SOCIAL WORK & CHRISTIANITY

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NACSW
NORTH AMERICAN ASSOCIATION
OF CHRISTIANS IN SOCIAL WORK

A real Christian presence in social work

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Social Work and Christianity (*SWC*) is a refereed journal published by the North American Association of Christians in Social Work (NACSW) to support and encourage the growth of social workers in the integration of Christian faith and professional practice. *SWC* welcomes articles, shorter contributions, book reviews, and letters which deal with issues related to the integration of faith and professional social work practice and other professional concerns which have relevance to Christianity.

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REVIEWS

Moral, Believing Social Workers: Philosophical and Theological Foundations of Moral Obligation in Social Work Ethics

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The social work Code of Ethics assumes a universalistic foundation of moral obligation to respect the value and dignity of each person and to seek social justice, originally based religious grounds. As a practice-oriented profession, social work does not have a strong tradition of philosophical reflection. As the profession secularized, it continued to assume the validity of its core values. This article examines the philosophical and theological foundations of moral obligation in social work ethics, particularly whether its core values can survive the abandonment of a universalistic foundation. The article reviews the rationalist-humanist model, typified by the work of Frederic Reamer, which has been the dominant voice in the last quarter-century, as well as postmodern and "best evidence" empirical utilitarian alternatives. It concludes that none of these, taken alone, provides a sufficiently robust justification for moral obligation. The article affirms an understanding of moral obligation rooted in the loving and just nature of God and persons created in the image of God.

S OCIAL WORK HAS NEVER BEEN AN ETHICALLY NEUTRAL PROFESSION. Even more importantly, our values and ethics have always been universalistic at a deep level. We believe strongly that some kinds of things are really right and others are really wrong. We believe that others should recognize and honor those values, whether they in fact do or do not. We believe that moral values entail actual obligations to do some kinds of things and not do others.

For example, we believe that social justice is not simply a possibly interesting personal or social construct, but a value that all of us *ought*

to recognize and *ought* to pursue. We believe that all persons have innate dignity and value and that we *ought* to act in ways that respect this value. You only have to look at our Code of Ethics or our accreditation standards for social work education to see that this is so.

This commitment to real values and moral obligation is often a source of on-going inconsistency and embarrassment. We struggle with how to reconcile this commitment with various ideologies we have flirted with down through the years, whether humanist, modern, or post-modern, which at bottom may not support such universalistic moral obligations. The problem is that we have these persistent values that we are not willing to let go of, but we are not sure how we can justify them. Our main solution seems to be just to assume and proclaim them and functionally ignore the awkward questions about where they come from. We would rather not think about the impertinent meta-ethical questions, "Where do my notions of love and justice come from?" and especially "Why should I care? Why should I act on these values, especially when it costs me?"

Social work is a value-driven profession and much has been written about social work ethics. In his article "The Evolution of Social Work Ethics," Frederic Reamer (1998) has chronicled the social work concern with ethics in four major periods that he has labeled (1) the morality period, (2) the values period, (3) the ethical theory and decision-making period, and (4) the ethical standards and risk management period. However, his discussion is largely descriptive. Relatively little has been written about the philosophical (or theological) underpinnings of the nature of ethical obligation or assumptions about the nature of persons required to support core social work values and ethics. This paper will explore some of these foundational questions.

It is generally recognized that we started out with a transcendent religious foundation for our sense of obligation to care for the good of others, especially the most vulnerable and marginalized. James Leiby (1985) wrote an article titled "Moral Foundations of Social Welfare and Social Work: A Historical View" which surveyed the basic moral justifications for social work activity. He says, "The oldest rationale for our work was religious and rested on notions of personal and social responsibility that were found in the Bible" (p. 323). The sense of moral obligation to seek love and justice for all had a universal and religious basis. He says (p. 324):

> It is not necessary to belabor the historical link be-
> tween religious charity and social welfare, but it is
> important to be clear about the relationship among
> the divine commandment of love, the idea of personal
> and social responsibility, and the basis of public or
> governmental provision of help. Christians believed
> that God revealed in the Bible the way to salvation and
> heaven and that the way involved following certain
> laws, summarized by Jesus as to "love thy God with all
> thy heart, with all thy soul, with all thy mind, and with
> all thy strengths: and to "love thy neighbor as thyself"
> (Mark 12:28-31). "Love" was made into "responsibil-
> ity" because "responsible" meant answerable to or
> accountable to, and the Bible said that God would at
> some time judge individuals and communities.

This religious foundation for social work's mission, core values of love and justice, and sense of moral obligation to live out those values was sometimes distorted into moralistic paternalism and a focus on the morality of clients rather than social workers (Reamer, 1998). However, it provided a compelling philosophical and theological rationale for social work values and practice that transcended personal preference or cultural conditioning.

As social work developed aspirations to become recognized as a profession and as our culture became more secularized, social work began to look for other justifications for its mission. Something more scientific and secular was in order. There seems to have been three major contenders. One was the idea that reason or some form of rational social contract based on enlightened self-interest could provide the justification for our values. John Rawls' (1971) theory of justice designed to protect the interests of the least advantaged is one example that has been attractive to social workers. Reamer (1990), building on the work of philosopher Alan Gewirth (1978), has provided the most developed example based on rational self-interest applied to social work. The second was the idea that somehow science and utility could provide a basis for deciding what the best course of action would be (Gambrill, 2003; Atherton & Bolland, 2002; McNeill, 2006). Postmodern social constructionism has provided a third perspective, a

critical counter point to the other two (Hugman, 2003; Walker, 2001; Pardeck, Murphy, & Choi, 1994).

As Reid and Popple (1992, p. 2) have said, "Social work is guided by such moral principles, but they are rarely clearly and completely explicated." I am going to focus on the work of Reamer, since his work has been the most developed and sustained over time.

Social Work Orthodoxy: Humanistic Rationalism and Moral Obligation

Moral obligation has to do with what we mean when we say we *ought* to do something, meaning something more than prudent self interest. Certainly I ought to come in out of the rain (if I happen to want to keep dry), but *ought* in the moral sense carries with it the idea of moral value and obligation and this is the way social workers most often mean it when talking about values and ethics. In what sense *ought* I seek social justice, for example?

In philosophical terms, moral obligation in the robust sense is *deontic* or *deontological*. "Ought" in this sense has to do with some sort of inherent value, obligation that is "binding" on me beyond and independent of what I might desire or of my personal utilitarian or prudential concerns. I have a moral obligation to be truthful or keep promises, even if it is not in my self-interest to do so (or so I believe). And most social workers tend to use value language in this sense, regardless of whether or not it is consistent with their theories about the nature of the universe and persons.

This is in contrast to teleological, consequentialist, or utilitarian understandings of behavior or moral theory. From the utilitarian point of view, the final standard of what "ought" to be done are the results (or nonmoral good) of the action under consideration (Frankena, 1973, 14-17). The action is "good" and "ought" to be done if it brings about a particular desired result. However, the problem with all teleological moral theories is twofold. (1) They cannot, without importing at least one non-consequentialist value, have any way to evaluate the moral goodness of the results (Holmes, 1984). And (2) the kind of "ought" they lead to can never rise to the level of moral obligation. The "ought" remains pragmatic. If you want this result (for whatever reason), then you "ought" to follow this path.

Frederic Reamer has published the most substantive materials on social values and ethics and was a major shaper of the current NASW Code of Ethics. In his book, *The Philosophical Foundations of Social Work* (1993; See also *Ethical dilemmas in social service,* 1990), Reamer discusses the issue of moral obligation under the "authoritative" dimension of normative ethics, which deals with the *why* question: Why should anyone be concerned with morality and ethics in the sense of considering one's obligations to other individuals, especially when these obligations conflict with one's own interests?

Reamer identifies three factors influencing social workers' decisions about how to intervene in practice: the technical, the empirical, and the ethical. He asserts that the ethical must ultimately trump the technical and empirical (p. 48). He recognizes that the technical and empirical factors can help us decide what is most likely to achieve a particular result, but they cannot tell us whether the result is a morally right or wrong, good or bad one. He points out, "As the 'is-ought' problem implies, normative conclusions cannot be deduced directly and immediately from the empirical evidence itself. There is no logical connection between empirical, descriptive statements of fact and ethical judgments" (p. 48; See also Lewis, 1947, which Reamer quotes later in this chapter). "Facts" do not lead to moral imperatives; they can only be interpreted in the light of values that have some other source. Attributing meaning, particularly values, to a particular set of facts requires the importation of at least one deontological value that can never be determined by the facts themselves. He argues that meaning, purpose, and value questions are inevitable in social work practice and that "The inescapable conclusion…is that our professional decisions must be justified ultimately by statements (implicit or explicit) that a particular decision is ethically *right* or *wrong* for specific reasons and has consequences that are ethically *good* or *bad*" (p. 49).

However, the astute reader will have noticed that Reamer never did directly address the question of the source, nature, or authority of moral obligation in the preceding discussion. In fairness, he *did* address the issue more directly in another of his major contributions to the serious discussion of social work values and ethics, *Ethical Dilemmas in Social Service* (1990). In it he frankly acknowledges the "problem of justification," admitting that "Most of the arguments philosophers have presented concerning the justification of moral judgments and principles

have had difficulty standing up under sustained scrutiny" (p. 58). He struggles with how we might find a universal and compelling basis for our values. However, he clearly understands that social work values will not stand up under a thoroughgoing relativism about values.

> If one believes that conclusions concerning ethical values and guidelines reflect only *opinions* about the rightness and wrongness of specific actions and that objective standards do not exist, there is no reason to even attempt to determine whether certain actions are *in fact* right or wrong. One opinion would be considered as acceptable as another. However, if one holds that absolute ethical standards do or can in principle exist, it is sensible to attempt to identify the content of these standards and to subsequently judge the rightness and wrongness of particular actions according to them (p. 55).

He recognizes that the existence of such standards would not eliminate the need to make complex judgments regarding how to apply them in case situations, particularly when they come into tension with one another (p. 65).

Wishing to avoid claims to religious authority, empirical utilitarianism, and intuitionism, Reamer looks for a rational justification of principles that would enable us to separate right and wrong. He hopes that the proposition that good reasons may be given for concluding that certain values should take precedence over others will be enough to stave off relativism without resorting to religion. For these "good reasons," as well as a guide to ethical decision making, he turns to Alan Gewirth's (1978) *Reason and Morality*. Gewirth represents a sort of rational model built on the logical requirements of prudential self-interest.

A fundamental aspect of Reamer's model is its assumptions about what it means to be a person (and therefore deserving of and capable of moral obligation). A human being (or person) is characterized by agency, that is, the rational capacity for self-consciousness, forming intentions (or purposes), and acting in the pursuit of these rational purposes (p. 59). Although never stated this way in so many words, it seems that for Reamer this quality of being human rationally or logically creates in us the moral obligation to treat other such humans in such a way as to further their ability to be agents (that is, engage in purposeful action). In

order to function as human beings, therefore, we have "a fundamental right to *freedom* and *well-being*" (p. 59) which are the necessary conditions for purposeful action. All "responsible" persons have a "generic right" to freedom and basic well-being. If we want this for ourselves, he argues that we are logically required to want and respect this for other persons (Gewirth's version of the Golden Rule).

Gewirth spells out what he believes to be the rational basis of this model of ethical obligation quite specifically. He says that the main thesis of his work is that "every agent, by the fact of engaging in action, is logically committed to accept a supreme moral principle having a certain determinative content" (1978, p. 48). He asserts that any agent who denies or violates this principle is guilty of self-contradiction and the principle itself remains unchallenged as the criterion of moral rightness. Conformity to its requirements is still categorically obligatory. Gewirth outlines his argument in this way (p. 48):

> First, every agent implicitly makes evaluative judgments about the goodness of his purposes and hence about the necessary goodness of the freedom and well-being that are necessary conditions of his acting to achieve his purposes. Second, because of this necessary goodness, every agent implicitly makes a deontic judgment in which he claims that he has rights to freedom and well-being. Third, every agent must claim these rights for the sufficient reason that he is a prospective agent who has purposes he wants to fulfill, so that he logically must accept the generalization that all prospective purposive agents have rights to freedom and well-being.

The model is elaborated by the identification of three types of "core goods" that human beings must therefore value. These goods are made the basis of a hierarchy to guide ethical decision making when goods conflict. "Basic goods" are "necessary pre-conditions," those aspects of well-being necessary for any person to engage in purposeful action, such as life, health, food, shelter, mental equilibrium (p. 59). "Nonsubtractive goods" and "additive goods" are second-order goods and are relative to the person's status quo prior to engaging in action and relative to the person's views about the goods (Gewirth, 1978, p. 53). "Nonsubtractive goods" consist in

the person retaining whatever the person already has and regards as good. Losing "nonsubtractive" goods is to suffer a diminution of the goods already possessed and would diminish the person's ability to pursue goals. In other words, nothing is subtracted from the person's stock of goods. Examples of such loss would be the results of being stolen from, cheated or lied to, or losing status or power. "Additive goods" are additions to a person's stock of goods (beyond the basic and nonsubtractive goods) that increase the person's ability to pursue goals. Reamer (1990, p. 60) cites knowledge, self-esteem, material wealth, and education as examples of additive goods.

Although Reamer does not specifically address the "is-ought" or "fact-value" dilemma, Gewirth clearly thinks he has. He says all purposive action is valuational and that:

> Thus from the standpoint of the agent the "fact-value" gap, even if not the "is-ought" gap, is already bridged in action. On the basis of his engaging in purposive action every agent is logically committed to accept this value judgment about necessary goods, and we shall see how this in turn requires him to accept certain judgments about rights. (1978, p. 57)

Reamer follows Gewirth in moving from the "valuational" to the "deontic" in the form of fundamental human rights that all rational persons have a moral obligation to respect. Gewirth says, "Since the agent regards as necessary goods the freedom and well-being that constitute the generic features of his successful action, he logically must also hold that he has rights to these generic features, and he implicitly makes a corresponding right-claim" (1978, p. 63). Such a right-claim is an explicit or implicit demand for an "ought" judgment that other persons at least refrain from interfering with the person's freedom and well-being. Gewirth sees this as grounded in the agent's own prudential criteria as necessary to being a purposive agent, not based in a general social contract or even a specific agreement made with others (pp. 66-73). And if the agent holds a right-claim or entitlement of this sort, "to avoid contradicting himself the agent must admit that other persons have the same rights to freedom and well-being against himself as he here claims against them" (p. 75). Thus, Gewirth argues, the individual prudentially based right-claim to freedom and well-being logically leads

the agent to recognize the moral ground for the rights of other purposive agents to freedom and basic well-being.

From this basis, Reamer (following Gewirth) develops a hierarchy of obligations and a set of basic rules or criteria for resolving conflicts between prima facie duties which happen to comport very well with Western liberal democratic thinking. Freedom is the highest value for an individual human agent, but freedom can't be exercised without basic well-being. So, Reamer's paradigm for ranking values and ethical decision making looks like this (1990, pp. 62-65):

1. **Basic goods take precedence over other goods.** Rules against basic harms to the necessary preconditions of action (life, shelter, health, food, mental equilibrium) take precedence over rules against harms to nonsubtractive goods (lying, revealing confidential material) or additive goods (recreation, education, wealth). If a person or group violates the rights of another to freedom and well-being, action to prevent or remove the violation may be justified. This depends on the extent to which the violation jeopardizes an individual's ability to act as an agent in the future.

2. **The individual well-being of others takes precedence over my personal freedom.** Another person's right to basic well-being takes precedence over my right to freedom, assuming my basic freedom and well-being are not jeopardized. This is necessary because I have a duty to respect others' right to the goods that are the necessary preconditions of action (freedom and well-being). I cannot exercise my freedom in such a way that it threatens the welfare of others.

3. **An individual's freedom takes precedence over that individual's own well-being.** My freedom (assuming voluntary, purposeful choice) takes precedence over my own well-being. I may choose to engage in self-destructive behavior if my choice is voluntary, made with awareness of the relevant circumstances, and will not threaten the well-being of others.

4. **The obligation to obey laws or rules freely consented to normally takes precedence over individual freedom.** Rules and regulations to which I have voluntarily and freely consented originally override my right to act voluntarily

and freely in a manner which conflicts with these laws and policies. I am ordinarily obligated to obey the law of the land as well as the rules and regulations of my employer. As a member of the National Association of Social Workers, I have presumably consented to act in a manner consistent with its standards of professional conduct and incur the possibility of censure should I fail to do so.

5. **The basic well-being of persons takes precedence over laws, rules, and regulations.** An individual's right to basic well-being may override laws, regulations, and arrangements of voluntary associations in cases of conflict. Clearly, at what point such violation is justified is quite debatable.

6. **The obligation to prevent basic harm and promote public goods takes precedence over property rights.** The obligation to prevent harms to the basic well-being of persons such as starvation and to promote public goods such as housing, education, and public assistance overrides individuals' rights to retain all of their property (for example, justifying taxation for the public good). This is the wedge that holds open the door to the limitation of personal freedom on behalf of the common good. However, by itself, it may not hold the door open very far.

Reamer then goes on to illustrate the application of the then-current Code of Ethics and his principles to complex case situations in which prima facie obligations come into conflict and must be resolved. The guidelines are actually quite useful as a way to identify and think about social work practice and policy issues. The problem is that they just don't satisfy the need for a robust foundation for the bindingness of moral obligation.

Reamer's justification of turning the basic preconditions of purposeful action (freedom and basic well-being) into a rational justification of human rights and a corresponding moral obligation is a very thin reed to support moral obligation and the kinds of values embodied in the social work Code of Ethics, but it is as good as it gets in the social work literature. Gewirth asserts that the cost of not accepting his logic is the "pain of self-contradiction." He also attempts to argue that even the egoist, fanatic, or amoralist can reject the implications of "ought" arising from necessary conditions

of freedom and well-being only at the cost of not being rational or not being conatively normal, or both (1978, pp. 89-93).

But is his assertion justified? If there are no moral universals, I may quite rationally desire and pursue my own freedom and well-being without desiring and pursuing yours, unless it is prudentially self-serving for me to do so. It is the same problem that Rawls' model of rational self-interest has. If I were indeed in the "Original Position" of not knowing what my place in society might be, I might rationally choose a system that protects the "least-advantaged." However, neither I nor the power brokers of any actual society are in that "original position." Rawls' model can be a very helpful thought experiment for a person committed to principles of justice on some other grounds. However, Rawls cannot sustain moral obligation in the absence of some more universal foundation.

Even if we were to accept the logic of the argument Gewirth and Reamer put forth, the skeptic in me can't help but ask, why, pray tell, should I be logical? Perhaps I may find the "pain of self-contradiction" a relatively minor thing to endure if I believe I live in a universe that offers no stronger foundation than this for moral obligation.

Is There a Postmodern Alternative?

If Reamer represents the high water mark of modernist individualism, rationalism, and universalism in social work ethics, is there a postmodern alternative now that the modernist faith is being challenged?

Many social workers seem to think so. They like some of the features they perceive in postmodernism, such as an appreciation of the "constructed" or subjective nature of each person's perception of the world and "truth," its emphasis on personal narratives and metanarratives in understanding meaning, and its apparent openness to "oppressed" discourses. It also seems to fit well with the social work impulse to affirm diversity and avoid making moral judgments regarding clients' behavior. An example of this welcome is found in Pardeck, Murphy, and Choi's article, "Some Implications of Postmodernism for Social Work Practice" (1994).

Richard Hugman has provided a relatively well-developed discussion of the postmodern challenge to modernism in his article "Professional Ethics in Social Work: Living with the Legacy" (2003). He describes modernity as being characterized by positivism in science

and philosophy, rationalism, objectivism (a correspondence theory of truth; "truth statements" describe the world as it is), and universalism (truths apply to all). This is contrasted with postmodernity, characterized by constructivism in science and philosophy, interpretivism, subjectivism (relational theory of truth; "truth statements" describe the world as it appears from a standpoint), and pluralism (p. 6). He argues that both deontological and utilitarian versions of modernist ethical theory are characterized by holding the liberal worldview (p. 7):

- The moral value of individual persons as autonomous rational beings;
- The universality of values and principles;
- The possibility of deducing moral 'laws' through rational reflection;
- The goal of individual liberty (freedom, emancipation) in the just ordering of a society.

It is quite easy to see Reamer and the NASW Code of Ethics in this list—an understanding of ethics that postmodernism has rendered untenable. Hugman then describes the emergence of "critical theory" or "radical" social work emphasizing social justice, which he admits is frequently ill-defined and too broad to have much force. However, he thinks the radical approach served to at least increase awareness of oppressed groups and somewhat more "emancipatory" practices.

Hugman then turns to look more at what he perceives to be the issues raised for social work ethics by postmodernity. He characterizes the (now untenable) modernist assumptions as including essential concepts of "good" and "bad," rational "laws" that can be discerned and applied, resolution of contradiction at the level of first (or highest) principles, and universal principles (p. 8). In contrast, postmodernist ethical assumptions include ambivalence regarding "good" and "bad," non-rationality in that an exhaustive set of "laws" cannot be applied, irresolvability of contradictions, and situational principles (p. 8).

In characterizing the role of ethics in postmodernity, Hugman relies heavily on Bauman (1993; 1994). Hugman argues that postmodernity does not amount to a relativistic declaration that "anything goes." He argues that the claimed universality of "power-assisted ethical codes" should instead be understood as "parochial" in a

way that makes ethics everyone's business rather than elite "ethical specialists" (p. 9). He says, "instead of seeking to develop universal moral laws, ethical reasoning should be concerned with assisting every person in engagement with the messy business of negotiating the dynamic moral order in which they live" (p. 9).

Bauman (1993) believes that the basis of ethics derived from postmodernity can be characterized as "being-for-other" (pp. 13, 74-78). Bauman (1994, p. 19) says:

> To take a moral stance means to take responsibility for the Other; to act on the assumption that the well-being of the Other is a precious thing calling for my effort to preserve and enhance it, that whatever I do or do not do affects it, that if I have not done it, it might not have been done at all, and that even if others do or can do this does not cancel my responsibility for doing it myself…and this being-for is unconditional—it does not depend on what the Other is, or does, whether s/he deserves my care or repays in kind.

As a Christian, I read that and think it sounds very good, much like the Christian concept of *agape* love, the responsibility to care for the good of others regardless of their behavior or "worthiness." But for me, this radical moral obligation to care and act for the good of others is neither a rational calculation of self-interest nor a subjective existential choice; it is grounded in the very character of God's love and grace.

Neither Hugman nor Bauman explain how this notion of "being-for-other" rises to the level of moral *obligation* or ethical imperative. Hugman acknowledges that the abandonment of the idea of universal moral imperatives challenges the whole project of developing meaningful professional codes of ethics. He states the problem quite precisely (2003, p. 10):

> The challenge for ethics presented by post-modernity is how to respond to social diversity without sliding into nihilism (no perspective matters), solipsism (only my own perspective matters) or totalitarianism (only the most powerful perspective matters). If there are no longer any clear strong unified over-arching premises, are we not

> simply left with a myriad of positions that must be seen
> as (at least potentially) in conflict with each other?

Having honestly identified the problem, does he have a compelling answer? I don't think so. He seems to believe that a feminist, relational idea of an "ethics of care" focusing on attentiveness, responsibility, competence, and responsiveness can be a better foundation for ethics than what he characterizes as the liberal, contractual idea of ethics focusing on duty, obligation, reason, and autonomy (pp. 10-11). But why *ought* I care?

While the "ethics of care" includes important emphases that may, indeed, get lost in the Western, rational, liberal tradition, there is no fundamental reason that social work ethics is limited to this dichotomous choice. And even if we were to opt for this "ethics of care," does it answer the challenges that postmodernity poses for professional codes of ethics so well identified by Hugman? Or, is it the case, as Hugman says, that, "One reading of recent theories would be that such an exercise [developing professional codes of ethics] is destined for the dustbin of history" (p. 11).

Hugman acknowledges that, "social work is unlikely to be able to survive without a formal statement of ethics constituted in a 'code'" (p. 11). He expresses optimism that it is possible to develop a code of ethics that would recognize diversity of fundamental values yet somehow avoid fragmentation and factionalism. He thinks that what would be required is "to ensure that the multiplicity of choices can be heard, and that difference can be expressed and accommodated, without either having to produce a forced consensus or else to fragment into an unconnected cacophony" (p. 11). However, he provides no explanation of how that could actually be accomplished or how the result would have moral authority. The case is simply not made.

His answer seems to boil down to the belief that it somehow *must* be possible, because the old foundations can no longer be believed and the only other alternatives ultimately are nihilism, solipsism, or totalitarianism, which he finds unacceptable. He says, "It seems difficult to imagine a profession of social work that cannot encompass the values of '*respect for persons*' and '*commitment to social justice*', embracing both individual and structural being and doing" (p. 13). Well, yes. And he has not shown us how these values can be sustained.

The "Best Evidence" Empirical Utilitarian Response

Some would argue that we don't have to concede to postmodernity. We can salvage enough from a pragmatic empiricism to support our value choices and practice. An example of this would be Charles Atherton and Kathleen Bolland in their article "Postmodernism: A Dangerous Illusion for Social Work" (2002). Quoting Finn (1996), they aptly characterize postmodernism as "lyrical nihilism" (p. 422). They point out that skepticism towards metanarratives is not unique to postmodernists and they say that scientists have known all along that they are not dealing directly with "Reality" or "Truth" but with descriptions and explanations that are only approximations of nature. However, they argue for the value of "best evidence" approximations.

Although they are altogether too optimistic about the empirically oriented utilitarianism to support social work values, they are quite clear about the inevitably nihilistic consequences of a thoroughgoing postmodernism. If everything is subjectively or socially constructed discourse, there can be no way to claim that any particular discourse has a better claim to justice or truth than any other. "From a postmodern perspective, writers who deny the Holocaust are simply offering an account of events that is unreconcilable with other accounts, and that is all that can be said" (p. 428). They cite Sokal and Bricmont (1998) who are argue that the social sciences suffer more than the physical sciences if a fully postmodern perspective is adopted. If all discourses are merely "stories" or "narrations," the worst sexist or racist prejudices and the most reactionary socio-economic theories are equally valid. Relativism provides no basis for criticizing the social order, providing no grounds for criticizing either colonialism or female genital mutilation. They argue that if social work wants to take postmodernism seriously, it must abandon the idea of all enforceable codes of ethics since they have no privilege over other notions of behavior.

Atherton and Bolland do not want to do this. They say, quite accurately I believe, that "Social workers cannot be postmodernists because they operate from a set of convictions that they believe are qualitatively better than competing sets" (p. 431). Not quite so accurately, I believe, they think that rational naturalism can provide us all we need to uphold our values and our practice. They believe that there can be standards for best practice or best policy, "subject to empirical evidence and critical review," allowing social workers to make practice decisions "on the basis

of best evidence of success using pragmatic tests" (p. 431). They assert that social workers "should continue to argue for one set of ethics over another on principled grounds without hanging their heads over such privileging of their principles" (p. 431). What they *don't* do is explain what those principles would be and what would justify their privileged status, particularly in conferring moral obligation. It would seem that they either ignore the "is-ought" dilemma ("facts" do not lead to moral imperatives; they can only be interpreted in the light of values that have some other source) or they assume that these principles are somehow self-evident to rational empiricists.

The problem is recognized by McNeill (2006), who tries to steer some sort of middle course between rational positivism and sweeping acceptance of postmodernism. He is very clear about the problem postmodernism poses to social work values. He says, "At the furthest extreme of postmodernism, relativism takes on an anarchical dimension" (p. 149). He says "the relevance of the extreme versions of postmodernism in which one expression of reality is considered as valid as the next and where there is no absolute right or wrong is rejected by many social workers" (p. 149).

He argues for a "humble realism" that tries to keep what he perceives as the best of both modernism and postmodernism. This humble realism assumes "the relativism of multiple realities as each person interprets the social world in her or his own unique way" but nevertheless that "the social world is still 'knowable' even if in incomplete ways" (p. 149). He wants to hold onto the possibility of critical value judgments and social justice advocacy. He says a critical approach "holds to an idea that some interpretations of the external world are more compelling than others" and that social workers should be informed by the values of their clients but also by those such as antioppression, antiracism, and feminism (p. 150).

He goes on to describe social workers of "brokers of reality," saying "this means having the capacity to view the world with different lenses and deciding to accept some versions of reality at the expense of other versions" (p. 150). He recognizes that this requires "reliance on the discourse of experts for authority" (p. 151) but does not discuss why or how such authorities are morally compelling. He also thinks such critical claims need to be tested somehow through research. He says:

> Without rigorous testing, critical approaches to prac-
> tice are more likely to resemble the world of politics,
> which is often more about power than truth. There-
> fore, we need to ask whether a particular discourse is
> useful as a frame of reference for understanding certain
> social or psychological problems. (p. 151)

The meaning of "useful" here is the key question that has imbedded
in it intractable issues of value—useful for what, and why? McNeill
does not provide an account of how "humble realism" alone could
reach a validation of "useful" that would be a morally compelling
guide to social workers as brokers of reality.

**Moral Obligation Founded on God's Loving Nature and Divine
Command**

As C. S. Lewis pointed out in his classic discussion of the nature
of values and personhood, *The Abolition of Man* (1947), neither sub-
jectivism nor empiricism will provide us an adequate foundation for
moral obligation. The debunkers of moral universals, whether mod-
ern or postmodern, at least among social workers, tend to assume
that that somehow "social work values" are immune to the corrosive
skepticism of their philosophies. As Lewis (pp. 41-42) says:

> Their skepticism about values is on the surface: it
> is for use on other people's values; about the values
> current in their own set they are not nearly skeptical
> enough…A great many of those who 'debunk' tradi-
> tional or (as they would say) 'sentimental' values have
> in the background values of their own which they
> believe to be immune from the debunking process.
> They claim to be cutting away the parasitic growth of
> emotion, religious sanction, and inherited taboos, in
> order that 'real' or 'basic' values may emerge.

Values as subjective preferences provide no moral imperative or
obligation beyond that which the individual happens to experience
(solipsism). Empiricism may, under ideal conditions, tell us that
if we do certain things other particular things will happen. What
empiricism can never tell us is whether or not those other particular

things are "good" or "ought to happen." As I have said elsewhere (2003, p. 16), it is a fact that some adults have sexual contact with children. This fact tells us nothing about its "meaning," or what, if anything, anyone "ought" to do about it. Lewis (1947, p. 43) says, "From propositions about fact alone no *practical* conclusion can ever be drawn. *This will preserve society* cannot lead to *do this* except by the mediation of *society ought to be preserved.*'" The value "society ought to be preserved" is not derived from any combination of facts alone. Neither subjectivism nor empiricism can tell social workers they have a moral obligation to respect the innate value of every human being or to seek social justice. Yet we social workers are, rightly, I would say, unwilling to give up these core values.

It would seem that social work ethics require some more robust and durable philosophical foundation than subjectivism, rationalism, modernism, naturalism, or postmodernism can provide. Whether or not is fashionable to say so, we need a "universal" ethic which establishes moral obligations that apply to all human persons and that transcends such distinctions as gender, family, ethnic group, nation, or race. I am going to argue that social work values require a metaphysical foundation for its universalistic ethics and that the divine command theory of moral obligation is just the kind of foundation we need for our ethical obligation to seek justice and the good of others.

C. Stephan Evans (2006; 2004) has provided a lucid and compelling discussion of the divine command meta-ethical theory and its relevance for the universal ethics embodied in professional codes of ethics. His primary focus is on the Code of Ethics of the American Psychological Association. However, his arguments apply equally if not in greater measure to the Code of Ethics of the National Association of Social Workers, in particular to the core principles of social justice and the dignity and worth of the person and the applications of these principles in the specific provisions of the Code.

Evans reviews several efforts to develop secular meta-ethical foundations for universal moral obligations. He observes that "rival meta-ethical accounts are closely related to rival worldviews" and goes on to argue (2006, p. 80):

> [A] religious worldview, of the type seen in Christianity and other theistic religions, has some significant advan-

tages over its secular rivals in explaining why universal obligations hold and also why humans should care about such obligations. Secular meta-ethical accounts of a universal ethic not only face significant philosophical difficulties; they also undermine motivation to follow such an ethic by those who accept them, and this is a significant problem for a meta-ethical account.

A moral obligation is a duty, something that a person ought to do. It has a "binding" quality that says what a person *should* do, all things considered. A moral obligation has a certain degree of objectivity—it is possible to be right or wrong in regard to a moral obligation and the obligation persists whether or not it is recognized or desired.

Evans argues for a religious meta-ethical divine command theory of the universal obligation to love others. He says that one of the significant advantages of a divine command theory is precisely that it gives transcendence to moral obligations. Since the obligations come from God and are founded in God's own nature of love and justice, the person, no matter how limited and finite, always has some place to stand to critique the dominant narratives or norms of any particular human society (2004, p. 326). Moral obligations are essentially identical to the commands of a loving God, and the first commandment is to love God unconditionally and our neighbor as ourselves (Mark 10:29-31; Deut. 6:5). Loving God is the key to our greatest good and every person is made in the image of God. Grounding the love of others in God is the strongest reinforcement of its obligation (2006, p. 84).

Evans is careful to make clear that non-religious persons can be aware of moral obligations regarding love and justice and that this awareness is in keeping with what would be expected if the divine command theory were true.

> The view that moral obligations are in fact divine commands does not imply that one must believe in God to be aware of moral obligations. Rather, if moral obligations are divine commands, then people who do not believe in God fail to know something important about the nature of moral obligations, but they can still be aware of their reality (2004, pp. 84-85).

Being universal obligations, built into the nature of the universe, these moral obligations will tend to be persistent, even in the face of worldviews and philosophies that don't recognize or sustain them.

In response to the question of how love can be a moral obligation or duty, Evans properly distinguishes love as a transitory feeling from love as a settled disposition that emerges out of decisions and willed actions. The Christian understanding of love is that we love because God first loves us, and we are obligated to love others (I John 3:1-4:21; James 2:8-17). This certainly includes emotional components such as gratitude, tender compassion, and personal attraction, but is not completely dependent on them. It is possible to be under moral obligation to love and care for the good of those we have never seen. However, the New Testament reminds us that if we don't love our neighbors whom we have seen, we might be deluding ourselves to think we love God whom we have not seen (I John 4:19-21; Matthew 25:31-46).

A divine command theory of moral obligation based on God's own loving nature should not be confused with a notion of ethics as legalistic prescription for every conceivable situation or a burdensome infantilization which takes away our dignity, freedom, or responsibility. Evans says:

> God extends us the freedom to obey or not to obey his commands. The commands do not take away our freedom but give us a structured, moral universe in which the significance of our freedom is increased. And God does not treat us as infants, but gives us general moral precepts that we ourselves must creatively interpret and apply to our situations in the light of our knowledge and understanding of those situations (2006, p. 83).

Evans reviews two representative secular attempts to provide a meta-ethical foundation for universal moral obligations. He shows that, while the ideas may be interesting or even useful in thinking about morality, neither provides a credible foundation for actual moral obligations.

One is evolutionary naturalism, which tries to give a scientific basis for universal duties by grounding them in evolutionary theory, typified by Arnhart's (1998) *Darwinian Natural Right: The Biological Ethics of*

Human Nature. Arnhart argues that some human desires are universal because they are grounded in human nature as this has evolved, and these universal desires can be discerned and explained by evolutionary biology. Evans (2006, p. 85) points out that, while this offers a hope that social feelings and the need for cooperation might develop to encompass all groups, tribes, nations, and races, Arnhart admits that such universal altruism cannot be derived from biological facts and that such a hope is utopian. He concedes that a universal ethic would require a transcendent norm of impartial justice beyond the order of nature, like Christian Charity. It is the old story. Even if it could be shown that persons tend to *feel* moral obligations and that these tendencies have genetic or evolutionary roots, that is far from supporting any actual moral *obligation* to act on those feelings or tendencies.

The second type of secular meta-ethical approach Evans reviews is humanistic naturalism, or social contract views of morality. The type tends to see human beings as "rational maximizers" who learn that they will be better off if they become "constrained maximizers" who agree to some basic rules of morality, rather than "straightforward maximizers" who take a short-term view of their self-interest (2006, pp. 87-88). This is typified by John Rawls (1971) in his *A Theory of Justice*. The social contract, as I said earlier, is a very helpful thought experiment for those who have a sense of moral obligation to seek justice, but the contract itself cannot impose such a universal sense of moral obligation. Rational self-interest leading to a social contract can never be more than a hypothetical agreement based on the assumptions that persons were fully rational, impartial, and reasonably informed about the political, economic, and social consequences of the options at hand. Even if we were able to create a reasonably just social contract that protected the interests of the "least-advantaged" (a remarkable leap of faith), why should I feel morally obligated to follow it, especially if I had good reason to believe that my violations would not be caught or that other persons were likely to be cheating?

Moral, Believing Social Workers

My title, "Moral, Believing Social Workers," is borrowed from the work of Chris Smith, perhaps the leading sociologist of religion in the United States. His book, *Moral, Believing Animals: Human Personhood and Culture* (2003), critiques much of the sociological

and psychological literature on persons and the nature of human behavior and society, primarily for its reductionistic treatment of values and morality. Both modernism and postmodernism tend to explain away or "see through" morality and values in any transcendent or obligatory sense. This is true from Freud's psychodynamic theory (*The Future of an Illusion,* 1989), through Skinner's behavioral determinism (*Beyond Freedom and Dignity*, 1971), to Wilson's sociobiology or evolutionary psychology (1998).

Smith argues that one of the most central and fundamental motivations for human action is to act out and sustain moral order. Theories of human behavior and society that don't take this into account are inadequate. He says there is no way to be human except through moral order and that the most adequate approaches to theorizing about human culture must be normative ones. They must conceive of humans as "moral, believing animals" and social life as consisting of moral orders that constitute and direct social action.

> Human culture is always moral order. Human cultures are everywhere moral orders. Human persons are nearly inescapably moral agents. Human actions are necessarily morally constituted and propelled practices. And human institutions are inevitably morally infused configurations of rules and resources (p. 7).

He explains that what he means by morality and values is not simply subjective personal preference.

> What I mean by 'moral,' to be clear, is an orientation toward understandings about what is right and wrong, good and bad, worthy and unworthy, just and unjust, that are not established by our own actual desires, decisions, or preferences but instead believed to exist apart from them, providing standards by which our desires, decisions, and preferences can themselves be judged. Human animals are moral animals in that we possess a capacity and propensity unique among all animals: we not only have desires, beliefs, and feelings (which often have strong moral qualities) but also the ability and disposition to form strong evaluations about our

> desires, beliefs, and feelings that hold the potential to transform them (pp. 8-9).

Moral orders entail obligations, imperatives that are intrinsically motivated because they are believed to be right, good, worthy, or just—independent of the person's own wishes and not because they might achieve some personal benefit.

Smith, like Evans discussed above, goes on to critique representative reductionistic theories of human motivation, particularly sociological ones. He argues that morality can't be reduced to self-interest (rational or otherwise), altruism, or socialization. He explores the question of how we can account for this curious, persistent moral quality of human beings. Why are humans moral animals? He suggests that a plausible answer is that they have evolved the neurological capability because God has created them so.

A robust understanding of moral obligation such as contained in the social work Code of Ethics cannot survive without a transcendent foundation. Smith observes that the logical conclusion of reductionistic understandings of values eliminates any shred of belief in human morality—freedom, dignity, choice, rights, and responsibility. For example, commenting on sociobiological theories, he says:

> When human morality is redefined entirely in relation to reproductive fitness—so that morality is no longer driven by natural law or the will of God or self-evident inherent moral values—then we lose any real standard to judge actions. Genetic survival and extinction in a competitive environment is all that is. Beyond that we can have nothing evaluative to say about which genes successfully reproduce or how they do it. Indeed, we no longer even possess standards for value judgments about what constitutes progress in evolution. It is finally of no more value that humans survive than do bacteria (p. 37).

Conclusion

Is it possible that if there is no transcendent metaphysical basis for our ideas of love and justice, we are just whistling in the dark as we nervously walk by the graveyard of social work ethics? I think so. Reductionistic theories of values and ethics may well be true. But if

they are, let us have no more foolish talk about the inherent dignity and value of each person or our moral obligation to seek social justice.

But if we insist on holding on to these notions of real moral obligation, love and justice, then we will need to place our faith in some other explanation of values, one that will sustain us when love and justice are costly. And we all do walk by faith—the secular, modernist, or postmodernist theorist no less than the Christian. Smith says, "Everyone—the secularist and nonreligious included—is a believing animal, ultimately a person of faith" (p. 133). None of us has epistemological certainty. We all finally step out in faith, based on assumptions that we cannot prove.

Yet we find ourselves very reluctant to give up on the idea that somehow moral obligations are real ones. It may be the case that I am simply wrong about love and justice, but I find it harder to believe that they are just illusions than I do to believe that they are real. Believing that they are grounded in the loving and just nature of God and the creation of persons in the image of God gives me all the foundation I need to feel morally obligated to seek love and justice for all. It is something I really *ought* to do. ❖

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The Integration of Spirituality and Religion Content in Social Work Education: Where We've Been, Where We're Going

Stacey L. Barker

In response to the growing concern among social work students, practitioners, and educators about the lack of content related to spirituality and religion in social work education, the profession of social work has seen more than a decade of scholarly activity and curriculum content changes designed to address this very important issue. This paper examines the current place of spirituality and religion content in social work education through the backdrop of the profession's history; through diversity theories, including cultural pluralism, people-of-color, populations-at-risk, and transculturality; through a human development lens, including the theories of Fowler, Gilligan, and Borysenko; and through transpersonal theory as an alternative for understanding spirituality and religion. An overview of the empirical literature related to spirituality and religion and social work education is provided.

I NTEREST IN EXPANDING SOCIAL WORK KNOWLEDGE AND SKILL THAT addresses spiritual and religious issues in both education and practice has grown significantly in the past two decades. This focus within the profession parallels what has happened in popular culture, as demonstrated by the overtly spiritual and religious themes in movies, books, and music, (Canda & Furman, 1999). Effective social work practice requires that we acknowledge the variety of ways to connect with client systems. Effective social work practice in the 21st century cannot ignore the diversity of spiritual and religious paradigms represented in the United States and across the world.

The inclusion of spirituality and religion within social work is supported by the profession, including mandates from the National Association of Social Workers (NASW) and the Council on Social Work Education (CSWE). The NASW Code of Ethics (1999) includes spiritual and religious diversity in its standards for cultural competence. In order to be accredited by CSWE, social work educational programs must include spiritual and religious issues in their frameworks for understanding diversity and human behavior (Council on Social Work Education, 2001). CSWE standards indicate basic areas in which students should be provided appropriate content

In the United States, the Educational Policy and Accreditation Standards (EPAS) of CSWE specifically mention "spiritual development" in section 3.0 (objective 7) as content applicable to understanding human behavior; religion is specifically mentioned in sections 1.2 and 3.0 (objective 3) in the context of professional practice without discrimination (CSWE, 2001). While EPAS does allow for flexibility within particular programs related to mission, goals, and objectives, EPAS establishes basic requirements for content that programs must meet in order to be accredited. This is the context in which knowledge and skills for professional practice are packaged in our current system.

It is important, then, to examine social work education policy in the United States, asking several important questions. How does the overall system support the inclusion of spirituality and religion content in accredited programs? How has spirituality and religion content developed? Is diversity the most helpful context in which to cover this content? And, what are alternative ways to think about spirituality and religion? The goal of this paper is to provide a backdrop for more in-depth exploration of these questions.

Defining Terminology

Before moving into a further discussion of the place for spirituality and religion content in social work education, it is important to establish some definitions of the terminology related to these concepts. As Canda and Furman (1999) point out, it can be very difficult to define spirituality in a way that can be operationalized; attempting to conceptualize the term "both clarifies and complicates the meaning of the term" (p. 57). *Spirituality* in the social work profession is generally

associated with the human attempt to find meaning and purpose in life through relationships with self, others, a higher power, and/or the cosmos (Canda & Furman, 1999). Another definition of spirituality emphasizes the dynamic and evolutionary process through which humans seek purpose (Cowley, 1996). In other words, spirituality is developmental. Spirituality is also understood to encompass beliefs people have about reality beyond the material world (Miller & Thoresen, 2003; Larson, Swyers, & McCullough, 1997, Barker, 1995). Further, spirituality is described as the core, the essence, the nature of the individual (Carroll, 1998; Carroll, 1997). As the literature suggests, there are many ways to define *spirituality*.

Religion is generally defined as a concept that is separate, yet overlapping spirituality. One generally accepted definition of religion is "an institutional community pattern of beliefs, rituals, and values relating to spiritual concerns" (Canda & Furman, 1999, p. 60). Others understand religion as a means to relate to the sacred (Pargament, 2002), "believing" (Gotterer, 2001, p. 188), a context in which one's spirituality can be explored and developed (Hill & Pargament, 2003), and "a communal setting" through which beliefs are organized and spirituality is practiced (Hodge & McGrew, 2005). Similar among the various definitions of religion is the idea of organization and structure.

Although spirituality and religion are two separate concepts, it is important to recognize that they can also be interconnected. For example, spirituality for many people is expressed in the form of religion. All major religions ultimately address spiritual concerns. In thinking about what social workers need to know in order to practice more effectively, content related to *both* concepts is necessary. In the current political landscape of the United States, the impact of religion on social welfare and social welfare policy cannot be ignored. In an effort to acknowledge the distinctions between spirituality and religion, both terms will be used, side-by-side, throughout this paper.

Historical Context: Spirituality and Religion in Social Work Education

Social work was founded in the context of Judeo-Christian principles and the social gospel movement of the late 1800s. Indeed, religion played a role in the early development of the profession

(Cnaan, 1999). According to Leighninger (2000), "although in the early years the field of social work was predominately white and Protestant, it also included Jewish, Catholic, and African-American practitioners" (p. 19). As a matter of fact, Jewish and Catholic groups often developed their own social service agencies and schools of social work (Leighninger, 2000).

Motivated by Abraham Flexner's 1915 address in which he declared that social work was not yet a profession, practitioners began to systematically organize the profession. This included de-identifying with its overly moralistic and paternalistic religious roots to the point of overlooking the significance of spirituality to holistic helping. Examining social work education was part of this professionalization process. In 1923, the Commission on Social Work Education, chaired by Porter Lee, determined that the core of the social work curriculum should be practice methods (Austin, 1986).

In 1944, the Curriculum Policy Statement from the American Association of Schools of Social Work (AASSW), a precursor to the Council on Social Work Education, outlined "The Basic 8" content areas for social work education: social casework, social group work, community organization, public welfare, social administration, social research, medical information, and psychiatric information (Kendall, 2002). In January of 1952 in New York City, the Council on Social Work Education (CSWE) was established. It included representation from graduate schools and undergraduate departments of social work, seven membership organizations who folded into CSWE, and social work and social welfare employing agencies. While CSWE continues to be the association responsible for social work education in the United States, its governance has undergone changes over the years (Kendall, 2002). The current structure of CSWE includes a Board of Directors with representation based on program (BSW, MSW, Dean and Director), race and ethnicity, practice, and at-large. Commissions are designated that reflect "a variety of educational issues" (Colby, Burwell, DiNitto, Hoffman, Hollaway, Joyner, Zastrow, Baskind, Watkins, Francis, & Klinkert, 2004, p. 4) and advocacy.

A revised curriculum policy developed by CSWE in 1952 stipulated that social work programs' curriculum focus on providing students with a knowledge and understanding of social services, a knowledge and understanding of human behavior, and a knowledge

and understanding of social work practice (Kendall, 2002). According to Kendall (2002), who was directly involved with CSWE during this formative time, this early curriculum policy statement specifically included spirituality content. She said, "Human growth and behavior required attention to normal physical, mental, and emotional growth considered with due regard to social, cultural, and spiritual influences upon the development of the individual" (p. 155).

In 1959, Boehm conducted a comprehensive study of the current social work curriculum and suggested that it include theoretical content from the social sciences addressing the individual, group, and social environment; applied foundation content addressing human growth and development and social welfare policy; and practice methods including casework, group work, community organization, administration, and research (Austin, 1986). Austin (1986) makes no specific mention of spirituality or religion in the original content areas of human behavior and the social environment, social work policy and services, or practice in his history of social work education.

It appears that CSWE Curriculum Policy Statements from the 1970s and 1980s made no specific mention of content related to spirituality and religion. A revised policy statement disseminated in 1992 included this content under sections about diversity, populations-at-risk, and social work practice (Sheridan & Amato-Von Hemert, 1999). The current EPAS guidelines require that social work educational programs include spiritual and religious issues in their frameworks for understanding diversity and human behavior (CSWE, 2001).

Beginning in the mid-1980s with the qualitative works of Canda (1986, 1988), the case for the inclusion of spirituality and religion content in social work has since been built around several survey studies (Dudley & Helfgott, 1990; Sheridan, Bullis, Adcock, Berlin, & Miller, 1992; Sheridan, Wilmer, & Atcheson, 1994; Sheridan & Amato-von Hemert, 1999; Derezotes & Evans, 1995; Staral, 1999) designed to explore the attitudes of practitioners, faculty, and students towards the inclusion of spirituality content in social work education and practice. While most practitioners and students agreed that spiritual issues are important for clients and would address spiritual issues with clients when appropriate, they felt inadequately prepared through their educational programs to address spiritual issues in practice

Theoretical Context:
Spirituality and Religion in Social Work Education

Currently, spirituality and religion content in social work education is found most frequently in the context of diversity and human development. Is it sufficient to address spirituality and religion only from a diversity or human development perspective? This paper will examine diversity theories and spiritual development theories for their helpfulness in understanding spirituality and religion. It will also examine transpersonal theory, which is not as widely used in social work, as an all-encompassing spirituality theory that is thought to be very much in line with social work values. Transpersonal theory posits that spirituality is a universal characteristic of human existence and would transform the bio-psycho-social framework into a bio-psycho-social-spiritual framework.

Diversity and Multicultural Theories

According to Fellin (2000, p. 261), multiculturalism in social work is "an organizing concept about human diversity." There are several distinct approaches for viewing human diversity within multiculturalism; these include cultural pluralism, people of color, populations-at-risk and oppression, and transculturality.

Cultural pluralism refers to the inclusiveness of all groups defined as cultures, the recognition of many distinct cultural groups in the United States (Fellin, 2000). It "has superseded previous notions of assimilation and the 'melting pot'" (Lum, 2000, p. 89). This inclusive concept of multiculturalism goes beyond cultural and ethnic similarities and differences to include groups that are distinguished by other characteristics such as "social class, gender, sexual orientation, physical disability, or age" (Fellin, 2000, p. 262). Although spiritual and religious diversity can often be tied directly to traditional definitions of ethnicity and culture (e.g., Jewish heritage as both culture and religion), cultural pluralism leaves room for spiritual and religious diversity that is not necessarily defined by culture.

A second form of multiculturalism developed by Lum (2000) posits a practice approach for social work based entirely on the concept of "people of color." Although this "people of color" approach to multiculturalism addresses religion and spirituality as it relates to

the "external and internal values for people of color" (Lum, 2000, p. 68), it does not consider religious and spiritual issues as they present among the majority population (Fellin, 2000), and thus would be limiting for use in social work education.

The third multicultural approach, which focuses on populations-at-risk, includes "marginalized groups, people of color as well as others such as gay and lesbian persons" (Fellin, 2000, p. 265). Oppression theories emphasize power and the domination of the majority culture over the minority culture; social justice would be achieved when a society challenges its underlying assumptions about the minority and reconstructs the organization of its social life (Adams, Bell, & Griffin, 1997). Fellin (2000) asserts that it is unclear in the literature whether or not the populations-at-risk paradigm includes discrimination of groups based entirely on religion regardless of their affiliation with another group clearly identified as "at-risk." For example, the experience of a white person who is discriminated against because of her religion might not fit under this model because racially, she is not in an "at-risk" category. This approach could be helpful in understanding how religious domination in a society such as ours prohibits the spiritual quest and expression of those who do not identify with the majority religion.

A fourth, more recent, approach to multiculturalism is transculturality, defined as the ability "to relate comfortably and competently in many different cultural contexts, while appreciating both differences and commonality" (Robbins, Chatterjee, & Canda, 1998, p. 140). Transculturality intrinsically addresses spirituality because it is said to be based on the spiritual traditions of Native Americans, Hindus, and Buddhists and it captures the overarching emphasis of *all* spiritual traditions. It is an awareness of a common point of human connection within oneself and in relationship to others (Robbins, Chatterjee, & Canda, 1998). Transculturality as an approach focuses on practice competence, self-awareness, and the universality of connection with others.

Multiculturalism, with its varied perspectives, provides a useful place within social work education for content related to spiritual and religious issues. A multicultural perspective is already the driving force behind developing competence in practitioners. It helps social workers understand the ever-changing, diverse face of the United States. It recognizes the issue of diversity from the micro, mezzo,

and macro perspectives. Multiculturalism is most appropriately supported through qualitative research approaches (Robbins, Chatterjee, & Canda, 1998), which continually gain popularity and credibility in the social work profession.

Despite the contributions of multiculturalism, I am concerned that many multicultural approaches do not explicitly address spiritual and religious differences unless they apply to specific cultural or ethnic groups. Multiculturalism, when applied to religious and spiritual issues, could potentially do more harm than good by perpetuating stereotypes of people who identify with particular religious or spiritual traditions. Multiculturalism may get in the way of "starting where the client is" if practitioners approach clients with knowledge about specific characteristics of diverse groups and the expectations that clients take on those characteristics.

Spiritual Development Theories

Addressing spirituality from a human development perspective is "a foundational attempt to honor holistic personal development" from a bio-psycho-social-spiritual framework (Straughan, 2002, p. 146). It also implies that a person's "spiritual capacity is not stagnant, but indeed develops, changes, and potentially increases" (Straughan, 2002, p. 146). Faith development, a similar concept, encompasses the quest for meaning making and is the process of "discovering and creating connections among experiences and events" (Love, 2001, p. 8). The notion of faith is transcendent and imminent; it lies "beyond the range of ordinary perception and experience and is thus ultimately unknowable" (Love, 2001, p.8).

James Fowler built on the ideas of Piaget and Kohlberg in developing his theory of faith development; Fowler attempted to apply his theory to people of all beliefs, whether religious or non-religious (Robbins, Chatterjee, & Canda, 1998). He based his work on an empirical study that he conducted over a nine-year period; his subjects were mostly white and primarily Christian and Jewish (Robbins, Chatterjee, & Canda, 1998). Fowler has since added to his thought on faith development and offered answers to questions post-modern thinkers raised with his theories (Fowler, 2001).

Fowler's first faith stage is *undifferentiated* faith, which begins in infancy (Fowler, 1981). We develop our first "preimages" of God

through an awareness of self as separate from, yet dependent upon, the "immensely powerful others." *Intuitive-projective* faith, beginning at age two through age six, develops as imagination plays an important role in our lives; "God images" come from family, church, and other sources such as the media. From age seven to puberty, we express *mythic-literal* faith in which we begin to construct a more orderly and dependable world and sort out "real" from "fantasy." In this stage, our understanding of God often takes on the perspectives of others. Meaning is not reflective or conceptual, only literal. During *synthetic-conventional* faith, primarily encompassing adolescence, we have the increased ability to reflect on our thinking. As adolescents, there is a version of egocentrism that results in a "self-questioning deflation." As we hunger for a God who knows, accepts, and confirms us, God takes on a more personal form. Faith is tacit; people in this stage rely on external authority and meanings are not separable from what they symbolize. Fowler posits that most people in the faith community remain in this stage. In adulthood, *individuative-reflective* faith may be experienced. Individuative-reflective faith is characterized by looking critically at the assumptive system of values shared with family and the neighborhood. Authority is relocated to the self while symbols are "demythologized." For those who are able to move into this stage, it often happens with a literal physical distancing from the "community," such as going to college or extensive traveling. While Fowler claims that very few people reach his two higher levels of faith development, which require critical reflection, comfortability with paradoxes, openness to other faiths, and a commitment to social action for justice, he strongly advocates "active efforts in . . . education in general to encourage development to the last two stages" (Robbins, Chatterjee, & Canda, 1998, p. 254).

Alternative ways of thinking about spiritual development are more fluid and invite "the participation of voices of those persons often unheard, including persons other than the young, White, heterosexual, Judeo-Christian, able-bodied, male with sufficient resources and power" (Straughan, 2002, p. 156). Hearing these "unheard voices" is necessary to the mission and goals of social work. Gilligan's 1982 model for spiritual development proposes a process that is specific to women; Borysenko's 1996 model of spiritual development presents an understanding of spirituality that connects it with a person's cognitive, physical, and psychosocial learning

and transformation. Borysenko's approach focuses on "recurring themes of the inter-connectedness between people, nature, and things" (Straughan, 2002, p. 158) rather than a step-by-step progress. Stage theories, in general, are viewed as too categorical in nature, not taking into account the often non-linear nature of life experiences. Spiritual development theories begin to move us away from an understanding of spirituality as merely a diversity issue and into an understanding that recognizes the universal, spiritual aspects of all human beings. Perhaps, however, our current understanding of spirituality isn't broad enough for all people to identify with because it is inextricably linked to religion.

One benefit of utilizing spiritual development theories in our educational content is the parallel process that can happen for students; while considering the process, students are forced to examine their own spiritual development and any personal meanings attached to it. According to Canda (1988), social workers should participate in a self-awareness process through which they develop self-understanding about their personal biases and experiences related to spirituality and religion. Another advantage to understanding spirituality through developmental theories is, while spirituality is given equal footing in a bio-psycho-social-spiritual model of understanding human behavior.

Transpersonal Theory

While primarily a psychological theory, transpersonal theory is being offered by some social workers as a valuable lens for use in social work (Canda, 1991; Cowley, 1993; Cowley & Derezotes, 1994; Smith, 1995). Transpersonal theory posits a broad, non-religious understanding of spirituality, establishing it as the core for reaching optimal human functioning. Transpersonal theory is categorized as a Fourth Force theory of psychology. The *Four Forces* is a schema used to categorize the major Western therapeutic approaches in psychology towards a holistic understanding of human development (Gardner, 2003, p. 14). First Force theories, namely psychoanalytic theory, grew from "an Age of Repression as experienced by the guilt-ridden, inner-directed man" (Cowley, 1996, p. 664). Second Force theories, namely behavioral theories, rejected the reductionistic and deterministic understandings of psychoanalysis and embraced the idea that human

behavior can be objectified and operationalized (Cowley, 1996). Third Force theories, such as humanistic theory, experiential theory, and existential theory, seek "more heart and personal connection between the healer and the client" (Cowley, 1996, p. 665).

Fourth Force theory is reflective of the "new age" in which the context of culture is existentially and spiritually void, demoralized, and dispirited. The social work profession is attempting to "resacralize a professional context that has become increasingly secular" (Cowley, 1996, p. 668). Transpersonal literature has been accumulating since the mid-1970s and includes such writers as Wilber, Fowler, Frankl, Walsh, Grof, Crowley, and Canda (Cowley, 1996).

As a complementary approach, transpersonal theory seeks "to help clients expand their consciousness, deal with issues of meaning and purpose in life, and legitimize transpersonal (transrational) experiences (Cowley, 1996, p. 672). Transpersonal theory is "a perspective on human experience, development, and therapy that focuses on our highest potentials for creativity, love, and spiritual awareness" (Canda & Furman, 1999, p. 161). It assumes that all human beings are spiritual beings.

Transpersonal theory understands human development in three major phases. The first phase is the pre-egoic phase, which encompasses infancy through early childhood. In this phase, the child has not yet developed a clear sense of ego (Canda & Furman, 1999). In the egoic phase, beginning in older childhood, a person develops "a clear sense of ego autonomy and capacity for rational thought along with mature social relationships" (p. 164). The third phase, the transegoic, is reached only by adults, *if at all*. In this phase, people realize their fundamental connectedness to others; the self has the capacity for enhanced intuition, empathy, and holistic thinking (Canda & Furman, 1999). Transpersonal theory has a place for all spiritual traditions, as the "ultimate level of development" may be described as union with whatever a particular spiritual tradition recognizes as the ultimate, e.g., God, true self, or cosmic consciousness (p. 164).

How does transpersonal theory help social work? Understanding a transpersonal perspective can broaden the understanding of what spirituality is. A transpersonal perspective, at the same time, accepts religion as a viable way to express spirituality but does not limit spiritual expression solely to religion. This allows non-religious

people to identify with their quest for meaning in life and their connection to each other.

Transpersonalists view human nature optimistically, believing that people want to experience personal growth. This is a major belief of the social work profession as well. This growth is inward, characterized by a sense of balance and wholeness, and outward, consisting of "mutual fulfillment, coresponsibility, and communion between self and others" (Canda & Furman, 1999, p. 163).

In summary, transpersonal theory values the "ideal of optimal health or well-being" of persons (Canda & Furman, 1999, p. 164) as does the social work profession. A transpersonalist would assist clients in seeking self-transcendence, creating personal balance and self-integration, and "establishing harmony between oneself and others" (p. 164). Although transpersonal theory has not been significantly incorporated into current social work education and practice, this theory has been recently introduced into social work literature in relation to the profession's quest for spiritually sensitive practice (Robbins, Chatterjee, & Canda, 1998).

Transpersonal theory provides a place for spiritual and religious issues in social work, focusing on the common human experience of the search for meaning and purpose in life and the connection to others and the cosmos. Transpersonal theory values the desire for full human potential, yet asserts that few people find themselves in the higher, more complex phases of transcendence. Social workers who use transpersonal theory should be engaged in a developmental process themselves, so they are not working with clients from some lower level and phase and thus placing their own spiritual and religious values onto clients or taking an oversimplified view of differing spiritual and religious traditions. Transpersonal theory is applicable at the micro and macro levels, and specifically adds a planetary/cosmic emphasis to the bio-psycho-social-spiritual perspective so valued by the social work profession (Robbins, Chatterjee, & Canda, 1998). Transpersonal theory is very much in line with social work values and ethics in its view of humanity's potential and desire for growth and its focus on the holistic person.

Empirical Context:
Spirituality and Religion in Social Work Education

Several survey studies have been conducted, mainly exploring attitudes of practitioners, students, and faculty towards the importance of addressing spirituality and religion in social work education and practice (Dudley & Helfgott, 1990; Sheridan, Bullis, Adcock, Berlin, & Miller, 1992; Sheridan, Wilmer, & Atcheson, 1994; Sheridan & Amato-von Hemert, 1999; Derezotes & Evans, 1995; Staral, 1999). An early study by Dudley & Helfgott (1990) explored the views of fifty-three full-time faculty from four institutions in two eastern states. The questionnaire included one question that asked respondents whether they believed spirituality is "a fundamental aspect of being human." This question begins to assess a transpersonal understanding of spirituality; forty of the fifty-three respondents agreed with the statement. However, respondents also affirmed that spirituality is primarily an issue related to diversity. Most respondents indicated that they would support spirituality and religion content as an elective course and many disagreed that a spiritual component in practice is more empowering to clients. Respondents were most concerned with the conflict between the separation of church and state over and above concerns with potential conflict between social work's mission and values. This study indicates openness to transpersonal understandings of spirituality, but also indicates that, for many, the link between religion and spirituality is still very strong.

Sheridan, Wilmer, & Atcheson (1994) surveyed 280 full-time social work educators from twenty-five schools of social work about including spirituality and religion content. Four out of five (82.5%) supported the inclusion of a specialized course, primarily as an elective. Also, faculty with a positive attitude toward religion and spirituality were more likely to support the inclusion of such content. The concepts of spirituality and religion were clearly defined to distinguish them from one another. This study asked respondents to choose a rationale for including spirituality and religion content—as relevant to multicultural diversity or as part of an important dimension of human existence. The multicultural diversity rationale received stronger support. Areas of conflict included separation of church and state, clients' belief, how content is taught, and personal conflict for some faculty members.

Sheridan & Amato-Von Hemert (1999) surveyed 208 MSW students from two schools of social work on their views of spirituality and religion content in social work education and practice. Again, the terms spirituality and religion were clearly defined. Along with asking students questions similar to those asked of faculty in the 1994 study, there was an intervention component that asked how spirituality or religion is used with clients. While most respondents said that spiritually-oriented interventions are appropriate, most indicated they had received little to no training in their social work studies about this practice area. Again, the multicultural rationale for the importance of including spiritual and religious content received more support than the human existence rationale.

There are limitations to these survey studies in that they are cross-sectional and correlational. No causal relationships can be established, only descriptive information for use in further research. Surveys have the potential for bias, as respondents self-report. Also, the information gained through a structured survey does not allow the researcher to probe for deeper responses to the questions or to clarify responses.

One published study focused specifically on curriculum development regarding spirituality and religion. Russel (1998) surveyed 118 MSW program directors from accredited programs in 1995. At that time, 17 programs were offering graduate courses on spirituality and/or religion. Most of these courses were developed recently; another 15 schools planned to develop similar content courses. A content analysis of course syllabi revealed a wide range of topics covered, reading materials used, assignments given, and teaching modalities.

Russel, Ferraro, & Russo (2005) conducted a follow-up survey to explore the quantity and elements of courses on spirituality or religion. In the summer of 2004, 171 MSW programs that were accredited or in candidacy status were questioned about the number and nature of their courses in spirituality and/or religion, and to provide syllabi of these courses. Fifty-seven programs offered a course with a spiritual or religious focus and seven more planned to develop such a course. Content analysis on thirty-three syllabi revealed a wide range of topics covered, reading material utilized, and assignments given. The research revealed that Yeshiva University in New York had the oldest course, developed 48 years ago, and St. Louis University has offered such a course for over 30 years. Interestingly enough, both of these schools

are sectarian, Jewish and Catholic, respectively. Curriculum develop-ment in the area of spirituality and religion is still in its infancy, and the current research examines only graduates programs with discrete courses, omitting undergraduate programs and the infusion of religion and spirituality content throughout other courses.

There has also been research conducted which focuses specifically on transpersonal theory and social work. In an early study by Canda (1988) he interviewed 18 social work scholars who explored potential issues of conflict between spirituality and social work. Atheism, Chris-tianity, existentialism, Judaism, Shamanism, theistic humanism, and Zen were represented in the purposive sample. One prominent theme emphasized spirituality as an integrating aspect of human experience. Canda also concluded that social work as a profession "becomes a means for expressing fundamental moral imperatives that arise from one's spiritual experience and convictions" (p. 11).

An unpublished study by Gardner (2005) investigated social work students' openness to transpersonal learning. This study assessed transpersonal orientation to learning, respondent spirituality, religiosity, and multiculturalism. It used a purposive sample of BSW and MSW students enrolled at two mid-western universities. Students volunteered to complete a survey. Two hundred four students responded. Findings indicated that higher levels of multiculturalism meant higher levels of transpersonal orientation to learning. This supports the notion that, while appreciating diversity, transpersonal theory focuses on the universality of the spiritual experience. Findings also indicated some confusion for many students about the differences in the concepts of religion and spirituality. To date, this is the only study known that uses transpersonal assessment tools in social work education.

Social work research is often informed by knowledge from related professions. This is true regarding transpersonal theory. Within the field of psychology, MacDonald & Friedman (2002) systematically reviewed the empirical literature on several assessment tools related to transpersonal theory. There are more than 100 extant instruments of spirituality and transpersonal constructs. One limitation is the plethora of newly developed tools without any consistency in shared measures across studies. Another is the poor to marginal effect size in all of the studies reporting significant relationships between some element of spirituality and functioning. There is no "empirically-based

organizational model through which the findings could be structured and interpreted" (p. 114). MacDonald offers a five-dimension model based on a factor analysis of all spirituality instruments; it includes cognitive orientation towards spirituality, experiential/phenomenological dimension, existential well-being, paranormal beliefs, and religiousness. In short, this study concludes that the association between spirituality and functioning is complex, multidimensional, and, in part, a product of how constructs are operationalized.

In summary, interest in the inclusion of spirituality and religion in social work education content is relatively new. In recent years, spirituality and religion has become a relevant area for scholarly research. As demonstrated in the literature, scholars have addressed the role of spiritual assessment in practice (e.g., Cascio, 1998; Gilbert, 2000; Hodge, 2003, 2005; Mattison, Jayaratne, & Croxton, 2000; Sheridan, 2004), explored the role of faith-based organizations and the provision of social services (e.g., Cnaan, 1999), emphasized the significance of spirituality and religion as a way of coping (e.g., Curlin, Roach, Gorawara-Bhat, Lantos, & Chin, 2005; Galek, Flannelly, Vane, & Galek, 2005), and the differential use of spirituality and religion among specific populations and with particular problem areas (i.e., Andrews & Marotta, 2005; Frame, Uphold, Shehan, & Reid, 2005; Galek, Flannelly, & Galek, 2005; Jackson, Paul, & Cook, 2005; Koenig, 2006; Neff & MacMaster, 2005). Finally, a plethora of research points to the positive outcomes of spiritually-based interventions in health and mental health (i.e., Koenig, 2001). While these focus areas apply to the practice context, there are implications for social work education.

There is a need for much more research in this area to further refine our understanding of how spirituality and religion content related to social work practice should best be included in social work curriculum, and how practitioners' knowledge and skill related to spirituality improves client outcomes, both on micro and macro levels, thus advancing the goals of the profession.

Implications for Social Work Education

The social work educational system has made tremendous progress over the years in recognizing the importance of spirituality and religion in professional practice. As a result, both NASW and CSWE

require curriculum that addresses these content areas. Educational policy and accreditation standards have been revised to include spirituality and religion content in the specific contexts of diversity and human development (CSWE, 2001). Some preliminary research explores how spiritual and religious content is included in programs which are currently accredited by CSWE (Russel, 1998; 2005). While this is a good start, some scholars continue to challenge the profession to move to an understanding of spirituality that moves from a focus on appreciating differences to a focus on the common search for meaning and purpose in life, a focus that addresses the "dis-ease" of our times. While several significant attempts have been made to conceptualize spirituality in such a way that it is broad enough to bring diverse perspectives together in dialogue, this has led to a variety of conceptualizations that are not used consistently across the literature. What is a "common" understanding of spirituality that is meaningful enough for empirical analysis? Also, we have little evidence to show how teaching spirituality and religion content in accredited programs is enhancing practice; social work is struggling in general with measuring educational outcomes across the board.

One aspect of social work that has always distinguished its professionals from other human service providers is the multi-level practice focus. As the social work profession continues to develop its understanding and use of spirituality and religion, it should maintain this focus. Social work education should promote theoretical models that encourage students to recognize the common quest for finding meaning and purpose while embracing differences, participate in a self-awareness process, and elevate the role of spirituality in human growth and well-being. The way the profession defines spirituality should be applicable in one-on-one work with clients while asserting a global impact that will only happen as humans, individually and collectively, find meaning and purpose in life. Would violence decrease? Would fewer people feel depressed? Would awareness and concern for neighbor and the environment increase? Would people's ideas of self and place in the larger context change their actions and behaviors? Would the world become a more just place? These questions, which are ultimately of a spiritual nature, are the goals of social work. Researchers must continue to identify appropriate approaches to addressing spirituality and religion in social work education and practice ❖

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Knowledge of HIV Transmission and Perception of the Role of the African Methodist Episcopal (AME) Church in the Fight against HIV/AIDS in South Africa

Barbara J. Haile and John W. Chambers

The objectives of this research were to determine how much knowledge survey participants had about HIV/AIDS transmission and how knowledge was related to their perceptions of the responsibilities of the AME Church toward those infected with HIV/AIDS. The researchers also examined how HIV knowledge was related to the willingness of survey participants to volunteer in Church-sponsored HIV related programs. A convenience sample of 742 respondents residing in the 19th Episcopal District, Republic of South Africa, participated in the study. Volunteers completed the Carey and Schroder (2002) Brief HIV Knowledge Questionnaire and other items pertaining to the study variables. Results showed that while knowledge of HIV was generally good in a few areas, there were still deficits that need to be addressed. Participants with more knowledge of HIV transmission thought that the Church should provide education, counseling, living facilities and nursing care services to victims, regardless of their religious affiliation. Those with more knowledge of HIV were also willing to volunteer to provide education and counseling services. Results are discussed in terms of the implications for the Church in lending its voice and resources to fight the spiraling epidemic, and addressing the social and economic challenges posed by HIV/AIDS.

S TATISTICS FOR 2002 ESTIMATED THAT THERE WERE 5.3 MILLION people in South Africa living with HIV/AIDS, comprising 21.5% of the population (Shisana & Simbayi, 2002). In that year, AIDS

accounted for two-fifths (40%) of all deaths in South Africa (Dor-rington, Bradshaw, & Budlender, 2002). It is by far the largest single cause of premature mortality in both males and females (Garbus, 2003). Many children have been orphaned by AIDS, losing one or both parents to the disease (Hunter, & Williamson, 2000). In fact, one source estimates that nearly 25% of all South African children under the age of 15 had lost at least one parent to AIDS (Steinberg, Johnson, Schierhout, & Ndegwa, 2002).

As a result, HIV/AIDS has had a devastating impact on South Africa with severe social, economic and growth implications. The HIV/AIDS epidemic is projected to reduce the country's economic growth rate by 0.3 – 0.4 % annually; and by the year 2010, will result in a gross domestic product 17% *lower* than it would have been without the effect of the AIDS epidemic (UNAIDS, 2000). In view of these statistics, then, reducing risky behaviors through increased knowledge of HIV transmission and providing services to those infected and affected by HIV/AIDS are critical components of prevention and treatment. In order for prevention and treatment initiatives to be effective, however, important and influential social institutions like the Church must become involved. The Christian Church is influential in South Africa, and as such, must take an active role in the fight against HIV/AIDS. It cannot remain on the sidelines.

The 19th Episcopal District of the African Methodist Episcopal (AME) Church, under the leadership of Bishop Adam J. Richardson, wanted to develop services and programs to address the growing HIV/AIDS epidemic. A survey was designed to gather information that would inform and facilitate this planning process. The 53-item survey sought information about a number of areas, including Church members' knowledge of HIV transmission, their perceptions of the responsibilities of the AME Church for those infected and affected by HIV/AIDS, and their willingness to volunteer in church-sponsored programs for those affected by the epidemic. The current research reports the findings from this survey.

Review of Literature

The review of literature highlights the level of knowledge that South Africans have about the transmission of HIV/AIDS. South Af-

rica was one of 15 countries that participated in a 2003 study assessing knowledge of and attitudes toward HIV/AIDS (Gregory, 2003). Of the 1,000 South Africans surveyed, 94% believed that HIV/AIDS could be transmitted through "sex with an infected person and no condom." Eighty-nine percent believed it could be passed "through contaminated hypodermic needles." Eighty-one percent said it could be passed from "infected mother to her baby." Eight percent said the disease could be transmitted by "using a toilet seat used by an infected person." Six percent thought it could be transmitted by "touching an infected person." And 7% reported it could be spread through "sharing personal items (i.e., cap, towel, and clothing) used by an infected person." What is interesting to note is that while 63% of the respondents indicated "HIV/AIDS can be life threatening," 34% stated, "they did not think so" (Gregory, 2003).

A second survey that assessed HIV/AIDS knowledge was conducted with a sample of 9,963 South Africans in 2002 (Shisana & Simbayi, 2002). Findings showed that 81% of youths (15-24 years) and 79% of adults (25 years and older) agreed, "HIV causes AIDS." Eighty nine percent of youths and 93% of adults agreed "HIV/AIDS cannot be cured by sex with a virgin." Forty nine and one half percent of youths and 56% of adults agreed that "a baby could become HIV-positive through breastfeeding." While the results indicated a good overall knowledge of key aspects of HIV/AIDS transmission, the findings suggested that respondents still needed more detailed information on some HIV/AIDS topics (i.e., HIV transmission and kissing).

The literature shows some support for a linkage between knowledge of HIV/AIDS transmission and education (South Africa Department of Health, 1998). The 1998 South Africa Demographic and Health Survey on women indicated that as education level increased, so did their knowledge of AIDS. The sample comprised more than 12,000 women between the ages of 15 and 49 years. The survey contained statements of ways to avoid AIDS to which respondents replied "true," "not true," or "don't know." A sample of the items included: "avoid AIDS by staying faithful to partner," "using condoms," and "injection with clean needles" (South Africa Department of Health, 1998). Since the study focused on female respondents, comparable data were not available for men.

Despite the high rates of the epidemic in South Africa, evidence

is emerging that shows the positive impact that HIV/AIDS knowledge is having on changing sexual behaviors. Shisana & Simbayi (2002) found in their research that, when compared to 1998 data from the Demographic and Health Survey, there was an increase in the number of women with no current sexual partner, an increase in the number of sexually abstinent males and females between the ages of 15 and 24, and an overall increase in condom use. Ninety-four percent of adults between the ages of 25 and 49 reported being faithful to one partner in the past year.

While knowledge and awareness of HIV transmission have increased tremendously, it has taken years to reach the current levels. Research suggests, however, that there are still aspects of HIV/AIDS where individuals have limited knowledge (Ntuli, 2001; Shisana & Simbayi, 2002). Hence, the need for education for males and females is ongoing.

As stated previously, the objectives of this survey were to determine how much knowledge participants had about HIV/AIDS transmission and how knowledge level was related to their perceptions of the roles and responsibilities of the AME Church toward those infected with HIV/AIDS. We also wanted to examine how knowledge was related to the willingness of participants to volunteer in Church-sponsored programs for these groups.

Methodology

Participants

The survey was completed in 2001 by 742 individuals participating in the Annual Conference of the AME Church in the 19th Episcopal District of South Africa. The 19th Episcopal District is made up of the Organin, Northwest, Northern Transvaal, Eastern Transvaal, and KwaZulu/Natal provinces. The sample comprised 74% females and 26% males. The mean age was 46 years, with a range from 15 to 92 years. Ninety-five percent (95%) of the participants were between 20 and 79 years of age. Forty-five percent (45%) were unemployed, 28% employed, and 27% retired. Forty-eight percent (48%) were married, 29% single, 15% widowed, and the remaining 8% were either divorced or separated. Fifteen percent (15%) reported having no formal education, 21% completed primary school, 29%,

high school, 10%, seminary or technical school, and 25% completed college. Seventy percent (70%) spoke three or more languages. Twenty-five percent (25%) identified English as the language they were most comfortable speaking, while 20%, Tswana, and 12%, South Sotho. Other languages included Zulu, Xhosa, Sepedi and Venda.

Instruments

A 53-item survey was administered to examine a number of issues related to HIV/AIDS and the AME Church in South Africa. The survey was designed for use as a planning tool for the 19th District. Only a portion of the survey items is included in this report. These include the HIV-KQ-18 Inventory (Carey and Schroeder, 2002), HIV/AIDS demographic questions, and three additional questions. The HIV-KQ-18 Inventory was normed on data from primarily low-income, low literacy, heterosexual samples that included a substantial number of African Americans. The Bishop, the Supervisor of the Women's Missionary Society of the 19th District, and the second author of the current study developed the latter two sets of questions. The HIV-KQ-18 is comprised of 18 items to assess knowledge needed for HIV prevention. Due to a printing error, one item was deleted from the instrument, resulting in a 17-item questionnaire. Other questions examined were: 1) Do you think that the AME Church has a responsibility to provide services to the victims of HIV/AIDS regardless of the religious affiliation of those affected? 2) Should the AME Church provide any services regarding HIV/AIDS, such as Education, Counseling, Living Facilities, Nursing Care, and Medicine? Respondents could choose as many responses as applicable. 3) Are you willing to provide on a voluntary basis any of the following services to persons affected by HIV/AIDS as part of a program sponsored by the AME Church? Again, respondents could choose as many as applicable.

<div align="center">

Results

</div>

The knowledge of HIV transmission scale, the HIV-KQ-18 (17 items), was scored by giving one point for an incorrect and two points for a correct response. The total of 742 participants only included those who completed at least 14 of the 17 questions of the HIV-KQ-18 scale. The actual scores ranged from 17 to 34, with a mean of 27.68 and a

standard deviation of 3.80. The internal reliability as measured by the Cronbach's alpha was in the good range, with a score of .78.

Table 1 contains the items from the knowledge of HIV transmission scale, and the percentage of participants that gave *correct and incorrect* responses to each item. There were four questions for which over 70% of the participants gave the *correct* response (the factually correct response); 10 questions where 50% to 69% responded correctly; and three questions where fewer than 50% provided the correct information. A review of the *incorrect* responses indicates that there are still knowledge deficits that need to be addressed. For example, 64% of participants responded that "a natural skin condom works better against HIV than does a latex condom;" nearly 51% replied that "having a test for HIV one week after having sex will tell a person if she or he has HIV;" 42% thought that "there is a vaccine that can stop adults from getting HIV;" and nearly 39% responded that "a person will *not* get HIV if she or he is taking antibiotics." The response patterns in this data indicate that there is still a great need for education.

Table 1: Correct and Incorrect Responses to the Knowledge of HIV Transmission (HIV-KQ-18) Questionnaire

|	Percent Correct	Percent Incorrect
1. A natural skin condom works better against HIV than does a latex condom.	35.7	64.3
2. A person can get HIV from having oral sex.	46.4	53.6
3. Having a test for HIV one week after having sex will tell a person if she or he has HIV.	49.2	50.8
4. Pulling out the penis before a man climaxes/cum keeps a woman from getting HIV during sex.	51.1	48.9
5. There is a vaccine that can stop adults from getting HIV.	57.6	42.4
6. A woman can get HIV if she has anal sex with a man.	58.5	41.5
7. A person will NOT get HIV if she or he is taking antibiotics.	61.3	38.7
8. People are likely to get HIV by deep kissing, putting their tongue in their partner's mouth, if their partner has HIV.	62.3	37.7
9. People who have been infected with HIV quickly show serious signs of being infected.	62.8	37.2
10. Using Vaseline of baby oil with a condom slows the chances of getting HIV.	63.0	37.0
11. Coughing and sneezing DO NOT spread HIV.	63.3	36.7

	Percent Correct	Percent Incorrect
12. Having sex with more than one partner can increase a person's chances of being infected with HIV.	86.0	14.0
13. A woman cannot get HIV if she has sex during her period.	66.6	33.4
14. Showering, or washing one's genitals/private parts after sex keeps a person from getting HIV.	67.1	32.9
15. There is a female condom that can help decrease a woman's chance of getting HIV.	72.9	27.1
16. A person can get HIV by sitting in a hot tub or a swimming pool with a person who has HIV.	79.9	20.1
17. A person can get HIV by sharing a glass of water with someone who has HIV.	84.6	15.4

To further describe the distribution of knowledge of HIV transmission in this sample, we examined knowledge scores across education and gender. Education was divided into four groups, 1) Completed None or Primary, 2) Completed High school/secondary, 3) Completed Some post-secondary, and 4) Completed College/university. Table 2 presents a summary of the mean HIV knowledge scores by gender and education level. A 2 X 4 ANOVA was computed with educational level and gender as the independent variables, and knowledge of HIV transmission as the dependent variable. An alpha level of .05 was used as the significance level for all of the following analyses. Results indicated a significant main effect for education ($F(3, 720) = 14.054$, $p < .001$), but no main effect for gender ($F(1,720) = .029$, $p = .865$), or education by gender interaction ($F(1,720) = 1.155$, $p = .326$). The partial eta squared indicated that educational level accounted for 5.5% of the variability in knowledge scores. Figure 1 clearly shows that as education increases, knowledge of HIV transmission also increases. The Levene's test of equal variances was significant and indicated that we could not assume equal variances; thus the Dunnett C multiple comparison test was used to compare differences due to educational levels. The results showed that those with no education or primary education had significantly lower knowledge scores than the other educational groups. Moreover, respondents with a college education had significantly higher scores than those at the high school/secondary level.

**Table 2: Knowledge of HIV Transmission Scores by
Gender and Education Level**

	Female	Male	Totals
Educational Level			
None/Primary	27.99	28.08	28.00
High School/Secondary	29.32	30.11	29.54
Some Post-Secondary	30.89	30.44	30.63
College/University	31.24	30.62	31.07
Totals	29.47	30.03	

**Figure 1: Knowledge of HIV Transmission Scores
by Level of Education**
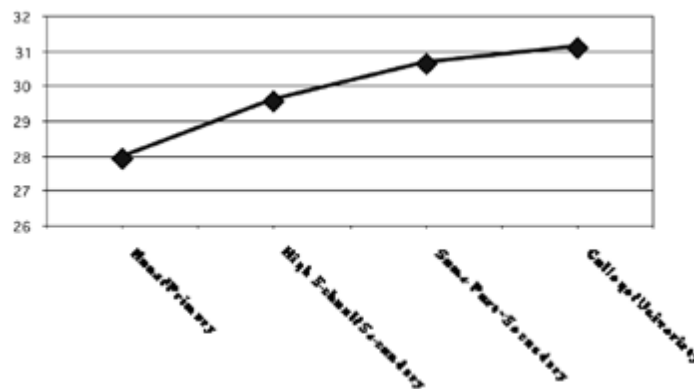
The next two research questions examined the perceptions of respondents regarding the responsibilities of the AME Church to those infected and affected by HIV/AIDS. We further wanted to know if their perceptions of the Church's responsibilities were related to knowledge of HIV transmission. Figure 2 shows the percentage of respondents who indicated that the AME Church should provide education, counseling, living facilities, nursing care, and medicine for people infected and affected by HIV/AIDS. Results of a series of chi-square tests of goodness of fit demonstrated that a significant majority thought that the Church should provide education ($\chi^2 = 176.61$, p<.001) and counseling ($\chi^2 = 199.53$, p< .001). A significant majority also thought that the Church should *not* provide living facilities ($\chi^2 = 39.81$, p< .001) and medicine ($\chi^2 = 193.39$, p< .001). A strong preference was not reported for providing nursing care $x^2 = .539$, p = .463).

**Figure 2: Percentage of Respondents Indicating the AME Church
Should Provide Education, Counseling, Living Facilities, Nursing
Care, and Medicine for People Infected and Affected by HIV/AIDS**
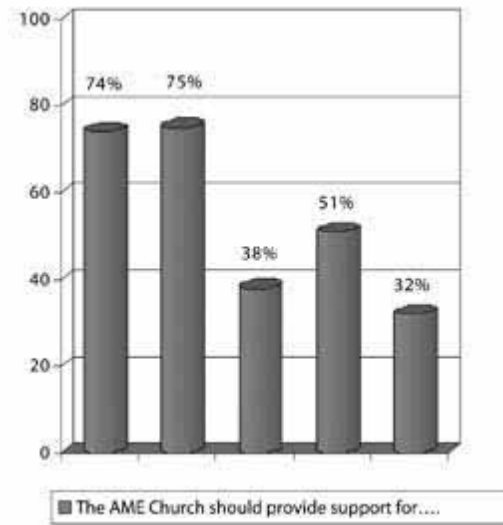
To determine if knowledge of HIV transmission was associated
with perceptions of Church responsibilities, a series of t-tests were
computed. Table 3 presents a summary of results. Participants who
endorsed providing education, counseling, living facilities, and nursing
care had significantly more knowledge of HIV transmission than those
who failed to endorse providing these services. The only exception was
medicine. In this case, knowledge of HIV transmission was not related
to those who endorsed providing medicine or those who did not.

**Table 3: Knowledge of HIV Transmission and
Services Provided by the AME Church**

	YES	NO	t-value	Sig.
Education	29.6*	26.6	6.31	p<.001
Counseling	28.7*	26.0	8.66	p<.001
Living Facilities	28.8*	27.6	4.33	p<.001
Nursing Care	28.7*	27.4	4.86	p<.001
MEDICINE	28.4	27.9	1.61	p=.108

df = 740

* Significant difference at p< .001

The final two research questions asked if respondents were willing to volunteer in providing services to those infected and affected by HIV/AIDS as part of a program sponsored by the AME Church. We also wanted to know if willingness to volunteer was associated with knowledge of HIV transmission. Figure 3 shows the percentage of respondents who would be willing to volunteer in programs sponsored by the AME Church. Results of a series of chi-square tests showed that a significant majority would volunteer to provide education (χ^2 = 38.04, p< .001) and counseling (χ^2 = 96.80, p< .001) services. A significant majority indicated, however, that they would not volunteer in providing nursing care (χ^2 = 50.72, p< .001) services, medicine (χ^2 = 272.19, p< .001) or care in a living facility (χ^2 = 141.48, p< .001).

Figure 3: Are you willing to provide, on a voluntary basis, any of the following services to person infected and affected by HIV/AIDS as part of a program sponsored by the AME Church?
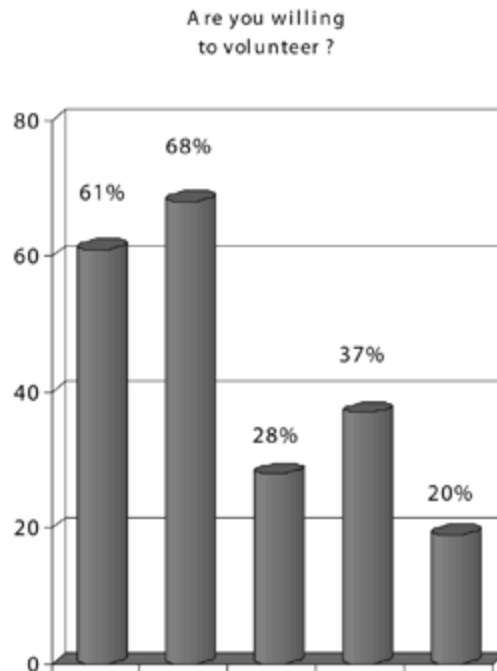
To determine if there was a difference in knowledge of HIV transmission between those willing and unwilling to volunteer in providing services, a series of t-tests was computed. Table 4 is a summary of the t-tests. Respondents who indicated a willingness to volunteer to provide education, counseling, living facilities and nursing care had significantly more knowledge of HIV transmission than those not willing to volunteer. However, there was no difference in knowledge between those willing and unwilling to volunteer to provide medicine.

Table 4: Knowledge of HIV Transmission and Willingness to Volunteer in Programs Sponsored by the AME Church

	Yes	No	t-value	Sig.
Education	28.7**	27.1	5.78	p < .001
Counseling	28.6**	26.9	5.84	p < .001
Living Facilities	28.5*	27.9	2.03	p = .043
Nursing Care	28.4*	27.8	2.16	p = .031
MEDICINE	28.0	28.1	-0.496	p = .620

df = 740
* Significant at p< .05
** Significant at p< .001

Discussion

The first research question raised in the study asked how much knowledge members of the 19th Episcopal District of the AME Church have about HIV transmission. Results of data analysis indicated that respondents were knowledgeable about some aspects of HIV transmission, but still require more information about other aspects. For example, while 86% of respondents knew that having sex with multiple partners increases one's chances of contracting HIV, only 35% knew that a latex condom is a more effective barrier to transmission than a natural skin condom. Although only 15% believed that HIV could be transmitted by sharing a glass of water with someone who had HIV, 42% still believed that there is a vaccine that can prevent adults from contracting this disease. As stated previously, the need for education about the transmission of this infection is ongoing.

Further data analysis revealed that the education level of survey

participants was significant in explaining their responses to the HIV knowledge items. As educational level increased, so did their knowledge of HIV/AIDS transmission. This finding is consistent with that of previous research conducted by the South Africa Demographic and Health Survey (1998). Gender, however, was not related to knowledge scores or education. While Shisana & Simbayi (2002) found that South African women were more knowledgeable than men about HIV transmission, results of the current study are not consistent with this finding. This disparity might result from different points in time for data collection. For example, the current data were collected in 2001, and females might have become more knowledgeable about HIV transmission in 2002 when Shisana & Simbayi analyzed their data. The conflicting results may also emanate from demographic differences in the two samples. For example, respondents in the Shisana & Simbayi study were younger—between the ages of 15 and 24 years.

The next research questions examined respondents' perceptions of the roles and responsibilities of the AME Church toward those infected and affected by the epidemic, and whether knowledge of HIV was related to those perceptions. Results indicated that a majority of the sample thought that the Church should be involved in providing education and counseling services. Approximately half thought that the AME Church should provide nursing care, and one-third thought that living facilities and medicine should be provided. One explanation for these findings might be the emphasis that South Africa has placed on education and counseling as HIV prevention strategies. Such strategies are widely discussed in the media. Radio and television, in particular, have been found to be important sources of HIV/AIDS information. It should be noted that faith-based organizations were also reported to be important sources of information (Shisana & Simbayi, 2002).

For years, the South African government was slow to take a decisive stand in addressing the issue of HIV/AIDS. In the meantime, the HIV prevalence rates greatly increased, especially between 1993 and 2000. During this period, government seemed more focused on political and social changes occurring in the country following the dismantling of apartheid (HIV/AIDS in South Africa, n.d.). As a result, the Church may be perceived as being more caring and responsive to the epidemic than government. And, too, South Africans may realize that government cannot defeat HIV/AIDS without the assistance of the Church.

Another explanation for the findings is that providing education and counseling services is less costly than providing nursing care, living facilities and medicine to those affected by HIV/AIDS. Because of high costs, some of the antiretroviral drugs to fight HIV/AIDS have not been widely accessible in South Africa (Musoke & Mirro, 2000; National Institutes of Health [NIH] 2003; National Institute of Allergy and Infectious Diseases [NIAD], 2004).

With the increase in both education level and knowledge of HIV/AIDS, accurate information about the disease and its impact on the South African people is being disseminated. Such communication could result in a heightened awareness of the need for various services and the role of the Church in providing them. Endorsing the provision of medicine was not related to HIV knowledge since antiretroviral drugs are costly and not widely available.

Similarly, respondents with more knowledge of HIV transmission were more willing to volunteer in providing education, counseling, nursing care, and living facilities as part of Church-sponsored programs. They were less willing, however, to volunteer to provide medicine. Knowledge of HIV transmission did not make a difference in response to this item. The magnitude of the difference in knowledge of HIV transmissions was much greater for education and counseling ($p < .001$) than for nursing care ($p < .043$) and living facilities ($p < .031$). Perhaps those with more knowledge of HIV perceived nursing care, living facilities, and medicine as high-cost items, and that Church resources could be used more efficiently and effectively in other areas. Stigma of those with HIV/AIDS might also account for these results. Volunteering to provide education and counseling would not involve the same level of intimate contact with HIV/AIDS victims that nursing care and living facilities would entail. Hence, respondents might opt to volunteer in programs that minimize such intimacy. Stigma of those with HIV/AIDS continues to be a significant issue in South African society, and individuals with the infection can be subject to rejection, discrimination, and social isolation (France, 2001; UN Integrated Regional Information Networks, 2004; Shisana & Simbayi, 2002). Kalichman and Simbayi (2003) found that stigma played a significant role in how HIV/AIDS patients were treated in health care settings, how families responded to their own members infected by the disease, and influenced whether or not one would

volunteer to assist such victims. This is an issue that could be fruitful for conducting further research among AME Church members.

Limitations of the Study

This study has several limitations. First, the survey included only those individuals in attendance at the 2001 Annual Conference of the AME Church in the 19th Episcopal District. The purpose of the survey was to investigate knowledge and attitudes of Church members as a basis for developing HIV/AIDS prevention and intervention programs sponsored by the Church. To this end, the survey did provide relevant information. But respondents with more diverse characteristics were not included in the study. Second, this was a convenience sample and not a random sample. We must therefore exercise caution in generalizing the results beyond this study or beyond members of the AME Church in South Africa. Third, while translators assisted participants who had limited English skills, some respondents still may not have had complete understanding of all of the items on the knowledge questionnaire or other survey questions. With low levels of literacy in any language, and the large number of native languages spoken, communication becomes a challenge in the standardization of instructions and procedures.

Implications of the Study

There are several implications of this research for the AME Church. First, respondents indicated that they are willing to support and volunteer in some Church-sponsored programs for individuals affected by HIV/AIDS. Education and Counseling were two of their expressed choices. The Church is challenged to listen to the voices of its South African membership, and become more active in providing such services. Education about HIV/AIDS can occur even in Church-based settings (Shisana & Simbayi, 2002; Port Elizabeth [PE] Technikon HIV & AIDS Information Service, 2002). For example, in Mliba, Swaziland, AME Bible study classes provide the setting where young women are instructed to say "no" to sex, and told that being forced to have sex is a violation of their human rights (PE Technikon HIV & AIDS Information Service, 2002). Forced sex also places them at risk

for contracting HIV. This message is *particularly* relevant to females, since they are in a subordinate position, culturally and economically in Southern African societies. Subordination leaves them open to sexual exploitation (Ackermann & de Klerk, 2002; PE Technikon HIV & AIDS Information Service, 2002; Tlou, 2002; UNAIDS, 2004; Pettifor, Measham, Rees, & Padian, 2004). Permitting such discussions among young women vastly increases the dissemination of information about HIV/AIDS. And coupling the discussion with gender rights in a milieu where such issues are generally kept "below radar" is a rather bold initiative by the Swaziland AME Church (PE Technikon HIV & AIDS Information Service, 2002).

While this approach has some possibilities of danger to women, contracting HIV can be even more dangerous. Therefore, education can have a positive impact on the health and well-being of South African males and females. Changes need to be made in cultural norms that support discrimination and violence against females, but there are no easy answers.

A second and related implication of the research pertains to changing the cultural mindset of South African males. Since the Church is committed to reducing the prevalence and destructive impact of this epidemic on South Africans, programs that target males are also needed. Male leaders from all facets of South African society, particularly at the grassroots (local township) level, who understand the significance of this crisis and are willing to become a part of the solution, should speak out against violence, especially sexual violence against females, and the violation of female rights. The AME Church can begin fostering such relationships with male leaders within its congregations, as well as at the township and community levels.

A third implication of the study is that the Church should continue to encourage formal education for both males and females. Apartheid did not afford opportunities for South African Blacks to obtain quality education. While apartheid has been officially dismantled, the consequences of socially structured inequalities remain. Study findings demonstrated that respondents with more education had more knowledge of HIV transmission. Individuals with more knowledge of HIV transmission were more likely to perceive the Church as having responsibilities for the HIV/AIDS-infected, and were more willing to volunteer in programs that served these groups.

Education not only would improve the overall quality of life for Church members, but might also contribute to more "progressive" attitudes toward assisting the less fortunate. Education would also provide a vehicle toward more social and economic equality for South African women.

A final implication of the research is that the Church should provide services other than education and counseling to individuals affected by HIV/AIDS. Despite their higher costs, living facilities, nursing care and antiretroviral drugs are still much needed. Relative to living facilities, the 19th Episcopal District is in the process of purchasing property for construction of hospices (Florida A&M University News, 2002). South Africa, like much of the world, still wrestles with the stigma associated with caring for those with HIV/AIDS. This is why facilities staffed by caring persons are so important.

Church leaders are aware that controlling this epidemic is inextricably linked to providing services in other areas such as basic health care, education, nutrition, parenting, and job training. The approach to intervention, then, needs to be comprehensive. Centers such as the M. Joan Cousins HIV/AIDS Mission provide much needed HIV/AIDS services such as testing, counseling, home-based care to the frail, social services, training and food parcels to the needy (A.M.E. Today, 2005). Another facility, the Balm in Gilead Center: The Healing Place for Women, was established by Dr. Jessica Kendall Ingram (Jessica Kendall Ingram, 2005). Located in an impoverished area near Cape Town, the township is populated by people living in shanties with no electricity, running water or toilets. The Center offers a number of services, including testing for high blood pressure, cholesterol, diabetes, and HIV/AIDS. It also offers parenting skills, computer classes, and job training. Spiritual needs will be addressed through the construction of a Community Worship Center (Jessica Kendall Ingram, 2005). These are programs sponsored by the AME Church. Collaboration with others in the South African Christian community is needed as well.

Along with the efforts of the AME Church, there are other churches and Christian organizations working in collaboration to impact this epidemic in South Africa. The Pan-African Christian AIDS Network (PACANet), is one such example. PACANet is a non-denominational African Christian HIV/AIDS organization that develops and disseminates training and educational materials

about HIV/AIDS; documents "best practices" in Christian HIV/AIDS programs, so that the knowledge may be shared with other groups across Africa; encourages churches to provide care and treatment for those infected and affected by HIV/AIDS; and provides tangible support, care, treatment, and even health insurance to those living with AIDS (PACANet Symposium Report, 2003).

Another non-profit Christian organization ministering to individuals affected by the epidemic is the Misibambisane Community Development Corporation (MCDC). MCDC is a part of the World Reformed Fellowship, a growing network of church denominations, associations, local congregations, agencies, and institutions. MCDC provides AIDS education, bereavement counseling for those who have lost loved ones to the disease, home-based medical care to individuals living with AIDS, and homes for HIV/AIDS orphans in South Africa (Vanden Heuvel and Vanden Heuvel, 2006).

Hence, solving the HIV/AIDS dilemma is not left solely up to government. In fact, Churches may be uniquely positioned to lend assistance in ways that government may not. Speaking before the Diakonia Council of Churches about the needs of those affected by HIV/AIDS, an Archbishop stated that:

> Churches are on the ground—our people live alongside these children [orphaned by AIDS]. We cannot walk by on the other side. Often it is we, more than anyone else, who have the means to put them in touch with tangible help.

He goes on to say:

> I am also pressing for our churches to offer their buildings to help create networks of one-stop health centers where professionals and volunteers can work together, especially in the fight against HIV/AIDS. Some are already doing this—and I hope other denominations will increasingly do the same (Ndungane, 2005, p. 6).

The Christian Church and Christian organizations may be the most influential social institutions in South Africa. As such, they must lend both their voices and resources to fight this spiraling epidemic. Christians working together should be in the forefront of

ministering to those in need, providing love, support, compassion, medical care, and tangible goods to those whom society has labeled "unlovable." Such is the demonstration of faith in action. Christians must continue to battle the social and economic challenges posed by HIV/AIDS. This is the call. ❖

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Pentecostalism and Women: Cross-national Perspectives and Implications for Social Work

Katy Tangenberg

The dramatic growth of Pentecostalism internationally has been attributed to spiritual, economic, and social influences of changing religious participation and economic globalization. Dominated by women, Pentecostalism affects numerous dimensions of gender and social identity. This paper explores women's individual and collective experiences in Pentecostal groups. Ethnographic studies from the U.S., Zimbabwe, and Latin America are presented to demonstrate cultural differences and their social work implications. Apparent paradoxes of submission and power in the lives of Pentecostal women are focused upon in order to expand social work understanding of the complexity of women's religious participation and its personal and social consequences.

T HE DYNAMIC GROWTH OF PENTECOSTALISM IN MANY AREAS OF THE world has been termed "the most dramatic development of Christianity in the century" (Martin, 2002, p. 1). From the early to late twentieth century, Pentecostalism grew from a barely recognizable presence to an expansive religious and social movement claiming at least 500 million followers (Poloma, 2003). This paper draws on cross-national ethnographic studies of Pentecostal women's groups to explore the relevance of Pentecostalism to social work. Understanding the religious and social implications of Pentecostalism can enhance practice with Pentecostal clients as well as expand professional awareness of links between cultural, religious, and spiritual diversity.

The term *Pentecostal* refers to the gathering of Jesus' followers on the Jewish holiday of Pentecost, recounted in chapter two of the Acts

of the Apostles. At this gathering, the followers were reportedly filled by the Holy Spirit and began speaking in tongues. This communication was understood by all present, though they had come from different countries and spoke different languages. The event was considered direct evidence of God's close, personal involvement with humanity, and a validation of a prophesy describing the imminent destruction of the world in order to establish the Kingdom of Christ. Belief in the accessibility of this direct spiritual experience has provided the central focus of Pentecostalism for over a century. Pentecostalism encourages close adherence to Biblical teachings, though is seldom considered fundamentalism because of its diversity and emphasis on direct spiritual experiences and gifts such as glossolalia (speaking in tongues), faith healing, deliverance, and prophesy.

Despite Biblical injunctions for their submission to patriarchal religious authority, women dominate Pentecostal communities throughout the world and Pentecostal services often focus on women's testimonies and demonstrations of spiritual gifts (Lawless, 2003). In reference to Pentecostalism, Cox (1995) stated, "There can be no doubt that, for whatever reason, women have become the principal carriers of the fastest growing religious movement in the world; eventually this is bound to have enormous cultural, political, and economic implications" (p. 137). The specific appeal of Pentecostalism to women has been attributed to its intense emotionality, physicality, emphasis on spiritual gifts, and promises of hope, healing, and transformation (Anderson, 2004; Cox, 1995; Goldsmith, 1989).

This paper describe cultural variations on religious and social paradoxes experienced by Pentecostal women in the United States, Africa, and Latin America, as well as the role of Pentecostal women's groups in shaping social and spiritual identities. An interdisciplinary body of scholarship is drawn upon to explore the gender influences of cultural and religious beliefs, and their consequences for social work practice. I will also present studies exploring charismatic and Pentecostal women's activities in the United States, Zimbabwe, and Latin America to illustrate the influences of combined spiritual and social support on women's familial and economic status. I will: 1) present a historical and cross-cultural overview of Pentecostalism; 2) provide descriptions of Pentecostal women's activities in the United States, sub-Saharan Africa, and Latin America; and, 3) describe the

implications for social work practice with Pentecostal women and their families.

Historical and Cross-cultural Aspects of Pentecostalism

The Azusa Street Revival in Los Angeles marked a pivotal event in the history of modern Pentecostalism (Cox, 1995). Led by African-American preacher William Joseph Seymour, the three-year-long revival (1906-1909) was unique in its ethnic and socio-economic diversity. The Azusa revival spawned missionary movements which brought 20th century Pentecostalism to many areas of the world, including Latin America and Africa, from the 1910s through the 1930s.

Common features of contemporary American Pentecostal services include "high amperage music, voluble praise, bodily movement including clapping and swaying, personal testimonies, sometimes prayers 'in the Spirit,' a sermon full of stories and anecdotes, announcements, lots of humorous banter, a period of intense prayers for healing, and a parting song" (Cox, 1995, p. 6). In Latin America, services typically have a strong focus on faith healing, and conversions to Pentecostalism often follow a serious illness or other health crisis (Chesnut, 1997; Hallum, 2003). Since the early 1990s, African Pentecostalism has been associated with heavily attended "deliverance" services that focus on the expulsion of demons considered responsible for negative health conditions, marital conflict, and other problems (Anderson, 2002; Corten & Marshall-Fratani, 2001; Maxwell, 2000).

Cesar (2001) described three cross-cultural aspects of Pentecostalism: "the *spoken word* (*parole*)—as the dominant mode of religious expression; *space*—the recovery of lost territory in the life of a person and society; and *time*—the overcoming of conventional limits in the human timeframe, in which daily life is mixed with millennial expectations of transformation" (p. 27). Describing personal experiences of Pentecostalism, Droogers (2001) identified three additional characteristics: *Charismata*, including gifts of the Holy Spirit such as healing, glossolalia (speaking in tongues), and prophesy, all located within the human body; *conversion*, and the *duality of the Pentecostal world-view.*

According to Pentecostal beliefs, the gifts of the Holy Spirit are available to all who have experienced conversion and baptism in the Spirit,

and the initial expression of gifts often occurs at the time of conversion. Conversion is considered a life-changing physical and spiritual experience in which a person is born again, making a total commitment to their faith. Conversion is typically followed by full immersion baptism and expectations of active participation in church communities. Such participation often involves the attendance of 2-3 worship services each week, and commitments to study and support groups (Cox, 1995).

The psychological and social consequences of Pentecostal conversion suggest profound transformation. The duality of the Pentecostal worldview asserts a parallel between the pre-conversion/post-conversion experiences of individual Pentecostals and the division of the world into categories of believers and non-believers. According to Droogers (2001), the strength and potential adaptability of these three Pentecostal characteristics (charismata, conversion, and world view) provide "a universal framework that can be amplified and developed within cultural and personal contexts to respond both to spiritual needs and social changes" (p. 57).

Pentecostalism and Women in the United States

In the United States, Pentecostalism is often linked to Protestantism, though Pentecostals have defined themselves apart from mainline Christian denominations since the early 20th century (Smith, 2000). Distinctions include the more charismatic orientation of Pentecostalism expressed through its emphasis on spiritual gifts, and Pentecostal criticisms of mainline Protestantism as cold, sterile, and overly concerned with denominational divisions (Cox, 1995; Griffith, 1997; Smith, 2000). Church organizations associated with Pentecostalism include the Assemblies of God, the Church of God in Christ, and Four-Square Gospel communities.

With regard to gender roles, Pentecostals adhere to Biblical injunctions for women to submit to the authority of their husbands, yet also assert the availability of spiritual gifts to men and women and the primacy of spiritual over human authority. Although women in Pentecostal communities usually concur with conservative Biblical interpretations of gender roles, their primary focus on experiential spirituality often supersedes concern for patriarchal leadership (Anderson, 2004; Griffith, 1997; Stacey & Gerard, 1990).

Ethnographic research exploring the religious participation of American Pentecostal women has consistently identified themes of power and submission (Brasher, 1998; Griffith, 1997; Lawless, 2003). A study exploring the roles of women in Midwestern Pentecostal churches revealed stark contrasts between women's social expectations and worship participation (Lawless, 2003). Although women were "enjoined to listen and not speak in homes, communities, and the church" (p. 62), their testimonials and spontaneous expressions of Spirit frequently dominated religious services. Such expressions of Spirit included singing, dancing, praying aloud, crying, hugging, and manifesting spiritual gifts such as speaking in tongues and entering trance states. Some churches were led by women pastors despite interpretations of scripture by some forbidding women to teach men or have authority over them (I Timothy 2:12, New Living Translation). In these situations the pastors often began their teachings with disclaimers attributing their authority to divine will, as indicated by this example:

> God made me do this. I did not seek to be here in the pulpit; in fact, all I ever wanted was just to be a good wife and mother. But I am helpless beside God's grandeur and his wishes for my life. So I stand here before you, humbled by God, ready to speak His words through my mouth. Bear with me as I deliver God's message to all of us here. (Lawless, 2003, p. 65)

Aglow International is a large charismatic women's organization with a strong Pentecostal orientation that includes emphasis on speaking in tongues and other gifts of the Holy Spirit. The organization began in 1967 as a female counterpart to the Full Gospel Business Men's Fellowship. Originally designed for purposes of prayer, fellowship, and listening to women's testimonies, the organization has expanded its mission to become more international and focused on gender reconciliation. Approximately 1,750 small "lighthouse" groups associated with Aglow International currently exist in the U.S. and 2,849 have been organized in other countries (Aglow International, 2006).

Since the 1980s, Aglow has rarely focused on gender submission, emphasizing instead women's strength, collective power, and the capacity of Christian beliefs to end women's self-destructive tendencies

and tolerance of abuse (Cook, 1988; Griffith, 1999). In interviews with Aglow members and meeting observations, Griffith (1997) noted that, "As women teach it to each other, Christian submission is a flexible doctrine intricately attached to control—of self and other—and freedom, rather than a rigid blueprint of silent and demoralizing subjugation" (p. 201). Aglow members were likely to embrace the concept of sisterhood, signifying "both recognition of their common status as women and commitment to celebrating and defending that status against those who would denigrate it" (p. 208).

Critical of feminist attempts to minimize gender differences, members often sought to re-define Christian womanhood in a context that honored gendered family roles and spiritual gifts and identities. Spiritual gifts and practices accepted by group members included glossolalia, faith healing (related to both physical ailments and forms of emotional pain and suffering such as depression and/or anxiety), prayer, and sacrificial money management. Prayer and narratives of spiritual transformation were central to group meetings, which also provided opportunities for women to share personal concerns. Practices of faith and surrender were consistently "affirmed as the key to women's fullest spiritual and emotional fulfillment" (p. 202), rewarded by God with "abundant gifts of peace and joy" (p. 74).

For her study of "Godly Women," Brasher (1998) attended all women's ministry events sponsored by two conservative Christian congregations (one specifically Pentecostal) in Southern California, and interviewed participants to learn their motivations for and experiences of group membership. Brasher did not distinguish between Pentecostals and non-Pentecostals, and characterized both congregations as fundamentalist based on participant self-identification. Motivations for participation in the ministries varied, though women often identified personal crises, desires for personal growth, and beliefs that their religious involvement enhanced their abilities to effectively respond to difficult life situations. When asked about their choices to affiliate with conservative, strongly gendered religious communities, women consistently described their decisions as rational and autonomous, and expressed anger at stereotypes that they were blindly following male traditions. The women were typically well-educated, employed, in their 20s to 40s, and married with children. In her research analysis, Brasher attributed women's

participation to their deep commitments to Christianity and desires for the consistency and support of religious communities in diverse areas of their lives, including family relationships, employment, and spiritual development. Similar to Griffith (1997), Brasher found that Christian gender hierarchies were rarely challenged but consciously accepted by women who believed that submission could provide opportunities for liberation and religious and social power.

In books based on their research, Brasher (1998) and Griffith (1997) identified significant spiritual and social consequences of membership in Pentecostal women's groups. Spiritual consequences involved the development of women's personal faith through individual prayer and Bible study as well as group participation. Although women were usually not permitted to hold pastoral or teaching positions conveying authority over men, meetings were characterized by strong female leadership conveying spiritual authority and respect for women's autonomy.

Groups often offered social support, activities centered on Christian beliefs and lifestyles, Christian education, and guidance related to difficult life issues including experiences of physical and sexual abuse. Women openly mourned past incidents of abuse and described attempts to heal and empower themselves and others through prayer and group support. Current experiences of violence and exploitation were described less often, though speakers denounced abuses of male power and members offered their homes to women wishing to leave abusive relationships.

North American researchers have expressed disparate views regarding the relationship of Christianity to family abuse. Some have found that abuse is less likely to occur in Christian families where belief systems appear to serve as a protective factor (Ellison & Anderson, 2001), while others warn of increased dangers related to patriarchal interpretations of Scripture likely to reinforce abuse dynamics (Balmer, 1994; Fraser, 2004). Despite these differences, researchers have generally concurred that Christian women's networks can provide effective support resources for women wishing to leave abusive relationships (Brasher, 1998; Ellison & Anderson, 2001; Fraser, 2004; Griffith, 1997; Nason-Clark, 2000).

Pentecostalism and Women in Sub-Saharan Africa

Scholarship exploring contemporary African Pentecostalism has emphasized its associations with colonialism and globalization. *Colonialism* refers to the effects of colonizing practices of western European governments in underdeveloped areas of the world (Mate, 2002). Colonialist values and sources of knowledge reflecting western scientific paradigms, individualism, capitalism, patriarchy, and Christianity have influenced African culture since the 17th century (Anderson, 2004; Martin, 2002; Maxwell, 2000). *Globalization* may be defined as the process of intensifying economic, political, social and cultural relations across international boundaries (Akindele, Gidado & Olaopo, 2002). Although technically in a postcolonial era, pressures of globalization have reinforced colonial influences on many areas of Africa, and contributed to a strong Pentecostal renewal movement.

Distinguishing between Pentecostal activity in Africa emanating from the Azusa revival and contemporary Pentecostalism, Anderson (2002) described the newer African churches (established since the late 1970s) as younger, more middle class, and more westernized in their styles of leadership and worship. Like other Pentecostal movements, the newer churches emphasize personal experiences of conversion, prayer, spiritual gifts, and deliverance from demonic influences (Anderson, 2004).

Deliverance is a major theme of most African Pentecostal services, integrating aspects of both indigenous spirituality and Christianity. In traditional African religions, problems are frequently attributed to forces of the occult, and local healers are engaged to placate and remove malevolent spirits. Although Christianity refutes such beliefs, it recognizes Satan and the supreme power of God to overcome evil. As Pentecostal pastors deliver individuals from the control of evil spirits, they are partially validating indigenous beliefs while emphasizing monotheistic Christian trust in divine omnipotence (Anderson, 2004; Droogers, 2001; Maxwell, 2000).

In addition to deliverance, many African Pentecostal churches have focused on the theme of prosperity, integrating indigenous acceptance of wealth as a blessing from God with Christian associations of spiritual and economic prosperity. Connections between African Pentecostal teachings on prosperity and economic pressures of glo-

balization have received significant scholarly attention and criticism for their perceived imposition of western values on vulnerable communities (Martin, 2002; Maxwell, 2000; Van Dijk, 2001).

In his study of the largest Pentecostal church in Zimbabwe, Zimbabwe Assemblies of God, Africa (ZAOGA), Maxwell (2000) described political and economic ties between church leaders in Africa and the United States. Although such affiliations are clearly relevant to the growth of Pentecostalism, Maxwell cautioned against fears of potential American political control. Since government infrastructures remain more closely tied to the Catholic, Anglican, and Methodist churches, Pentecostals possess relatively little political influence. Instead, Maxell (2000) defined ZAOGA theology as a "hybrid of evangelical morality, liberation theology, and cultural nationalism" (p. 262) offering a distinctly African vehicle for the spiritual navigation of shifting cultural and economic expectations.

Cox (1995) and Anderson (2002) similarly described modern Pentecostalism as a religious means of reconciling desires for economic success and a return to a deep cultural foundation of spirituality that in many ways rejects colonial domination. Consistent with this approach to understanding Pentecostalism, Droogers (2001) stated, "Pentecostalism facilitates the translation from the global to the local and vice-versa" (p. 57). For women, this translation between the global and local includes the integration of local, cultural, and global constructions of female identity and social responsibilities. Paradoxes of submission and control reflected in the experiences of American Pentecostal women are similarly expressed in Africa, though they are navigated in culturally specific ways cognizant of economic challenges and indigenous beliefs. Zimbabwean Pentecostal women's organizations such as Gracious Woman and Precious Stones attend to the spiritual and social consequences of both religious conversion and globalization.

Mate's (2002) ethnographic study of Gracious Woman and Precious Stones revealed concurrent attention to women's faith development, adjustments to economic changes, and gendered family roles. Both Gracious Woman and Precious Stones were started by the wives of influential Pentecostal pastors to provide specific opportunities for women to engage in worship and spiritual community, participate in socio-economic development, and recognize ways their gender

roles were informed by Scripture. According to Mate (2002), the organizations shared similar structures, activities, and teachings. Small groups met for an hour daily, usually in the early afternoon, and included both prayer and lessons on a variety of subjects concerned with family relations and personal well being. Marriage was strongly valued, and women were encouraged to submit to their husbands and pray for assistance with marital problems. Situations such as extra-marital relationships and infertility were associated with evil spirits and the need for deliverance.

Since many group members were transitioning from agrarian to middle-class lifestyles, women's organizations also provided guidance to enhance domestic skills consistent with expectations of larger homes, entertaining, and improved personal appearance. Women were taught housekeeping, cooking, and shopping skills in the context of their roles as Christian wives and mothers. For men, Christian responsibilities included economic provision for their families, monogamy, and obedience to Scripture. Although sensitive to the role of Pentecostalism in shaping family morality and providing a religious ideology for navigating cultural shifts, Mate (2002) expressed serious concerns about the patriarchal implications of this ideology and its tendency to subjugate women, reinforcing their economic and social vulnerability. Rather than suggesting that globalization could provide greater potential for the economic emancipation of both women and men, the Pentecostal groups reinforced cultural traditions of male supremacy.

Pentecostalism and Women in Latin America

The stunning growth of Pentecostalism in Central and Latin America has been addressed by scholars in numerous disciplines including religion, anthropology, sociology, and political science (Cox, 1995; Hallum, 2003; Martin, 2002; Oro & Seman, 2000). Expansion has been especially remarkable among the populations of Argentina, Chile, Brazil, Guatemala, and El Salvador, over 20% of whom identify as Pentecostal (Hallum, 2003; Oro & Seman, 2000). The surge in Latin American Pentecostalism has been attributed to social, political, and economic factors associated with globalization, as well as dissatisfaction with the Catholic Church.

Three distinct Pentecostal movements have been identified in Latin America (Oro & Seman, 2000). The first movement followed the Azusa revival and emphasized Pentecostal experiences of direct spiritual contact, glossolalia, and baptism by the Holy Spirit. This movement remains the largest and strongest in Latin America, and is associated with the Assemblies of God and other long-standing Pentecostal communities. The second and third movements have been termed neo-Pentecostalism. The second wave emerged in the 1950s and 1960s, and was characterized by media proselytization and greater willingness to integrate Christianity with local customs and belief systems. The third wave began in the 1980s with the introduction of formal theological teachings on material prosperity and "spiritual war," referring to Pentecostal hostilities toward other religions considered linked to satanic forces. The third wave has been most focused on media evangelism and appeals to members of higher socio-economic classes.

Pentecostal communities in Latin America associated with the first movement have historically attracted women belonging to lower socio-economic groups. Women have been drawn to Pentecostalism because of its practical attention to women's lives and family relationships, recognition of family planning as a Christian responsibility, opportunities for social and economic support, and focus on faith healing (Anderson, 2004; Chesnut, 1997; Cox, 1995).

Ethnographic studies have consistently demonstrated the importance of faith healing to Latin American Pentecostalism, where conversions are often preceded by experiences of physical healing. Faith healing holds specific importance for women because of their roles as primary caregivers, and historical traditions of female spiritual healing authority in Catholicism and indigenous religions. Chesnut's (1997) research exploring Pentecostalism in Brazil described women's frequent reliance on faith healing as a response to health care crises experienced by themselves and family members. Such reliance was especially common among women in the poorest neighborhoods, who were also likely to ascribe to more indigenous beliefs regarding spiritual aspects of health and healing.

Following their conversions, many Pentecostal communities encouraged women to use their gifts of healing in roles as *visitadoras*. The visitadoras described in Chesnut's study visited new Pentecostal

converts and facilitated spiritual healing. Although they did not hold positions of church authority, and their responsibilities reinforced feminine roles of nurturing and caregiving, the respect afforded visitadoras for activities occurring outside their homes suggested a significant advancement for women.

Prayer circles offer Latin American Pentecostal women opportunities for leadership, practice in public speaking, and various forms of social, spiritual, and economic support. According to Hallum (2003), Pentecostal churches in Central America provide a place for women "to pool their meager resources, share child-care needs, support each other financially and emotionally during emergencies, and in many cases, raise their standard of living" (p. 176).

Similar to other areas of the world, Latin American Pentecostalism may be viewed as a religious response to changing social, family, and economic structures, as well as an expression of deeply held religious faith. In interviews with Pentecostal women in Central America, Hallum (2003) repeatedly heard women describe how their Pentecostal conversions led to the conversions of their husbands and other family members. The women reported that their husbands often stopped machismo-associated behaviors including violence, alcoholism, infidelity, and abdication of parenting and other household responsibilities following conversion experiences. Such behavior changes dramatically improved women's marital satisfaction, and often contributed to enhanced economic well-being since money was no longer spent on alcohol use or other activities inconsistent with religious teachings.

Brusco's (1995) research exploring Pentecostalism and evangelicalism in Columbia similarly identified positive marital and economic changes resulting from conversions, and described evangelicalism as a strategic women's movement, transforming traditional gender roles in the private realm. Describing the gendered political implications of Pentecostalism, Hallum (2003) asserted that "Pentecostalism is serving strategic gender interests, as women address problems of inadequate health care, poverty, low self esteem, and abusive men; and in the process of coming together, a shift may occur in which women begin to explore the deeper causes for their life situations and inequality" (p. 183).

Despite the positive links described between women's conversions, the conversions of their husbands, and increased economic

prosperity, researchers have cautioned against premature valorization of Pentecostalism as a possible solution for existential and economic challenges of globalization (Chesnut, 1997; Oro & Seman, 2000). Although the status of Latin American women may improve as a consequence of Pentecostal conversion, teachings on submission can also reinforce women's primary responsibilities as wives and mothers, marginalizing single women and those whose family circumstances do not conform to Christian ideals. In such situations, Chesnut (1997) observed that many women shifted their focus from negative domestic situations to relationships with Jesus and their local spiritual families, declaring, "Eu nao troco o meu Jesus por nada" (I wouldn't trade my Jesus for anything) (p. 122). Similar to Zimbabwe and the U.S., Latin American Pentecostal emphasis on spiritual experience and authority may serve to both liberate women from some culturally inscribed gender limitations while also precluding their opportunities for full social equality.

Implications for Social Work Practice with Pentecostal Women

Understanding Pentecostalism as "a universal framework that can be amplified and developed within cultural and personal contexts" (Droogers, 2001, p. 57) is relevant to spiritually and culturally competent social work practice since Pentecostal communities demonstrate different cultural approaches to a common set of religious beliefs and related gender expectations. Such approaches reflect influences of indigenous spirituality, family and social dynamics, and desires for spiritual abundance and economic prosperity. As expressions of Pentecostal beliefs vary cross-culturally, so must the responses of social work and other helping disciplines to Pentecostal ideologies and institutions.

Social work literature has rarely explored distinct aspects of Christian movements like Pentecostalism (Belcher & Cascio, 2001), and scholars have, at times, described the perceived incompatibility of social work with conservative forms of Christianity (Belcher, Fandetti & Cole, 2004; Hodge, 2002). These tensions can complicate social work practice with Pentecostal clients, most of whom identify as religiously conservative (Anderson, 2004; Brasher, 1998). Though not specific to Pentecostalism, the five principles for spiritually sensitive practice developed by Canda and Furman (1999)

may provide helpful guidance for work with Pentecostal women and their families.

Principles for spiritually sensitive practice include value clarity, respect, client-centeredness, inclusivity, and creativity (Canda & Furman, 1999). Value clarity refers to practitioner self-awareness of ways their own beliefs and values influence practice. Such clarity may be especially important in work with Pentecostals due to conflicts between professional and Pentecostal positions on certain moral issues, and frequently otherworldly nature of spiritual gifts and practices (Belcher & Cascio, 2001). Value clarity is also necessary in regard to differences between the scientific paradigm that guide the professional knowledge base of social work and the spiritual worldview likely to guide the beliefs, behavior, and relationships of Pentecostal clients. For example, possible Pentecostal association of mental illness with possession by evil spirits may be difficult for workers trained in scientific diagnostic and treatment models (Belcher & Cascio, 2001; Merry, 2001).

The spiritually sensitive principle of respect refers to maintaining focus on client strengths and affirming values of dignity and worth in helping relationships. Respect for Pentecostalism may not be readily apparent in social work settings where there is discomfort with Christianity. In such settings it may also be important for workers to educate colleagues and supervisors about client belief systems, and attempt to develop spiritually and culturally congruent helping strategies Even when workers do not share a Pentecostal worldview or understanding of beliefs or values, it is important to hear and respect the views of their clients. Respect also involves recognizing macro-level dynamics of Pentecostalism, especially in international practice. Pentecostalism holds a religious worldview that links adherents closer to American economic and cultural ideals that include religiously influenced gender expectations. Understanding the intersecting economic hopes, faith commitments, and social expectations that affect many Pentecostal women and their families is necessary for effective practice.

The third principle, client-centeredness, reflects the value of client self-determination found in the profession's Code of Ethics (NASW, 1999). This principle may be especially difficult if a practitioner believes his or her client is being harmed by a religious affiliation or

if the affiliation places the client at increased risk of harming others. Rather than unquestionably accepting beliefs in the contexts of culture and client self-determination, it is important for practitioners to assess whether individuals and groups are drawing upon their faith as a source of strength or to sanction abuse and/or unwanted economic dependence. Care must be taken to recognize the potential for both positive and negative consequences of religious participation. Women's positive responses to direct spiritual experiences and post-conversion economic gains may be tempered by increased dependence on male economic and religious authorities in household and community life. In these situations it is important for practitioners to share concerns and discuss possible legal, physical, and emotional consequences.

Understanding women's perceptions of both power and submission may also enhance sensitivity to the complexity of religious participation. Paradoxes of power and submission are common in the experiences of Pentecostal women, though their expressions vary according to cultural and individual circumstances. In developing effective helping relationships, practitioners should explore ways women have interpreted scriptural injunctions for submission and related influences on their social status, economic well-being, and perceptions of spiritual liberation and authority. In addition to developing the skills and competence to work with diverse populations, it is important for workers to gain awareness of the complex historical, cultural, economic and political dynamics likely to affect practices of religion and social helping.

Inclusivity, the fourth principle of spiritually sensitive practice, may be complicated by the dualistic, often exclusive nature of the Pentecostal worldview that divides believers and non-believers. Depending on the context of practice, social workers who do not share client religious beliefs and experiences may sense separation that inhibits the helping process. Pentecostal clients may prefer the help of fellow Pentecostals to professional social work services that are often associated with secular concerns. If it seems in the client's best interest to work with a Pentecostal provider, workers may consider possible collaborations with pastors and/or other members of Pentecostal communities and referrals to congregational groups and services. Such collaborations and referrals should prioritize professional concerns for client safety and well-being, and actively avoid collusion

with scriptural interpretations that may be used to condone violence, financial exploitation, or other forms of harm. Research focused on different paradigmatic approaches to violence against women identified considerable diversity among Pentecostal counselors (Merry, 2001). Although most were likely to recommend temporary separation in cases of severe marital abuse, they were divided regarding the appropriateness of divorce. Some attributed violence to the husband's possession by evil spirits, some to the wife's lack of obedience and submission, and others to the husband's problem with anger management. Before pursuing a referral or collaboration, it is important for workers to consider possible areas of conflict and assess whether or not the relationship is likely to facilitate client experiences of positive self-acceptance, safety, trust, support, and respect.

The fifth principle of spiritually sensitive practice is creativity. Along with considering possible collaborations, social workers may implement practice strategies that encourage attention to ways religious beliefs can be used to direct positive change. For Pentecostal women, practitioners can actively explore religious influences on women's lives, including experiences of conversion and demonstrations of spiritual gifts. Pastoral counseling literature has suggested that the narrative therapy model of White & Epston (1990) may be especially effective with Christian women because it requires focus on their individual experiences (apart from family members), and exploration of paradoxes and external expectations ((Neuger, 2001). Techniques such as problem externalization, working with a woman to compose her autobiography and sharing responses to her story through letter writing can help provide needed clarity and self-reflection. Neuger (2001) suggests that it is especially important for a Christian woman to claim her own voice in counseling because she has often been significantly influenced by patriarchal church authority. The strong cultural and socio-political orientations of narrative therapy can also offer attention to issues of social equality, economic stress, and empowerment likely to affect women's well-being.

For example, a woman fearing she is a failure because of marital problems could be encouraged to collaborate with her social worker on a written narrative linking her religious beliefs and experiences to her family life. The narrative might continue with discussion of how she would like her past to inform her future, and exploration

of how her religious beliefs and community may affect her self-esteem and marital relationship. The practitioner could then reflect on how the woman's culture and religious participation appear to have influenced her narrative, and discuss related issues of gender and power. It would also be appropriate for the practitioner to dialogue with the woman about how her beliefs and culture compare to broader cultural expectations that may be affecting her feelings of failure, and to work on reframing her narrative to be less self-critical. Sessions would also include attention to dynamics of race/ethnicity, age, economic circumstances, ability status, and others likely to affect her situation. Throughout the helping relationship it would be important for the worker to avoid imposition of values regarding preferred narratives, but to adopt a stance of curiosity likely to facilitate client-directed change (White & Epston, 1990). If the woman was interested in group involvement or prayer support, the worker could make appropriate contacts or referrals. Depending on the practice setting and the worker's own beliefs and comfort level, spiritually sensitive practice strategies such as prayer, Christian ritual, and Scripture study could also be integrated in sessions. Canda and Furman (1999) have described the congruence of these strategies with social work practice, provided they are conducted ethically in a manner consistent with client beliefs and goals

Conclusion

The global expansionism of Pentecostalism has significant social work implications. In practice with Pentecostal women, such implications include issues of spiritual identity, gender, family relationships, and social equality. Despite conflicts that often exist between the perspectives of professional social work and conservative Christianity, it is important for social workers to recognize the profound commitments of many women to their religious beliefs and communities. Studies of women's religious participation can enhance professional knowledge of the relevance of religion and spirituality to client experience and cultural diversity. Enhanced understanding of Pentecostalism may inform social work practice with Pentecostal clients, as well as enhance professional recognition of the often complex intersections of culture and religion. Although the profession has been highly committed to

respect for cultural diversity, less attention has focused its relevance to spiritual and religious diversity (Canda & Furman, 1999). Social work educators and researchers may also contribute to professional development by expanding literature and classroom material relevant to Pentecostalism and engaging in studies of effective practice and collaboration strategies. ❖

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Is There a God in Health Care? Toward a New Spirituality of Medicine.
Haynes, W.F. & Kelly, G.B. (2006). New York: Haworth Pastoral Press.

IN THEIR BOOK, *IS THERE A GOD IN HEALTH CARE? TOWARD A NEW Spirituality of Medicine*, this team of authors, William K. Haynes Jr. and Geffrey B. Kelly, combine perspectives as physician and theologian to offer both a micro and macro view of spirituality in health care. "Dr. Bill" and "Theologian Geff" share personal vulnerabilities and faith journeys in their quest to explore the new spirituality of medicine.

Dr. Bill sums up this new spirituality by relating his personal prayer journey: "I was called to be more than a skilled scientist or a medical mechanic. I was called to be a physician healer and now a disciple of Christ as well" (p. 65). Dr. Bill shares his experience of prayer with regard to both praying for and with a patient. He cautions of the need for discernment so as not to intrude on anyone's spiritual privacy (p. 5), as well as not "using" prayer simply as one more weapon in the medical arsenal but rather as "the integration into one's daily life of the faith that is God's gift for the taking" (p. 22). Theologian Geff adds a deeper spiritual outlook to each topic and draws from a variety of classic theologians such as Dietrich Bonhoeffer and the model of faith-lived-out in Mother Teresa of Calcutta to emphasize points.

As I began reading this book, my mother was in intensive care following open-heart surgery. Admittedly, I entered the book with the same bias the authors share from the beginning—of course, there is a God in health care. I took a hiatus from reading as my concentration waned in the midst of mom's prolonged hospitalization. However, the book had already made a personal impact as I discovered the only way to communicate with my mother in the midst of pain was by speaking through prayer and placing our hope in God. The authors confirm this concept by emphasizing that optimum patient care involves treating the whole person—mind, body, and spirit.

The authors model healthy vulnerability by sharing their journeys in learning to pray and provide the reader with critical insights into the power of prayer despite the personal risk required to open the door to pray with patients. Prayer is only one issue covered in this

thought-provoking text, however. The authors also explore the role of faith in healing. They discuss Jesus' healing ministry, the problem of suffering, terminal illness, forgiveness, and reconciliation, as well as the necessity of listening from the heart.

Not stopping at the micro level, the authors go on to share their views on social responsibility, compassion, and spirituality in the health care field at the national and international levels. Briefly shifting into a preaching tone regarding the politics surrounding terrorism, the authors' words convict the reader to look beyond personal prayer needs with patients to consider larger societal and social justice issues of medicine and health care. They urge readers to take the perspective of those who suffer as an essential awareness in policy development and understanding real needs.

The authors' conversational writing style invites easy rapport and credibility with the reader. Discussion questions included after each chapter provide an opportunity for deeper learning through self-reflection or group study.

Overall, the message of putting faith in action and looking at health care as a ministry is an inspiration to those of us in the helping professions. One can only imagine the impact if we all followed the authors' example of viewing our profession as a ministry. They say:

> Our dream is that this book could perhaps serve as a resource for an ecumenical dialogue with focus on how each of our respective religions and their faithful understand and carry out this important ministry" (p. xxiii).

I believe the authors have produced a volume that could serve as a resource for such dialogue, as well as a tool for deepening spiritual maturity and considering the possibilities of a health care system in which the Holy Spirit is the "exciting soul" of the ministry (p. 199). ❖

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Encounter God In the City
White, R. (2006). Downers Grove, IL, InterVarsity Press.

THE CHRISTIAN CHURCH FACES MANY DEMANDING TASKS IN TODAY'S world. One key challenge is how the church can more effectively function within the urban setting. A visit to almost any urban church will find few that are thriving. Most mainline churches seem paralyzed and unsure how to engage the urban setting. Lack of engagement has caused some churches even to abandon the city, and turn their energies to the suburbs. Randy White contends in *Encounter God In the City* that such a strategy is short sighted, and against global trends. The world, whether one likes it or not, is quickly being globalized and urbanized. And, as statistics indicate, more than half of the world's population now live in cities—a trend that is certain to continue. This book is a master plan for change.

Instead of fleeing the city, White calls for a paradigm change: individuals and churches need to return to the city. Many do not expect to find God within the dirt and randomness of urban life. However, White convincingly contends that the city can be a place of great blessing, learning, and of personal and societal transformation.

Randy White is an experienced urban ministry practitioner. He is the national coordinator of Urban Projects for InterVarsity. In addition, White has developed an extensive urban ministry program in Fresno, California, one of the poorest areas of the country. White has walked the talk. He and his family moved into the heart of Fresno, and *Encounter God In the City* is a journal of those difficult yet transforming experiences.

The book is divided into three sections. Part One takes up the theme of being emotionally geared for urban ministry. White describes his own personal makeover as he and he family relocated from comfortable suburbia to an unfamiliar and unsettling section of Fresno. Part Two explores the different economic and social forces that shape the life of the city. Part Three examines ways in which individuals and churches can transform the city. A key theme throughout is the Biblical concept of "shalom" or peace. Biblical or spiritual transformation is not something limited to personal change. Rather, transformation has a ripple-like effect, and extends outwards to others and results in changed behaviors, values, relationships, and communities.

Even though this is a small book which can be read in a few sittings, many significant themes are raised. Let me briefly mention what I think are the five most important points.

First, there is an extensive learning curve that takes place as one moves from the suburb to the city. The act of leaving the comfortable and familiar conveniences of suburban life is hard, but can lead to personal growth and social transformation.

Second, one can only truly engage urban life by living in it, by immersing oneself in it, and by being exposed to all its unpredictable experiences. A key component of authentic Christian ministry is presence. To be an effective urban minister, one has to "be there," as ministry and love are always lived out within a certain context. Some may even feel called to move within the heart of the city themselves.

Third, to better understand the demands of modern urban life, city missionaries and church workers must use their powers of observation and conduct a "windshield survey" of the cities where they live and work. Readers are invited to conduct a needs assessment, with particular attention to a trinity of identity markers: the "urbs" or infrastructure of the city; the "civitas" or behaviors, attitudes, and networks of people; and the "anima" or unspoken assumptions which guide how people behave.

Fourth, transformed people transform their surroundings. Transformation is not about changing what is, but creating what has not been before. New levels of shalom are created and extend beyond mere personal change. Transformation often includes the development of new social relationships, of new housing projects, of new jobs, all of which are new aspects of shalom. The concept of shalom is never fully arrived at or achieved. Rather, it is a goal, a condition never arrived at, but always striven for.

Fifth, urban church workers must be open-minded and available to accept and incorporate new experiences and events. They need to have both eyes and hearts wide open. By doing so, they will be able to know the city, connect with the city, and serve the city wisely. In addition, they should be able to work within a pluralist environment, with other communities of faith.

Encounter God In the City is an excellent introduction to urban church ministry, and describes many of the key challenges which contemporary urban church workers face on a daily basis. It is well-

written, easy to understand, and a pleasure to read. For me, the real heart of the book, and perhaps its most important contribution, is how the author describes and lives out the "Nehemiah principle." During the prophet Nehemiah's time, the exiled Israelite community was faced with the challenge of rebuilding Jerusalem from afar. Nehemiah came up with a 10% solution, where the exiled community of faith decided not only to tithe 10%, but to also send 10% of their community to Jerusalem itself. White challenges the church to follow a similar model, so that American cities can be both spiritually and materially renewed. Such a strategy is not new in the history of the church. It was a practice followed by several Catholic religious orders, notably the Franciscans and Dominicans, and which helped to convert a pagan Europe. In this respect, Randy White and others, could be called the "New Friars," the first of a new order of sorts, who feel led by God to leave the American dream, and embrace God's dream of bringing peace, love and forgiveness to the marginalized in the inner city.

Encounter God In the City also presents a roadmap forward for the urban church at large. It is *not* directed at clergy and by this omission seems to indicate that the solution lies in the hands of the laity, church workers, and city missionaries. Perhaps in the future these lay workers will have the greatest role to play in urban transformation.

However, the book does have radical implications for clergy working in an urban setting. Most urban clergy are handicapped inasmuch as the seminaries they were trained in operate from a suburban framework. Most come ill-equipped, with little or no training in urban ministry. Possible solutions are urban study programs where clergy can receive ongoing training in specific ministry issues. This is, for example, what White has developed in Fresno. Another possible model is The Center for Urban Theological Studies (CUTS), co-sponsored by Geneva College and Westminster Theological Seminary, which provide weekend courses for urban church leaders in Philadelphia, and assist in the development of trained urban church workers.

This book is a great starting point for those interested in the urban church. Curious students are further directed to other resources in helpful endnotes and related internet links. ❖

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Grief, Loss, and Death: The Shadow Side of Ministry
Weidner, H. (2006). Binghamton, NY: Haworth Pastoral Press.

THE TITLE IS INTRIGUING. WHAT DOES HALBERT WEIDNER MEAN BY the shadow side of ministry? He argues that ministry has a human or incarnational side, but cultural expectations lead ministers to deny their humanness. This disparity creates the dark, hidden side of ministry that evokes emotions but provides no means of expression.

In the first chapter, the author proposes that academic instruction does not prepare ministers to respond to this tension, which is created by conflicting professional standards and an individual's need to process emotions. The resolution of this stress is not found in coping skills, but rather in the humble acceptance of human suffering, recognition of God's grace that accompanies sorrow, and the transformations that come with healing. For example, the author compares a suffering journey to the Stations of the Cross. When an individual walks through despair or the Stations of the Cross, one begins to realize Jesus' humanity as well as one's own humanness. Jesus' suffering led to his death and resurrection, yet his wounds did not disappear. They were transformed. Likewise, a minister should recognize his or her humanity, including emotional and spiritual needs, and follow Jesus' example during the transition from suffering to healing.

The next three chapters focus on the minister's transformation that occurs following a human death. Using his own faith practices, the author encourages the use of liturgy to transition through sorrow. Reciting Psalm 22 antiphonally with Matthew 10: 29 and 31 guides an individual through feelings of sorrow, isolation, and abandonment from God and ends with hope grounded in God's grace and presence. By allowing the grief process and God's Word to work together, a minister may begin to sense the fragile fidelity that God requires before an individual can become better equipped to minister to others.

When death comes to a co-worker from the pastoral ministry team, the loss is particularly painful. Based on a tragic experience of this sort, the author encourages ministers to balance professional responsibilities with the expression of personal emotions. Professional standards provide accountability with regard to respectful communication, yet the personal relationships with those on the ministry team

allow for confirmation of the loss and expression of sorrow. Together, the team transcends their grief and transforms their wounds.

Another transformational faith practice involves the use of quiet reflections, prayer, and meditation. The author states that our culture has lost the art of communicating or engaging in dialogue. We talk but don't listen. In order to heal emotional wounds, one must listen. Listening to the despair within one's self and the pain of others and then seeking God in silence and prayer is essential for transforming grief into healing.

A caution needs to be provided at this point. At first glance, the title and beginning chapters concentrate on grief and loss due to a human death. In reality, this book's focus is more diverse. While the first four chapters discuss the transformation of grief resulting from death, the last four chapters highlight how legalistic problem-solving, the business model, and one's own family history also contribute to the shadow side of ministry. This sudden shift in focus with little explanation creates some confusion. The only continuity between all eight chapters is the author's stance that the lack of dialogue leads to the continuation of professional expectations that, in turn, contribute to the shadow side of ministry.

In the last four chapters, the author passionately expresses his belief that a lack of dialogue allows the church to be guided by professional standards rather than God's will. The fifth chapter highlights the legalistic approach to problem-solving that is based on professional advice from lawyers, and insurance and business professionals. Risk management, not God's will, becomes the basis for decisions. Chapter 7 discusses how professional expectations related to administrative duties can create a shadow side of ministry. When meetings and other activities are not focused on the ministry or mission of the church, then God is lost. Chapter 8 focuses on how family wounds from childhood create shadows in ministry. The minister needs to heal from the loss and grief connected to his or her own wounds prior to effectively helping others heal. In summary, the shadow side of ministry created by these challenges are related to a loss of dialogue with God and possibly, in an allegorical way, emotional and spiritual grief and death because one is trying to function without listening to God.

Reading this book is challenging, both intellectually and spiritually. The intellectual challenge requires the reader to think philosophically rather than pragmatically. The spiritual challenge invites an examination of one's own spiritual dialogue with God and others. The transitions between the chapters did not always flow and the overall structure of the book seemed disjointed. In order to alleviate this confusion, a more appropriate title may be *Shadow Side of Ministry: Emotional and Spiritual Loss, Grief, and Death.*

Christians in social work may find this book helpful, especially if they are interested in their own emotional and spiritual healing or utilizing faith practices for spiritual renewal. Several chapters offer practical actions that enable a professional to set healthy boundaries within faith-based institutions. Overall, the book is an interesting yet challenging read. ❖

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CHRISTIANITY AND SOCIAL WORK: READINGS ON THE INTEGRATION OF CHRISTIAN FAITH & SOCIAL WORK PRACTICE (SECOND EDITION)
Beryl Hugen & T. Laine Scales (Editors). (2002). Botsford, CT: NACSW $28.95 U.S., $43.35 Cdn. ($23.15 or $34.75 for NACSW members or orders of 10 or more copies).
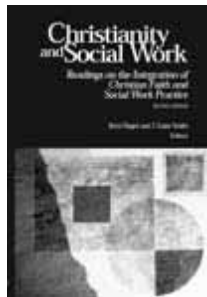
This extensively-revised second edition of *Christianity and Social Work* is written for social workers - from students, whose motivations to enter the profession are informed by their Christian faith, to seasoned professionals - whose desire is to develop distinctively Christian approaches to helping. The book is organized so that it can be used as a textbook or supplemental text in a social work class, or as a training or reference materials for practitioners. Readings address a breadth of curriculum areas such as social welfare history, human behavior and the social environment, social policy, and practice at micro, mezzo, and macro levels.

SPIRITUAL ASSESSMENT: HELPING HANDBOOK FOR HELPING PROFESSIONALS
David Hodge. (2003). Botsford CT: NACSW $18.00 U.S., $27.10 Canadian. ($14.50 or $21.85 for NACSW members or orders of 10 or more).
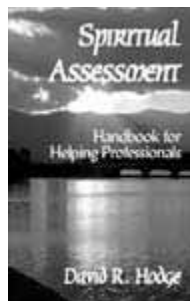
A growing consensus exists among helping professionals, accrediting organizations and clients regarding the importance of spiritual assessment. David Hodge's *Spiritual Assessment: Helping Handbook for Helping Professionals*, describes five complementary spiritual assessment instruments, along with an analysis of their strengths and limitations. The aim of this book is to familiarize readers with a repertoire of spiritual assessment tools to enable practitioners to select the most appropriate assessment instrument in given client/practitioner settings. By developing an assessment "toolbox" containing a variety of spiritual assessment tools, practitioners will become better equipped to provide services that address the individual needs of each of their clients.

SO YOU WANT TO BE A SOCIAL WORKER: A PRIMER FOR THE CHRISTIAN STUDENT
Alan Keith-Lucas. (1985). Botsford, CT: NACSW. Social Work Practice Monograph Series. $10.00 U.S., $15.05 Canadian. ($8.00 or $12.05 Cdn for NACSW members or orders of 10 or more).

So You Want to Be a Social Worker has proven itself to be an invaluable resource for both students and practitioners who are concerned about the responsible integration of their Christian faith and competent, ethical professional practice. It is a thoughtful, clear, and brief distillation of practice wisdom and responsible guidelines regarding perennial questions that arise, such as the nature of our roles, our ethical and spiritual responsibilities, the fallacy of "imposition of values," the problem of sin, and the need for both courage and humility.

GIVING AND TAKING HELP (REVISED EDITION)
Alan Keith-Lucas. (1994). Botsford CT: North American Association of Christians in Social Work. $18.00 U.S., $27.10 Canadian. ($14.50 or $21.85 for NACSW members or orders of 10 or more).
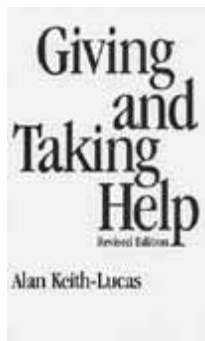
Alan Keith-Lucas' *Giving and Taking Help*, first published in 1972, has become a classic in the social work literature on the helping relationship. *Giving and taking help* is a uniquely clear, straightforward, sensible, and wise examination of what is involved in the helping process—the giving and taking of help. It reflects on perennial issues and themes yet is grounded in highly practice-based and pragmatic realities. It respects both the potential and limitations of social science in understanding the nature of persons and the helping process. It does not shy away from confronting issues of values, ethics, and world views. It is at the same time profoundly personal yet reaching the theoretical and generalizable. It has a point of view.

Substance Abuse and Spirituality: An Annotated, Topical Bibliography

Jason Pittman. (2003). Botsford, CT: NACSW. Available from NACSW only as an e-publication for $15.00 U.S., $22.50 Canadian. Available in regular hard copy version from Booksurge at www.Book-surge.com or 866-308-6235.
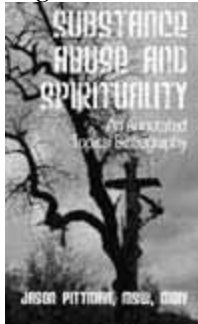
Jason Pittman's *Substance Abuse and Spirituality: An Annotated Topical Bibliograply* provides access to a broad range of resources related to spirituality and addictions, treatment, and the ethical integration of faith and social work practice. The thoughtful annotations included in this work are based on a solid knowledge of the literature, the problem of addiction, and the spiritual and treatment issues involved.

Substance Abuse and Spirituality is carefully organized as well as exhaustively and meticulously researched, and is a valuable resource for social workers and related professionals interested in or working with addictions issues.

Church social work: Helping the whole person in the context of the church

Diana R. Garland (Editor). (1992). Botsford, CT: North American Association of Christians in Social Work. $18.00 U.S., $25.35 Canadian.

Charitable Choice: The Challenge and Opportunity for Faith-Based Community Service

David A. Sherwood (Editor). (2000). Botsford, CT: NACSW $12.00 U.S., $18.00 Cdn. ($9.60 or $14.50 for NACSW members or orders of 10 or more)

Charitable Choice is primarily for use as a text in social work and social welfare classes to familiarize students with both the challenges and opportunities presented by "Charitable Choice," a key provision embedded in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. It raises significant issues and questions regarding the implementation of Charitable Choice, and documents initial efforts by states to implement the law, provides examples of church involvement in community social min-

istry, looks at characteristics and attitudes of staff at faith-based substance abuse treatment programs, and explores the experiences of volunteer mentors in social welfare programs.

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Lawrence E. Ressler (Editor). (1994). Botsford, CT: North American Association of Christians in Social Work. $8.00 U.S., $12.05 Canadian. ($6.50 or $9.80 for NACSW members or orders of 10 or more).

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John R. Cheydleur. (1999). Wheaton, IL: Tyndale House. Order through NACSW for $24.95 U.S., $38.51, Cdn. ($19.99 or $30.85 for NACSW members or orders of 10 or more). Hardcover.

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Course Objectives and Outline
Readings in the Social Work and Christianity
Home Study Program, Summer 2007 Issue

Program learning objective is to increase therapist's ability to apply the new and changing conceptual frameworks (referenced in the Table of Contents) to their practice with individuals, families and the systems within which these clients interact.

This home study program is appropriate for mental health professionals who have at least a master's degree in a mental health discipline or who are being supervised by such a professional.

By completing the Social Work and Christianity Home Study for the Summer 2007 issue, participants will:

1. Examine the philosophical and theological foundations of moral obligation in social work ethics, particularly whether its core values can survive the abandonment of a universalistic foundation. (**"Moral, Believing Social Workers: Philosophical and Theological Foundations of Moral Obligation in Social Work Ethics"**)

2. Examine the current place of spirituality and religion content in social work education through the backdrop of the profession's history; through diversity theories; through a human development lens; and through transpersonal theory as an alternative for understanding spirituality and religion. (**"The Integration of Spirituality and Religion Content in Social Work Education: Where We've Been, Where We're Going"**)

3. Learn about research which determined how much knowledge survey participants had about HIV/AIDS transmission and how knowledge was related to their perceptions of the responsibilities of the AME Church toward those infected with HIV/AIDS. (**"Knowledge of HIV Transmission and Perception of the Role of the African Methodist Episcopal (AME) Church in the Fight Against HIV/AIDS in South Africa"**)

4. Explore women's individual and collective experiences in Pentecostal groups, where numerous dimensions of gender and social identity are affected. Ethnographic studies from the U.S., Zimbabwe, and Latin America are presented to demonstrate cultural differences and their social work implications. (**"Pentecostalism and Women: Cross-National Perspectives and Implications for Social Work"**)

NACSW Home Study Evaluation Form
Issue of Social Work and Christianity: _____

Please rate this home study program according to the scale below by circling the appropriate number:

1 – Strongly Disagree   2 – Disagree   3 – Undecided   4 – Agree   5 – Strongly Agree

1. The learning objectives for this issue's articles were clearly outlined 1	2	3	4	5
2. Through participating in this home study I met the stated objectives 1	2	3	4	5
3. My knowledge of the topics addressed in this home study increased 1	2	3	4	5
4. The information I learned will be useful in my practice/work 1	2	3	4	5
5. The materials integrated faith and practice effectively 1	2	3	4	5
6. I would recommend this home study program to others 1	2	3	4	5

7. This content of this home study (based on my current level of training and licensure status) was:

◯ Too basic   ◯ About right   ◯ Too advanced

Please note any additional comments on an piece of paper and enclose it with your quiz. Thank you!

SOCIAL WORK & CHRISTIANITY QUIZ: As you are reading the following articles you should be able to answer the questions below. This is an "open-book" exam. Use this page or a photocopy. Mark your answers by pressing down hard and completely filling in one circle per question. Then mail it with a $25 payment to JournaLearning International. *Please do not send cash.*

Program learning objective: Program learning objective is to increase the reader's ability to identify ways to integrate Christian faith and professional practice, and to identify professional concerns that have relevance to Christianity, by correctly completing a multiple choice quiz. Please contact the NACSW office at info@nacsw.org or 203-270-8780 (or JournaLearning if you prefer) if you need any special accommodations.

Summer 2007 Quiz

1. *Moral obligation has to do with what we mean when we say we ___ to do something, meaning something more than prudent self-interest.*

2. *Reamer's hierarchy of obligations and set of basic rules or criteria for resolving conflicts between prima facie duties tend to conflict with Western liberal democratic thinking.*

3. *___ describe(s) social workers as "brokers of reality."*

4. *CSWE Curriculum Policy Statements from the 1970s and 1980s made some specific mention of content related to spirituality and religion.*

5. *The author expresses what concern(s) about many multicultural approaches?*

6. *As the social work profession continues to develop its understanding and use of spirituality and religion, it should maintain what focus?*

7. *A significant majority of survey respondents thought the Church should provide:*

8. *Implications of the study include all of the following EXCEPT:*

9. *In Africa, Pentecostal groups suggest that globalization can provide greater potential for the economic emancipation of both women and men.*

10. *Examples of spiritually sensitive social work practice for Pentecostal women include all of the following EXCEPT:*

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Date: 2008
Guest Editor: John Graham
Deadline for Paper Submission: July 30, 2007

John Graham

The 2008 special issue of *Social Work and Christianity* will focus Canadian contributions to Christianity and social work. Topics could include anything that captures a distinctly Canadian approach to Christianity and social work and/or approaches to Christianity and social work within Canada, and/or examples of approaches to any aspect of Christianity from a Canadian perspective.

Prospective authors are welcome to contact the special edition editor by email (jrgraham@ucalgary.ca) to discuss ideas for paper submissions. The deadline for all paper submissions is July 30, 2007. The special edition will appear in 2008.

Articles submitted to SWC should begin with a title page, including the author's name, address, phone number, email address, abstract of no more than 200 words, a list of key words, and if the author would like the manuscript to be peer-reviewed. Only the title should be repeated on the first page of the text after the title page. The article text should be double-spaced and is limited to approximately 20-25 pages, including all references and appendices. Please use the American Psychological Association Style Manual format (5th edition) for in-text references and reference lists.

Please submit manuscripts via email in MS Word by July 30, 2007 to John Graham, special edition co-editor, at jrgraham@ ucalgary.ca, or mail your manuscript on a CD or computer disk to: John Graham, Special Issue Editor; University of Calgary, Social Work Dept.; 2500 University Dr NW; Calgary, AB T2N 1N4

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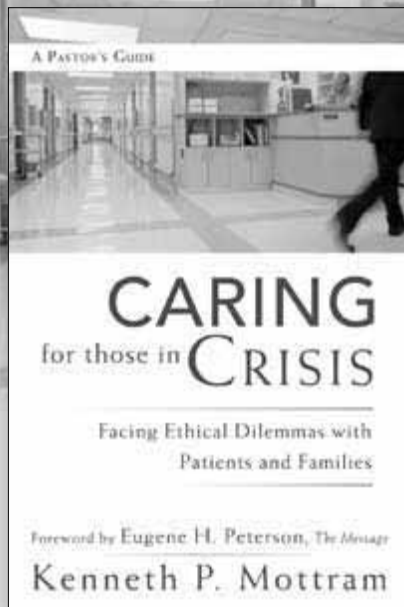
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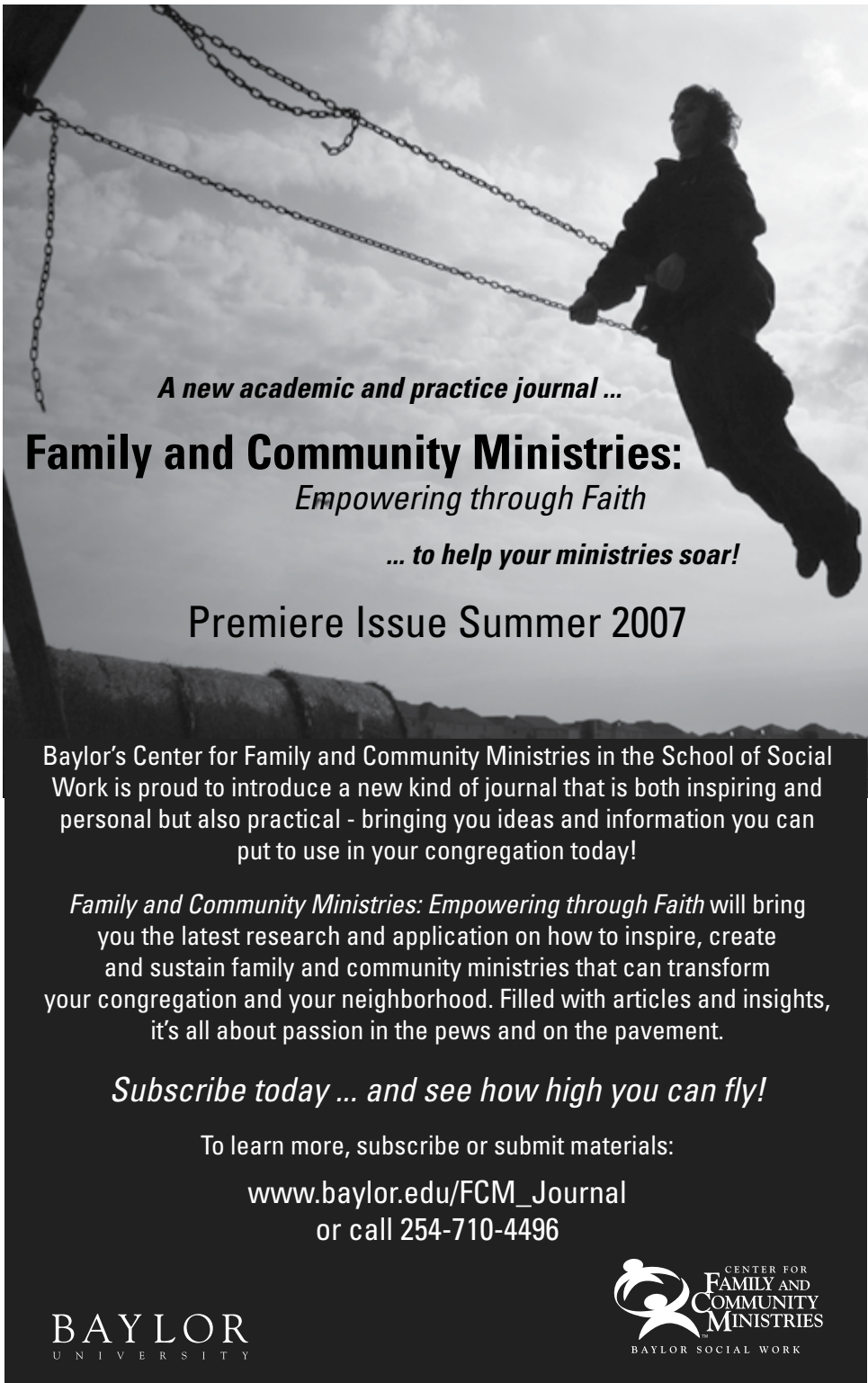
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Submit manuscripts to *SWC* with a separate, unattached title page that includes the author's name, address, phone, email address, and an abstract of not more than 150 words, as well as a brief list of key words. Repeat the title on the first page of the text and double-space the text. Use the American Psychological Association Style Manual format (5th edition) for in-text references and reference lists. Submit manuscripts as email attachments to dsherwood@georgefox.edu, preferably in Microsoft Word.

At least three members of the editorial board will anonymously review manuscripts and recommend an acceptance decision based on the following criteria: relevance of content to major issues concerning the relationship of social work and Christianity, literary merit, conciseness, clarity, and freedom from language that conveys devaluation or stereotypes of persons or groups. The editor-in-chief will make final decisions.

Authors may also correspond with the editor-in-chief by phone or mail: David Sherwood, 2740 N. Crater Lane, Newberg, OR 97132. Telephone: (503) 554-2739 (O); (503) 537-0675 (H). Manuscripts submitted by mail must include an electronic copy as above, but on CD.

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- Articulating an informed Christian voice on social
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- Providing professional understanding and help
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