely that spiritually sensitive practice approaches will develop which are both global in perspective and local in relevance. For example, the traditional Māori understanding of spirituality as integral to life is helping to shape Aotearoa New Zealand social work into a more spiritually responsive mode. As this Aotearoa New Zealand trend intersects with growing US and UK based social work interests in spirituality and religion for culturally appropriate and holistic practice, all sides in the dialogue may benefit.

Opening up this space for dialogue will also challenge some of the barriers identified in this research such as conversations being taboo and the propensity to see this practice area as private.

Recommendation two: Development of evidence-based practice models

Whilst research into the role of spirituality and religion is increasing globally there is a need to conduct further research in Aotearoa New Zealand to ascertain what developments are taking place in practice and what existing practice models are being employed in this area. To an extent there is still questioning about whether or not spirituality should be included despite already being a requirement of varying Ethical Codes and practice requirements. Additionally, there is a need to explore the voices of client groups and other stakeholders to see how they perceive the role of spirituality and religion within social work. Furthermore, the participants of this research highlighted key areas that need to be addressed such as, how to include religion and, or spirituality in practice appropriately. Whilst this research begins to explore this issue more is needed. Research needs to be undertaken to explore how social workers can include spirituality and religion in an ethically appropriate manner and the development of evidence-based practice models. This will need to include input from varying stake holders to construct non-discriminatory ways of working with religion and spirituality. Sheridan (2004) recognised that little is known about what occurs in practice in this area an area that also needs to be further explored within the Aotearoa New Zealand context. The above two recommendations should underpin the following recommendations three, and four which are concerned with the continuing development and support of this practice area.
Recommendation three: Professional development, support, ethics and practice guidance

Given the requirement to include this area of practice in international and national standards and the evident uncertainty in this research about how to go about incorporating spirituality and, or religion in practice an active effort needs to be made to establish appropriate evidence based practice frameworks underpinned by ongoing support for social workers' in this area. These frameworks will need to address some of the difficulties around assessment and the place of referrals. Attention to adequate supervision and the development of professional development courses that address the ANZASW Code of Ethics requirements in the area of spirituality will need to be considered. This will also help address the knowledge gap that is evident amongst participants of this research.

Recommendation four: Social work curriculum inclusion and development

Attention also needs to be given to how social work education in Aotearoa New Zealand can best respond to requirements to include attention to spiritual diversity in curricula to meet the international schools of social work requirements and developing inclusion challenges in this area. Whilst some initiatives have taken place further initiatives in this area may be met with resistance and a place for open dialogue between schools of social work would be useful to build the knowledge base in this area.

This conversation would need to explore the issue of spiritual diversity and how best this could be incorporated in the curriculum and at what level and to what extent. Course content could be designed cognisant of international curriculum developments and include the following elements

- An understanding of the historical relationship between spirituality and the helping professions.
- Inclusion of varying spiritual perspectives and, or, expressions and the implications of these for working with people in Aotearoa/New Zealand.
• Opportunities to develop value clarity about the role of the social workers’ spiritual perspectives and the implications for practice.

• The inclusion of a range of theoretical approaches to conceptualising spirituality and strategies that promote ethical standards for including spirituality as an integral component of culturally competent practice in assessment and interventions with clients.

Conclusion

Clearly the international attention being given to spirituality and religion within professional social work practice will continue to gain momentum. This momentum is underpinned by practice approaches that seek to be holistic and the recognition of spirituality as a central aspect of wellbeing. Additionally it is likely that as this continues to develop in the global context of social work practice understandings generated elsewhere will form part of the construction of this topic in the Aotearoa context. Equally our unique bicultural practice context will continue to challenge and shape how social workers in Aotearoa New Zealand respond to this topic. As this development continues it is likely that a number of challenges will need to be addressed such as the need to broaden our current endorsement of spirituality and practice responses to allow for spiritual diversity. Creating an environment where conversations about this topic can occur in open dialogue. We will also need to consider the influences of varying perspectives of an about spirituality and religion, associated discourses and how these are shaping professional social workers views and responses to this topic. Each of these factors will shape our response and contribute to the profession’s ability to meet global and local practice standards in this area. Conversations will need to focus on developing appropriate practice responses, exploring the issues around assessment and working to integrate spirituality and, or, religion in non discriminatory ways. Equally this will need to be underpinned by social work curriculum strategies that support continued and appropriate development in this area.
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Appendices

Appendix A: Treaty of Waitangi 1840


HER MAJESTY VICTORIA
Queen of the United Kingdom of Great Britain and Ireland
regarding with Her Royal Favour the Native Chiefs and Tribes of New Zealand and anxious to protect their just Rights and Property and to secure to them the enjoyment of Peace and Good Order has deemed it necessary in consequence of the great number of Her Majesty's Subjects who have already settled in New Zealand and the rapid extension of Emigration both from Europe and Australia which is still in progress to constitute and appoint a functionary properly authorised to treat with the Aborigines of New Zealand for the recognition of Her Majesty's Sovereign authority over the whole or any part of those islands - Her Majesty therefore being desirous to establish a settled form of Civil Government with a view to avert the evil consequences which must result from the absence of the necessary Laws and Institutions alike to the native population and to Her subjects has been graciously pleased to empower and to

KO WIKITORIA te Kuini o Ingarani i tana mahara atawai ki nga Rangatira me nga Hapu o Nu Tirani i tana hiahia hoki kia tohungia ki a ratou o ratou rangatiratanga me to ratou wenua, a kia mau tonu hoki te Rongo ki a ratou me te Atanoho hoki kua wakaaro ia he mea tika kia tukua mai tetahi Rangatira - hei kai wakarite ki nga Tangata Māori o Nu Tirani - kia wakaetia e nga Rangatira Māori te Kawanatanga o te Kuini ki nga wahikatoa o te wenua nei me nga motu - na te mea hoki he tokomaha ke nga tangata o tona Iwi Kua noho ki tenei wenua, a e haere mai nei. Na ko te Kuini e hiahia ana kia wakaritea te Kawanatanga kia kaua ai nga kino e puta mai ki te tangata Māori ki te Pakeha e noho ture kore ana. Na kua pai te Kuini kia tukua a hau a Wiremu HOPIHONA he Kapitana i te Roiara Nawi hei Kawana mo nga wahi katoa o Nu Tirani e tukua ai heai amua atu ki te Kuini, e mea atu ana ia ki nga Rangatira o te wakaminenga o nga hapu o Nu Tirani me era Rangatira atu enei ture ka korerotia nei.

The preamble of the English version states the British intentions were to:
- protect Māori interests from the encroaching British settlement
- provide for British settlement
- establish a government to maintain peace and order.

The Māori text suggests that the Queen's main promises to Māori were to:
- provide a government while securing tribal rangatiratanga and Māori land ownership for as long as they wished to retain it.
authorise me William Hobson, a Captain in Her Majesty's Royal Navy Consul and Lieutenant-Governor of such parts of New Zealand as may be or hereafter shall be ceded to her Majesty to invite the confederated and independent Chiefs of New Zealand to concur in the following Articles and Conditions.

Article the First

The Chiefs of the Confederation of the United Tribes of New Zealand and the separate and independent Chiefs who have not become members of the Confederation cede to Her Majesty the Queen of England absolutely and without reservation all the rights and powers of Sovereignty which the said Confederation or Individual Chiefs respectively exercise or possess, or may be supposed to exercise or to possess over their respective Territories as the sole sovereigns thereof.

Article the Second

Her Majesty the Queen of England confirms and guarantees to the Chiefs and Tribes of New Zealand and to the respective families and individuals thereof the full exclusive and undisturbed possession of their Lands and Estates Forests Fisheries and other properties which they may collectively or individually possess so long as it is their wish and desire to retain the same in their possession; but the Chiefs of the United Tribes and the individual Chiefs yield to Her Majesty the exclusive right of Preemption over such lands as

| In the English text of the Treaty, Māori leaders gave the Queen "all the rights and powers of sovereignty" over their land. |
| In the Māori text of the Treaty, Māori leaders gave the Queen "te kawanatanga katoa" – the complete government over their land. |

Ko te Kuini o Ingarani ka wakarite ka wakaee ki nga Rangitira ki nga hapu - ki nga tangata katoa o Nu Tirani te tino rangatiratanga o o ratou wenua o ratou kainga me o ratou taonga katoa. Otiia ko nga Rangatira o te wakaminenga me nga Rangatira katoa atu ka tuku ki te Kuini te hokonga o era wahi wenua e pai ai te tangata nona te Wenua - ki te ritenga o te utu e wakaritea ai e ratou ko te kai hoko e meatia nei e te Kuini hei kai hoko mona.

| In the English text of the Treaty, Māori leaders and people, collectively and individually, were confirmed and guaranteed "exclusive and undisturbed possession of their lands and estates, forests, fisheries and other properties". |
| In the Māori text of the Treaty, Māori were guaranteed "te tino rangatiratanga" – the unqualified exercise of their chieftainship over their lands "wenua", villages "kainga", and all their property/treasures "taonga katoa". |
the proprietors thereof may be disposed to alienate at such prices as may be agreed upon between the respective Proprietors and persons appointed by Her Majesty to treat with them in that behalf.

In the English text of the Treaty, Māori yielded to the Crown an exclusive right to purchase their land. Māori agreed to give the Crown the right to buy land from them should Māori wish to sell it.

In the Māori text of the Treaty, the Crown gave an assurance that Māori would have the Queen's protection and all rights - "tikanga" - accorded to British subjects. This is considered a fair trANZlation of the English.

Hei wakaritenga mai hoki tenei mo te wakaetanga ki te Kawanatanga o te Kuini - Ka tiakina e te Kuini o Ingarani nga tangata Māori katoa o Nu Tirani ka tukua ki a ratou nga tikanga katoa rite tahi ki ana mea ki nga tangata o Ingarani.

Hei wakaritenga mai hoki tenei mo te wakaetanga ki te Kawanatanga o te Kuini - Ka tiakina e te Kuini o Ingarani nga tangata Māori katoa o Nu Tirani ka tukua ki a ratou nga tikanga katoa rite tahi ki ana mea ki nga tangata o Ingarani.

In the English text of the Treaty, Māori yielded to the Crown an exclusive right to purchase their land. Māori agreed to give the Crown the right to buy land from them should Māori wish to sell it.

In the Māori text of the Treaty, the Crown gave an assurance that Māori would have the Queen's protection and all rights - "tikanga" - accorded to British subjects. This is considered a fair trANZlation of the English.

(signed)
William Hobson,
Lieutenant Governor.

(signed)
William Hobson,
Consul and Lieutenant-Governor.

Na ko matou ko nga Rangatira o te Wakaminenga o nga hapu o Nu Tirani ka huhi nei ki Waitangi ko matou hoki ko nga Rangatira o Nu Tirani ka kite nei i te ritenga o enei kupu, ka tangohia ka wakaetia katoatia e matou, koia ka tohungia ai o matou ingoa o matou tohu. Ka meatia tenei ki Waitangi i te ono o nga ra o Pepueri i te tau kotahi mano, e waru rau e wa te kau o to tatou Arika.

Now therefore We the Chiefs of the Confederation of the United Tribes of New Zealand being assembled in Congress at Victoria in Waitangi and We the Separate and Independent Chiefs of New Zealand claiming authority over the Tribes and Territories which are specified after our respective names, having been made fully to understand the Provisions of the foregoing Treaty, accept and enter into the same in the full spirit and meaning thereof in witness of which we have attached our signatures or marks at the places and the dates respectively specified. Done at Waitangi this Sixth day of February in the year of Our Lord one thousand eight hundred and forty.
Appendix B: Aotearoa New Zealand Survey Instrument (NZIRSSOWK I)

The Role of Spirituality and Religion 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 (Non-Religious) approaches to spirituality. When all forms of spirituality are intended both spirituality and religion will be mentioned in the question.

Whilst we provide these definitions for you, we realise you may not agree with them or have differing perceptions of their meaning. Therefore section six of this survey provides questions about the universal definitions provided and your own definitions of this terminology.

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 (Canda and Furman, 1999).

Religion: is an organized and structured set of beliefs and practices shared by a community related to spirituality (Canda and Furman, 1999).
Section One: The Appropriateness of Including Spirituality and/or Religion with Clients.

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion, 1 being you strongly disagree – 5 being you strongly agree.

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
</table>

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 or adoptive 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. accident). | 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 |

Appendix B
Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion, 1 being you strongly disagree – 5 being you strongly agree.

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

Appendix B
Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion, 1 being you strongly disagree – 5 being you strongly agree.

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Informing a client of the social workers religious/spiritual belief system, or lack thereof, is important when establishing the helping relationship.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4. Taking a religious history of the client should be a part of intake and assessment.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5. Taking a spiritual history of the client should be part of intake and assessment even when the client is not religious.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6. Assessment for referral to religious and or spiritual leaders is appropriate and or necessary for clients.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7. Involving religious and or spiritual leaders in intervention is appropriate.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Appendix B
The following section lists various interventions, which could be performed with clients. Please indicate by circling "yes" or "no" for the behaviour listed: (1) the intervention that you yourself have done with clients; (2) would be or not be prepared to do and (3) whether or not you believe the interventions to be appropriate for social work practice.

<table>
<thead>
<tr>
<th>Have Personally Done With Clients?</th>
<th>Would be prepared to do With Clients?</th>
<th>Is Appropriate Social Work Intervention?</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. Use or recommend religious or spiritual books or writings.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>9. Pray privately for a client.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10. Pray with a client.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>11. Meditate privately with a client.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>12. Use religious language or concepts.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>13. Use non-sectarian (non-religious) spiritual language or concepts.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>14. Recommend participation in a religious or spiritual support system or activity.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>15. Touch clients for &quot;healing&quot; purposes.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>16. Help clients develop religious/spiritual rituals as a clinical intervention (e.g. house blessings, visiting graves of relatives, celebrating life transitions).</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Appendix B
Please indicate by circling "yes" or "no" for the behaviour listed: (1) the intervention that you yourself have done with clients; and (2) whether or not you believe the interventions to be appropriate for social work practice.

<table>
<thead>
<tr>
<th>Has Personally Done With Clients?</th>
<th>Would Be Prepared to do With Clients?</th>
<th>Is Appropriate Social Work Intervention?</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Participate in client’s religious/spiritual rituals as a practice intervention.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18. Encourage the client to do regular religious/spiritual self-reflective diary keeping or journal keeping.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>19. Discuss the role of religious or spiritual beliefs in relation to significant others.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>20. Assist clients to reflect critically on religious or spiritual beliefs or practices.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>21. Help clients assess the meaning of spiritual experiences that occur in dreams.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>22. Help clients consider the spiritual meaning and purpose of his or her current life situation.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>23. Help clients reflect on their belief about what happens after death.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>24. Help clients consider ways their religious/spiritual support systems are helpful</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>25. Help clients consider ways their religious/spiritual support systems are harmful.</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Appendix B
26. Please use the space below to make any additional comments you would like about the appropriateness of including religious and/or spiritual practices in intervention and/or assessment with clients.

---

Section Three: Spiritual/Religious Assessment and Referral

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

Yes [ ] No [ ]

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

Never [ ] Seldom [ ] Occasionally [ ] Sometimes [ ] Always [ ]

Appendix B
29. Do problems concerning differences of beliefs or values between social workers and spiritual leaders prevent such referrals? (Please tick one response).

<table>
<thead>
<tr>
<th>Never</th>
<th>Seldom</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
</table>

30. Has your lack of trust or confidence in religious leaders prevented such referrals? (Please tick one response).

<table>
<thead>
<tr>
<th>Never</th>
<th>Seldom</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
</table>

31. Do you believe it is appropriate to involve religious or spiritual leaders in your work with clients? (Please tick one response).

<table>
<thead>
<tr>
<th>Never</th>
<th>Seldom</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
</table>

32. Has your lack of trust or confidence in spiritual leaders prevented such referrals? (Please tick one response).

<table>
<thead>
<tr>
<th>Never</th>
<th>Seldom</th>
<th>Occasionally</th>
<th>Sometimes</th>
<th>Always</th>
</tr>
</thead>
</table>

Appendix B
Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion, 1 being you strongly disagree – 5 being you strongly agree.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>33. In general, social workers should introduce spirituality according to their professional judgement.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>34. In general, social workers should address religion/spirituality only if the client first expresses interest.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>35. Helping clients assess whether they wish to work on forgiveness is an important part of social work practice.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>36. In my practice, I use techniques that deal with forgiveness (e.g. assisting clients to forgive themselves, forgive others and seek forgiveness).</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>37. Spirituality is a fundamental aspect of being human.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>38. Social workers should become more knowledgeable than they are now about spiritual matters.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>39. Social work practice with a spiritual component has a better chance to empower clients than practice without such a component.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>40. Integrating religion and spirituality in social work practice conflicts with social work's mission.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>41. Integrating religion and spirituality in social work practice should be included as part of social works ethical standards.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>42. Social workers, in general, do not possess the skill to assist clients in religious/spiritual matters.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Appendix B

292
43. In your social work education have you received content on religious or spiritual issues? (Please tick the appropriate one.)

--- Yes  --- No

44. If you have received content on religious or spiritual issues in your social work education, please describe briefly what content you were presented with?

45. Please use the space below to make any additional comments you would like about assessment and referral as it relates to the topic of religion and/or spirituality.
Section Four: Spirituality/Religiosity Scale

46. 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

47. 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

48. 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, involvement with religious or spiritual group
   Disdain and negative reaction to religion or spirituality.

49. How frequently do you currently participate in private, religious 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

Appendix B
50. How frequently do you currently participate in *private, 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 |

Please rate your level of agreement or disagreement with each statement by circling the one number that best reflects your opinion, 1 being you strongly disagree – 5 being you strongly agree.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>51. I feel negative about the religious experiences of my childhood.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>52. I feel negative about the spiritual experiences of my childhood.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>53. I feel negative about my religious experiences in the present.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>54. I feel negative about my spiritual experiences in the present.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

55. Please use the space below to make any additional comments you would like about your experiences of religion and/or spirituality, especially as it relates to social work practice.
Section Five: Demographic Information

56. What is your present age? (Please tick beneath the applicable box)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>20-25</th>
<th>25-30</th>
<th>30-40</th>
<th>40-50</th>
<th>50-60</th>
<th>60-65</th>
<th>65+</th>
</tr>
</thead>
</table>

57. What is your gender? ______ Male ______ Female

58. What is your ethnic orientation? (Please tick one or more if you identify with different ethnic groups.)

- Maori
- New Zealand European
- British, Irish or Scottish
- Other European
- Asian
- Korean
- Chinese
- Indian
- Samoan
- Tongan
- Cook Island
- Niuean
- Fijian
- Pacific Island other

Appendix B
59. What is your current religious affiliation or spiritual orientation? (Select the one response that most closely identifies your current religious or spiritual status.)

<table>
<thead>
<tr>
<th>Affiliation</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agnostic</td>
<td>Confucianism</td>
</tr>
<tr>
<td>Atheist</td>
<td>None</td>
</tr>
<tr>
<td>Buddhist</td>
<td>Existentialist</td>
</tr>
<tr>
<td>Christian:</td>
<td>Goddess religion</td>
</tr>
<tr>
<td>Catholic</td>
<td>Hindu</td>
</tr>
<tr>
<td>Protestant; Anglican</td>
<td>Jewish:</td>
</tr>
<tr>
<td>Presbyterian</td>
<td>Muslim</td>
</tr>
<tr>
<td>Baptist</td>
<td>Rastafarianism</td>
</tr>
<tr>
<td>Methodist</td>
<td>Spiritualism</td>
</tr>
<tr>
<td>Maori Christian</td>
<td></td>
</tr>
<tr>
<td>Other Protestant: (please describe)</td>
<td></td>
</tr>
<tr>
<td>Mormon</td>
<td>Taoism</td>
</tr>
<tr>
<td>Non-denominational</td>
<td>Multiple non-religious orientation (any combination of atheist, agnostic, existentialist and non affiliated Jewish)</td>
</tr>
<tr>
<td>Other: (please describe)</td>
<td>Multiple religious orientation (any religious orientation in combination with any other religious or spiritual orientations; i.e. Christian and Buddhist)</td>
</tr>
<tr>
<td>Eastern Orthodox</td>
<td>Other</td>
</tr>
</tbody>
</table>

60. Education qualification (Please tick the highest level of education attained.)

- School Certificate or equivalent
- Degree
- University Entrance or equivalent
- Post Graduate Qualification

Appendix B
61. Professional Qualification (Please tick as appropriate).

- National Diploma in Social Services or equivalent (polytechnic)
- Degree in Social Work
- Other Professional Qualifications (Please indicate what they are) ________________
- Post Qualifying or Advanced Award in Social Work

62. What is your current area of practice? (Please tick as many as appropriate.)

<table>
<thead>
<tr>
<th>Area of Practice</th>
<th>Field Work</th>
<th>Residential Work</th>
<th>Vulnerable Populations</th>
<th>Elderly</th>
<th>Corrections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children and Families</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital Social Work</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Disabilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

63. As a social worker, do you work ______ Full-time ______ Part-time

64. Number of years you have been in practice?

<table>
<thead>
<tr>
<th>Period</th>
<th>Years</th>
<th>Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before qualifying</td>
<td></td>
<td></td>
</tr>
<tr>
<td>After qualifying</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

65. Is your primary work setting ______ Voluntary ______ Statutory ______ Private ______ Christian Social Services

Appendix B
66. Is your practice for the most part:  ____ Rural  ____ Urban  ____ Suburban

67. Are you a member of the Aotearoa New Zealand Association of Social Workers (ANZASW)?

  ____ Yes  ____ No

Section Six: Definitions of Spirituality and Religion.

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.

68. How would you define religion? (Please tick as many as you think apply.)

<table>
<thead>
<tr>
<th>Meaning</th>
<th>Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethics</td>
<td>Prayer</td>
</tr>
<tr>
<td>Ritual</td>
<td>Purpose</td>
</tr>
<tr>
<td>Organization</td>
<td>Miracles</td>
</tr>
<tr>
<td>Belief</td>
<td>Scripture</td>
</tr>
<tr>
<td>Morality</td>
<td>Community</td>
</tr>
<tr>
<td>Hope</td>
<td>Faith</td>
</tr>
<tr>
<td>Values</td>
<td>Sacred texts</td>
</tr>
<tr>
<td>Meditation</td>
<td>Discipline</td>
</tr>
<tr>
<td>Personal relationship with the divine or higher power</td>
<td>Fellowship</td>
</tr>
</tbody>
</table>
69. Please list any other concepts or practices relating to religion that you feel need to be included that are not listed in question 68.


70. How would you define spirituality? (Please tick as many as you think apply.)

<table>
<thead>
<tr>
<th>Meaning</th>
<th>Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethics</td>
<td>Prayer</td>
</tr>
<tr>
<td>Ritual</td>
<td>Purpose</td>
</tr>
<tr>
<td>Organization</td>
<td>Miracles</td>
</tr>
<tr>
<td>Belief</td>
<td>Scripture</td>
</tr>
<tr>
<td>Hope</td>
<td>Faith</td>
</tr>
<tr>
<td>Morality</td>
<td>Community</td>
</tr>
<tr>
<td>Values</td>
<td>Sacred texts</td>
</tr>
<tr>
<td>Meditation</td>
<td>Discipline</td>
</tr>
<tr>
<td>Personal relationship with the divine or higher power.</td>
<td>Fellowship</td>
</tr>
</tbody>
</table>

71. Please list any other concepts or practices relating to spirituality that you feel need to be included that are not listed in question 70.


72. Do you feel the definitions provided for spirituality and religion are suitable for use in New Zealand? (Please tick one response.)

Yes ——- No ——-

Appendix B

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73. Do you think concepts of spirituality can be separated from religious understandings in Aotearoa? (Please tick one response.)

Yes  No

74. Are there elements of spirituality and/or religion important to you that need to be included in defining spirituality and/or religion in New Zealand not included in the provided definition? What are these elements?

75. Please use the space below to make any additional comments you would like about the definitions of spirituality and/or religion provided.
76. In 1988 the royal commission on social policy received submissions about the need to include areas of spirituality (Taha Wairua) in social policy. On a scale of 1-4, 1 being no inclusion to 4 being significant inclusion in policy, how well do you believe Taha Wairua has been included in social policy? (Please circle one response)

<table>
<thead>
<tr>
<th>No Inclusion</th>
<th>Some Inclusion</th>
<th>Unsure</th>
<th>Significant Inclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

77. How do you perceive the overall attitude/approach of your agencies or organisations towards including spiritual/religious concerns in assessment or intervention practices with clients? (Please tick as many as appropriate.)

- Total rejection of including religious concerns
- Total rejection of including spiritual concerns
- Avoidant of religious concerns
- Avoidant of spiritual concerns
- Ambivalent to religious concerns
- Ambivalent to spiritual concerns

Appendix B
78. How do you perceive your overall attitude/approach towards including spiritual/religious concerns in assessment or intervention practices with clients? (Please tick as many as appropriate.)

<table>
<thead>
<tr>
<th>Response</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total rejection of including religious concerns</td>
<td>Resistant due to lack of information, knowledge about spiritual issues</td>
</tr>
<tr>
<td>Total rejection of including spiritual concerns</td>
<td>Resistant due to lack of information, knowledge about religious issues</td>
</tr>
<tr>
<td>Avoidant of religious concerns</td>
<td>A tokenistic model of inclusion</td>
</tr>
<tr>
<td>Avoidant of spiritual concerns</td>
<td>Genuine inclusion of religion and or spirituality</td>
</tr>
<tr>
<td>Ambivalent to religious concerns</td>
<td></td>
</tr>
<tr>
<td>Ambivalent to spiritual concerns</td>
<td></td>
</tr>
</tbody>
</table>

79. Is there sufficient information available in Aotearoa about integrating spirituality and/or religious concerns in your practice including practice guidelines, training and professional development in this area? (Please tick one response.)

Yes ____  No ____

80. How well do you think spiritual issues are accounted for in practice given the centrality of tahe wairua for Tangata Whenua?
81. Following on from this survey will be focus groups to discuss specific areas about spirituality and/or religion in social work in New Zealand. What areas do you feel are important for the focus group discussions? What questions about spirituality and/or religion relevant to social work practice would you like explored?

If you have any questions about our project, either now or in the future, please feel free to contact either:-

Mr. Blair Stirling
Department of Community and Family Studies
University of Otago P.O Box 56
Dunedin 9001
University Telephone Number: - 03 4795867

Or

Dr. Anita Gibbs
Department of Community and Family Studies
University of Otago
P.O Box 56
Dunedin 9001
University Telephone Number: 03 4795677

Appendix B
An Invitation and Directions for Return

Directions for return: The completed survey can be returned in the provided self addressed envelope to Mr Blair Stirling c/- The Department of Community and Family Studies, University of Otago P.O Box 56 Dunedin 9001.

Following on from this survey the researchers intend to conduct focus groups to further explore the implications and integration of spirituality/religion in the context of social work in Aotearoa.

For this purpose we would like to extend an invitation to participants of this survey who would like to be involved in further focus group discussions.

If you would like to participate in this opportunity we would ask that you provide your name and contact details below these will be detached from the survey and kept only for administrative purposes to ensure your anonymity. If you are willing to participate in the focus group discussions please also provide your geographical location for logistical/administrative purposes.

Name .........................................................................................................................

Contact (email or phone) ............................................................................................

Location (e.g. Palmerston North) ..................................................................................

Thankyou for your response.

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Appendix C: Information for Participants and Informed Consent

Spirituality/Religion within the Professional Practice of Social Work in Aotearoa

INFORMATION SHEET FOR PARTICIPANTS.

Thank you for showing an interest in this project. Please read this information sheet carefully before deciding whether or not to participate. If you decide to participate we thank you. If you decide not to take part there will be no disadvantage to you of any kind and we thank you for considering our request.

This project is being undertaken as part of the requirements for the Doctor of Philosophy.

The Aim of the Project.

Spirituality and/or religion are a significant aspect of life for many people in New Zealand that has implications for social work practitioners. In 1988 the Royal Commission on social policy received submissions from Tangata Whenua regarding the need to incorporate this dimension of life within social policy. The Aotearoa New Zealand Association of Social Workers code of ethics requires an acknowledgement of this dimension of life. However attention to this area of life and its implications for social work practice in New Zealand has not received focussed attention. This research in acknowledging the importance of spirituality for both practitioners and clients alike is proposing the need to investigate this dimension of life and the implications of this for social work practice in New Zealand to explore the profession in New Zealand and how it has responded to including spirituality and/or religion in practice moving beyond acknowledgement into practice integration.

The aim of the project is

1. To develop an understanding of the perspectives and experiences of social workers in Aotearoa on the role of religion and spirituality within their practice at an interpersonal level with clients.

2. To investigate the implications that the role of religion and/or spirituality has in the social service context of Aotearoa.

3. To investigate the level and methods of integration of spirituality and religion that may or may not be occurring within the context of social work assessment and intervention in Aotearoa.

Appendix C
4. To investigate the ways in which social work practitioners integrate religion and spirituality within their approaches to practice.

5. To investigate the perceptions and attitudes that social workers have about the appropriateness of including spirituality and/or religion in social work practice in Aotearoa.

Who is being approached to participate in completing the questionnaire?

For the questionnaire participants are being sought who are presently working in the field of social work in Aotearoa, employed as either part time/ full time or voluntary social workers within the statutory/ church based social service/ or private sector.

Who is being approached to participate in the focus group discussions?

Following on from the questionnaire focus group discussions will be held with participants who have completed the survey and wish to participate. Attached to the survey is an invitation to join the focus groups.

What you will be asked to do for the survey questionnaire?

Should you agree to take part in this project, you will be asked to answer the questions in the attached questionnaire survey, which should take approximately 30- 40 minutes of your time.

The questionnaire asks your views about the appropriate role of spirituality and religion in social work practice.

This survey is also part of an international research effort and has been conducted in the United States, Norway and the United Kingdom. The questionnaire has been developed further for the New Zealand context.

An opportunity is provided on the final page of the survey for participants who would like to be involved in focus group discussions. Participants who would like to be involved may return the invitation with the survey.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

You may withdraw from participation in the project at any time and without any disadvantage to yourself of any kind.

What Participants who wish to be involved in focus group discussions will be asked to do?

The researchers to organise the most suitable location and time for conducting the focus groups will contact participants who accept the invitation and volunteer to be involved in focus group discussions with other social work practitioners.

Appendix C
Given the possible geographical spread of participants every effort will be made to consult with participants to minimise travel and time commitments.

Each focus group session will take approximately 1-2 hours and consist of approximately eight social workers and the student researcher as the facilitator and possibly a research assistant.

The focus groups will provide the opportunity to discuss with colleagues the themes, issues, findings, questions that arise from the survey and provide a forum for an in-depth exploration of the topic.

Please be aware that you may decide not to take part in the project without any disadvantage to yourself of any kind.

You may withdraw from participation in the project at any time and without any disadvantage to yourself of any kind.

What data or information will be collected and what use will be made of it?

We will be collecting the data generated from the completed questionnaire surveys. In addition we will be collecting the thoughts, ideas and discussions from the focus group discussions.

The results of the project will be published and will be available in the library but every attempt will be made to preserve your anonymity.

You are most welcome to request a copy of the results of the project should you wish.

The focus group discussions will be audio taped, transcribed by the student researcher and available to participants for comment.

All tapes and documents will be kept in a locked filing cabinet and destroyed after five years in accordance with University guidelines.

The focus group discussion involves an open-questioning technique where the precise nature of the questions which will be asked have not been determined in advance, but will depend on the findings of the survey and the way in which the focus group discussion develops. Consequently, although the University of Otago Human Ethics Committee is aware of the general areas to be investigated in the focus group discussions, the Committee has not been able to review the precise questions to be used.

In the event that the line of questioning or discussion does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the project at any stage without any disadvantage to yourself of any kind.

Appendix C
Spirituality/Religion within the Professional Practice of Social Work in Aotearoa

CONSENT FORM FOR

[PARTICIPANTS or PARENTS / GUARDIANS ETC]

I have read the Information Sheet concerning this project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

I know that:-

1. my participation in the project is entirely voluntary;

2. I am free to withdraw from the project at any time without any disadvantage;

3. the results of the questionnaire, focus group sessions, audio tapes and transcripts will be stored at The Department of Community and Family Studies. I understand that any personal information collected will be destroyed at the conclusion of the project but any raw data on which the results of the project depend will be retained in secure storage for five years, after which it will be destroyed;

4. the focus group discussion involves an open-questioning technique where the precise nature of the questions which will be asked have not been determined in advance, but will depend on the findings of the survey and the way in which the focus group discussion develops. Consequently, although the University of Otago Human Ethics Committee is aware of the general areas to be explored in the focus group discussions, the Committee has not been able to review the precise questions to be used.

In the event that the line of questioning or discussion does develop in such a way that you feel hesitant or uncomfortable you are reminded of your right to decline to answer any particular question(s) and also that you may withdraw from the project at any stage without any disadvantage to yourself of any kind.

5. the results of the project may be published and will be available in the library but every attempt will be made to preserve my anonymity.

I agree to take part in this project.

..................................................  ..................................................  
(Signature of participant)  (Date)

This project has been reviewed and approved by the University of Otago Human Ethics Committee

Appendix C
Appendix D: Ethical Approval

05/132

Dr A Gibbs
Community and Family Studies
520 Castle Street

Dear Dr Gibbs,

I am writing to let you know that, at its recent meeting, the Ethics Committee considered your proposal entitled "Moving beyond acknowledgement: An exploration of the concepts, practices and integration of spirituality and religion within the profession of Social work in Aotearoa/New Zealand."

As a result of that consideration, the current status of your proposal is:- Approved

For your future reference, the Ethics Committee's reference code for this project is:- 05/132.

Yours sincerely,

Mr G K (Gary) Witte
Manager, Academic Committees
Tel: 479-8256
Email: gary.witte@stonebow.otago.ac.nz

c.c. Assoc. Prof. P T Shannon Head Community and Family Studies
Appendix E: Focus Group Case Study (NZIRSSOWK II)

Nicole Jamieson was drinking a cup of coffee before seeing her next client. George Brown, the agency manager, came in. "Did you know that Lisa told someone last week that she had been able to help one of our clients, as she put it," George made the quotation marks gesture with his fingers, "‘invite Jesus into her heart!’?" Nicole’s mind raced. She knew that George, new to the agency, had strong reservations about Christians. He had told her shortly after he arrived and learned about the number of Christians working within the agency that he did not want any using their role to proselytise.

Nicole said, "She did what? How did you hear about this?" "I had lunch today with Shannon. The subject of Lisa came up," he replied. Nicole thought to herself, "It sounds like dealing with Lisa may be just the beginning."

Supervising had been one of the roles that Nicole enjoyed most since being hired by the agency. Nicole enjoyed supervising social workers, seeing them gain new skills. She had been supervising for more than 10 years, long before George Brown arrived. Over the years Nicole had supervised social workers who have come from diverse backgrounds and religious and spiritual perspectives, and worked with a significant number who came from Christian backgrounds. These concerned George the most, because he believed that they might use their professional roles for proselytising. Over the years, Nicole had worked with many social workers, some conservative and some not, some religious and some not, some spiritual and some not. Nicole was Anglican herself and a leader in her congregation. She had often thought about how important personal faith could be in sustaining a social worker’s commitment to service; it had certainly been a driving force in her own life although she had never said that to anyone else. In her training she was taught that whatever one’s personal beliefs, it had no place in the professional relationship with a client. Nothing in Nicole’s own professional education had prepared her to think about or address religion and spirituality in the lives of clients, much less to consider how she might use her own faith and religiosity in her practice with them. Most social work programs had reinforced Nicole’s own training by emphasising that one’s professional practice and personal faith should be kept separate.

Although Nicole knew that a number of social workers and clients belonged to varying religious communities including Christians, she knew of no talk of faith or religion amongst colleagues outside of cultural competency concerns and spiritual considerations related to Tangata Whenua and Tangata Pacifica clients. Such topics had never even been mentioned in staff or supervisory meetings. Clearly, the proselytising that concerned George was out of the question. It was considered unacceptable. Over a year ago changes had begun to take place. In a supervisors’ meeting, Belinda, the director of social workers, had told the supervisors that social work programs were beginning to include content on religion and spirituality in their courses as an important dimension of human experience. Articles on religion and spirituality in social work practice had begun to appear. Nicole had talked with supervisors from other agencies, and knew she was not alone in feeling concerned about this shift.

She worried that the boundary between professional practice and personal faith might not be so well defined. During another supervisors’ meeting, one of the other supervisors specifically asked what was taught about the role of prayer in social work. The supervisor raised this issue because she had noted that at times a number of clients were requesting that social workers pray with them. Belinda replied that social workers should not make it a practice to pray with clients. That was the role of clergy, not social workers. "So," Nicole had thought at the time, "we agree on that."

After seeing her next client, Nicole had time to think about the conversation between her manager and Belinda, Nicole’s face flushed with anger and embarrassment. Why was Belinda talking to George instead of to her about her concerns with Lisa? "I’ve helped a lot of social workers through some tough learning experiences," she remembered the first time Belinda had talked to her about Lisa. "Lisa is a person with a deep faith that really motivates her desire to serve others; she has made significant progress in understanding and affirming the values and principles of professional social work."

At the time, Nicole had been astute enough to wonder to herself, "Progress from where? What issues does Lisa have?" She had asked Belinda to explain. Belinda had gone on to say that Lisa is a member of a very conservative, Christian non-denominational congregation well known in the community for its political stance against abortion and against gay and lesbian lifestyles. Lisa had expressed that she did not think social workers should have to make referrals for abortions for clients who asked for them. However, Lisa had learned the meaning of client self-determination as a cardinal social work value, even when the social worker disagreed with the client’s life choices. Nicole had asked, "Lisa, how do you handle your strong commitment to Christian faith in your work with clients?" She did not usually ask questions about personal values, but her conversation with Belinda had alerted her that she needed to discuss Lisa’s values as they related to her practice. Lisa had confidently affirmed, "All clients have the right to self-determination!" At the time, Nicole remembered smiling to herself at the textbook Answer, and thinking, "We’ll have a lot to talk about." Lisa had blossomed professionally. She had changed. One day toward the end of last year, she told Nicole, "I referred a client considering an abortion. Lisa was sombre, and Nicole remembered saying, "I know that must have been hard for you." She had helped Lisa learn to handle a difficult value conflict. She had learned to separate her own choices from the right of clients to decide for themselves. Nicole noted the growth she had seen in Lisa’s ability.
I value clients’ experiences and decisions. So what had happened? Had Lisa used her role as a social worker to convince a client in the middle of a life crisis to become a Christian?

At 4:00, Nicole returned to her office, Lisa was waiting. She looked puzzled and a little anxious. Nicole ploughed in without the usual pleasantries. She was anxious herself. "George told me that he had lunch with Belinda today. Belinda told him that, you shared that you had led one of your clients to become a Christian." Nicole tried not to sound accusatory. "Tell me what happened, Lisa."

Lisa looked confused. "I don’t think I did any leading. I was just facilitating my client’s right to self-determination when she brought up her desire to become a Christian," Nicole tried to hide her impatience with the jargon. "What did your client say, and what did you say, and how did you end up talking about Christianity?"

Lisa paused. "Okay, let me start at the beginning. This is my client Debbie Smith. You and I have talked about her before. She had finally been making real progress in getting her life on track." Lisa’s voice became a bit more confident, "We had talked many times before, but this time was different. She was crying, and she said that she just wanted peace, and she asked me how I found peace. She told me how much she had grown to look up to me and that she had noticed something special in my life." Lisa went on. "I really just tried to honestly Answer the questions she was asking. And I tried to tell her that it wasn’t important what I thought or did. I could only help her explore what she wanted. Finally she said, ‘What I want is for you to tell me how you handle it when things get hard.’ That’s when I told her I found peace in my relationship with Jesus." Without pausing, Lisa continued, "Debbie said that she wanted the peace that could come from a relationship with God. Then she asked me to pray with her, so I did." Nicole saw Lisa’s confidence fade as she realised that Nicole did not share her perception of the situation. With a defensive edge in her voice, Lisa said quietly, "I didn’t bring the issue of faith up. My client did. She was the one who asked about it."

1 This case study has been adapted from Decision cases published by The Council for Social Work Education in Spirituality and Religion in Social Work Practice: Decision Cases with Teaching Notes (2002) with the copyright permission of the Publisher particularly the decision case by Pittman, S and Peres, L entitled ‘What a Supervisor to Do?’ pp. 73-76.

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