



“Decision Cases for Christians in Social Work”

Thank you for taking part in this home study text-based course. The purpose of this course is to help practitioners, particularly social work educators, gain a better understanding of the benefits and drawbacks of utilizing case methods of teaching matters of religion, spirituality, and faith.

There is debate regarding the justification of integrating open-ended case methods in order to teach ethical practice to social work students. While these cases allow students to discuss and apply theory and problem solving techniques to practice, they also allow for the potential legitimization of issues that are relative. The articles chosen for this course address the place of the case discussion in the classroom, and its' purpose in the instruction of Christian social workers, in particular.

The following text-based course contains two separate readings pertaining to the use of decision cases in teaching Christian social work in the classroom. The first article you will read is *Is the Case Method bad for your Ethics? Exploring Ethical, Theoretical, and Factual Justifications for Practice* by David Sherwood. The second article presented is *Preparing Social Work Students for Practice with Religious Congregations Within the Context of Charitable Choice: The Grace House Ministry (A)* by Michael E. Sherr and Terry A. Wolfer. Contact information for each author can be provided upon request.

At the conclusion of each article, you can find a complete reference section to support the readings.

After completing this course, you will be able to:

1. List at least three benefits of utilizing decision cases in general social work instruction.
2. Explain one way in which social work education can utilize decision cases in a Christian context.

Upon completing the reading section of this course, please take the 10 question post-test located on the website provided to you when you purchased this course. After achieving a score of at least 80%, and completing training evaluation, you will receive your CE certificate verifying that you have earned 1 continuing education contact hour approved by the Association of Social Work Boards.

We hope this course will help you in your work with or understanding of the use of case methods in teaching Christian social work practices. Thank you again for your interest in this course, and or your interest within this within this critical interest within social work.

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IS THE CASE METHOD BAD FOR YOUR ETHICS? EXPLORING ETHICAL, THEORETICAL, AND FACTUAL JUSTIFICATIONS FOR PRACTICE

David Sherwood

Is the use of case discussion to explore ethical and practice issues bad for your ethics? In particular, is the use of open-ended cases, where you don't have the end of the story and where you don't have the right answers in the back of the book, liable to corrupt you? Will it lead to unbounded relativism in values and practice? Will it legitimize consideration of issues and options that should never even be considered in the first place?

Well, I hope not, since this special issue of *Social Work & Christianity* is dedicated to the development of an array of open-ended cases drawn from actual practice situations. These cases are designed to provide you with provocative raw material with which to develop and deepen your ability to integrate your Christian and connection to the teaching of medical ethics in an interesting social work values with your professional knowledge and skills in the messy complexity of actual practice situations.

However, these questions deserve some consideration as we launch into this enterprise. These questions have been raised in (though delightfully dense, idiosyncratic, and, I am tempted to say, typically English) article by Christopher Miles Coope from the University of Leeds in the *Journal of Medical Ethics* (1996), entitled "Does teaching by cases mislead us about morality?"

He suggests that some use of case studies to teach medical ethics tends to exaggerate the degree to which morality is controversial, that many problems are not really moral problems, and that there should be moral limits to what kinds of practice alternatives should be open to discussion (this is the potentially corrupting part of the consideration of all alternatives in case discussion). I won't be able to discuss all of his thoughtful and interesting points here, but I would like to reflect a little on the use of to explore ethics and professional practice, particularly whether or not it encourages relativism.

Do Cases Legitimize All Alternatives?

When he talks about the potentially corrupting effect of case studies, Coope provides a little case study of his own (1996, p. 50):

You are to imagine that you are a student at a wellknown Central European university in the nineteenthcenturies. Your amiable and impressive teacher of philosophy has conscientiously prepared some materials for you. They comprise the usual tour through moral theories, and some case studies, among which you will find the following.

Case-study five: Responsible treatment of the insane: As head of a psychiatric hospital, you have to decide what is to happen to three of your patients, Herr X, Herr Y, and Frau Z. All are due for termination.

The facts. There are three methods of termination available. The first is painless, but causes convulsions, and this is very distressing for the nursing staff. The second is also painless, and death is peaceful. But the body is rendered useless for research purposes. The third method is really quite uncomfortable for the patient, but fortunately does not have to take place when there are nurses present. This method allows valuable experimental work to be undertaken, both before and after death, work that is expected to be of considerable benefit to other patients. Note that the first method is twice as expensive to use as either of the other two. Herr X has expressed a strong preference to be terminated by the second method. When the matter is put to Frau Z she just giggles. (We cannot get through to Herr Y at all.)

Questions. 1. Which method should you choose?; 2. Would it be wrong to discriminate between these patients?; 3. Would it make any difference if a large number of patients were to be terminated, and resources were scarce?

Break up into groups of four. You have ten minutes in which to come up with an answer.

Coope says that, if we were handed such an assignment, we “would tear up the paper in contempt because we would suppose that certain possibilities – one ought to call them ‘temptations’ – were not be weighed and considered” (1996, p. 50). However, he says that the case method tends to presuppose “that *any* course of action is at least open to discussion, if only to be rejected” (1996, p.

50).

Coope goes on to say that “It is surely part of justice that certain possibilities should be put off the agenda” (1996, p. 50). He argues that we should not be prepared to seriously consider certain possibilities and we should not give the impression that we go along with the serious consideration of those possibilities by our participation in the discussion. He argues that it is important not only to avoid certain actions, but also to avoid certain invitations to action, suggesting that certain kinds of case discussion can amount to such an invitation, lending at least tacit legitimacy to the actions. Coope (1996, p. 51) says:

Doctors who are in charge of the weak and vulnerable
have a special duty not to so much as dream of harming
them, even in the interests of ‘good causes’. Nor
should they get themselves used to the idea of harming
them by considering invitations to harm incorporated
in case studies. . . . If one wanted to corrupt people
one might try getting them to agree to do certain
beastly things in hypothetical cases.

Speaking as a Christian who believes that moral values are not simply subjective and relative but are ultimately grounded in the nature and will of God, I find much to agree with in what Coope says. Moral values and ethical obligations are not just products of social conditioning or individual preferences. Consequently, not every conceivable action deserves equal standing when we are trying to decide what to do in the face of a complex ethical or practice situation. And I agree that it is possible to present and discuss case situations in such a way as to, in fact, seem to give at least tacit legitimacy to all the potential alternative responses.

However, I don’t think we can avoid the danger of lending legitimacy to unethical alternatives by assuming that we can refuse to discuss them. Pandora’s Box has already been opened. Further, I would argue that the problem does not lie in the case method per se, but in how the cases are used. I would also argue that the kind of cases presented in this issue of *Social Work & Christianity* is least susceptible to the intended or unintended misuse that Coope speaks of.

Cases Are Only As Good As Their Use

It is important to be clear about one thing from the start. There is no magic in cases or the case teaching method in themselves. The use of complex, realistic cases to explore practice is a valuable tool, but not a panacea. Cases can be very good tools, but their impact is always affected by the hands that use them. How values are dealt with will *always* depend on the interaction of the leader and those who are discussing the case. The leader's willingness and ability to bring out needed (especially balancing or counter) points of view or neglected issues are always critical.

If you are not in a class or a group, but reading a case and reflecting on it yourself, then it is up to you to push for those deeper questions or other ways of thinking about the situation. Critical thinking is essential. We cannot start with the assumption that we already know or have thought about everything that might be important. This is a good argument for avoiding quick, superficial reading or discussion of cases. If it is a good case dealing with moral or practice dilemmas, what we should do will not be obvious. Superficial reflection will get us nowhere. Biased reflection will get us in trouble.

The primary reason I think the cases in this issue are less susceptible to intended or unintended misuse is that these cases represent real practice situations and they don't come with predetermined "answers." They are not constructed or contrived to make an ideological point, whether to demonstrate what the authors believe to be the "right" practice answers or to validate a particular theory or ethical position.

That doesn't mean that the cases have some hypothetical complete neutrality or "objectivity." Authors cannot help but be influenced in their selection and use of materials by their own worldviews and understandings of values and social work practice. However, the cases are grounded in actual practice situations, with a lot of the attendant detail and complexity that real situations involve. This means there is both particularity and ambiguity. They are cases to be grappled with, not illustrations of somebody's theory. This is why they stop in the middle of the story, when assessment and action are called for, but they do not tell us what happened.

Perhaps some think that telling the end of the story, illustrating good or bad practice and good or bad or ethical decision making, with an explanation of what was good or bad about it, is precisely what we *should* be doing. However, I would say to do that would be using case material to illustrate a point, not engaging the complexities of actual practice at a serious level. More seriously, I would say that it is naïve and simplistic, even misleading, to suggest that complex case situations have textbook answers, such that all competent, ethical social workers will arrive at precisely the same assessment and action.

The cases in this issue will encourage you to think about how you understand the situations, what more you would like to know, and what you would do. Even more importantly, the cases should encourage you to think about *why* you would do what you would do. What are the ethical, theoretical, and factual justifications or grounds for your understanding and action?

The Unfortunate Necessity of Considering Possibly Immoral Options

In his suggestion that “there are certain things that a good man will simply not think of doing” (1996, p. 51), it seems that Coope assumes a deontologically-based “mere morality” that most of us, social workers included, will recognize and agree with. I myself think that such a morality does exist and that most of us recognize it in one way or another, even as some deny it or claim to be moral relativists, as C. S. Lewis discussed in “Right and Wrong as a Clue to the Meaning of the Universe” in *Mere Christianity* (1960). I would also argue that it is precisely this morality that we find partially expressed in social work’s “core values” and in the Code of Ethics.

However, I am not as optimistic as he seems to be that this truth is reliably enough perceived for us to be confident that we can simply rule out discussion of certain kinds of options for fear that they will corrupt us. Like it or not, many options that some of us would like to believe are “unthinkable” are very much “thinkable,” and so have to be dealt with. See, for example, Singer’s arguments that babies are not “persons” with human rights until they have been tested to determine whether or not they are reasonably normal (ditto for folks who have lost many of their mental faculties due to accident or dementia). As Coope himself recognizes, his Nazi example was not far-fetched and such actions were carried out by

doctors who were “so often quite ordinary civilized people, living by the standards of their time” (1996, p. 50).

He seems to think that in most cases the “right” thing is pretty obvious or that the questions are mostly technical (what will work best) rather than ethical as well. He seems to think that the hard case is exceptional, or that most such cases are contrived for purposes of discussion or pushing the ethical envelope. Well, some such cases may be contrived, but many are not, and certainly not the kind of cases we are including in this special issue.

Hard Cases Are the Ones We Need to Consider the Most

By “hard” I mean precisely those cases in which there is no one big trump card value that makes it obvious that I should “tear up the paper in contempt” and walk out. I would argue that all of the real moral and practice dilemmas we have occur in those complicated life situations in which there are multiple legitimate values and prima facie obligations at stake and any conceivable action that I can take will come at significant cost to one or more of these values and obligations. Coope sardonically calls this the search for “The Right Wrong Thing To Do” (1996, p. 47) and suggests that the case study method presumes that there will always be either one “Moral Thing To Do” or one “Right Wrong Thing To Do.”

Well, I would not call it “The Right Wrong Thing To Do” and I would not agree that ethical analysis on the case level will ever lead us to the *one* “Right” or even “Right Wrong” thing to do. Given the limitations of human understanding and character (we are finite and fallen) and the fact that actions on the case level will inevitably advance some values at the cost of other values, the best we can ever do is make a better or worse judgment about how to prioritize those values under the circumstances. I would say what we are after is our best *judgment* of what is “The Right Thing To Do Under The Circumstances.”

Conscientious judgments will vary. These judgments are always a combination of moral and practice wisdom, so the better we understand the moral issues and the better we understand the practice issues, the better judgments we are liable to make. The nature of social work practice (or the conduct of our daily lives, for that matter) is that judgments *must* be made and action *will be* taken, one way or another.

The very nature of complex practice situations is that they are inevitably “relative,” but that doesn’t mean our judgments about them have to be uninformed or unsupported. The better we understand the values, facts, options, and comparative costs involved, the better our judgments will be. As a Christian in social work, I would say that I am trying to discern what available course of action best approximates the demands of love and justice in competently fulfilling my professional helping role.

To me, this is an argument in favor of using case studies. Thinking deeply and specifically about the kinds of complex issues we may face (privately or, better, in a group) is one of the best ways I know to prepare for those hard choices. We have to bring to bear all the knowledge and sophistication about the practice and ethical issues we can muster. We have to try to understand *what* we would do and *why* we would do it as opposed to the alternatives.

Case study has the potential for helping us sort through the interaction between our values, moral principles, practice knowledge, and awareness of relevant contingencies. It helps create the conditions for making more informed and, we hope, better judgments. It helps the concrete thinkers among us reflect on principles (why would I choose one option over another). It helps the abstract thinkers among us consider the outworking of our principles in practice (what can actually be done and what will likely happen if I try to put these principles into practice). It does not change the fact that judgments will have to be made.

Making Principled Judgments Is Not Relativism

I do not accept the suggestion that the process of forming judgments about what to do in complex case situations necessarily entails “relativism” or that the imperfection of our judgments means that they are not founded on moral principle or guided by moral rules.

I think we need to be clear about what moral principles and rules can do for us and what they can’t. My way of thinking about this can be called the “Principle/Practice Pyramid” (cf. Sherwood, 2002, pp. 5-6). At the bottom two levels of the pyramid (worldview assumptions and core values or principles) we may be able to have a high level of agreement. We may even achieve a high level of achievement at the mid-level (basic rules). But even the most conscientious and competent of us will not

achieve complete agreement at the tip of the pyramid (where we must apply our principles and rules to actual case situations).

1. *Fundamental beliefs always underlay our thinking.*

First of all, worldview (and theology) matter. Fundamental beliefs always underlay and frame our thinking about cases. What kind of a universe do we live in? What does it mean to be a person? What is the nature and authority of our values? What is the purpose of life? It seems to me that, for example, if we live in a purely material universe and that we are simply the products of blind chance, then all our talk about the innate value and worth of each person is so much subjective sentimental blather and the whole idea of ethical behavior as we normally think of it is so much self-serving nonsense.

While you and I, most social workers, and Coope may assume that “everybody knows” you can’t just “eliminate” inconvenient people or use them for medical experimentation (for the good of humankind, of course), not all belief systems support such notions. There are several problems. What constitutes being a “person” and why do “persons” claim such privileged status? And even if we grant that “persons” have value, how can we begin to claim that the value of an individual person outweighs the potential good that many, perhaps millions, such persons may hope to receive as a result of the medical experimentation? Maybe these patients are just “selfish eaters” after all. On what basis would we deny the claim that “might makes right”?

Whether or not we recognize it, we all bring worldview, faithbased assumptions to our discussion of cases. And I mean all of us, Christian and non-Christian, religious or non-religious, spiritual or non-spiritual. My worldview assumptions, for example, include that we live in a universe in which a loving and just God has created us and given us worth and meaning, and that moral truth is rooted in the nature of this God. Although it won’t happen automatically, the discussion of cases at least provides the opportunity for us to become more aware of our presuppositions (and those of others) and to critically examine them and their implications.

2. *Our core values or principles grow out of our fundamental beliefs.*

As a result of our fundamental beliefs, we develop core values or principles that frame our understanding of “the good” and the basic trajectory of our sense of moral obligation. What is good and

what should be the goal of my actions? The Bible says that God is loving and that God is just, that love and justice are at the core of God's nature and that God expects us to show love and justice in our dealings with one another. The fundamental test of every action for Christians is how well it comports with love and justice.

Related to this would be basic principles regarding the nature of persons and moral responsibility. The social work analog (supported by Christian principles) would be the "core values" found in the preamble to the Code of Ethics – service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence.

3. *Rules help us apply our principles*

Moral rules help us apply our core values or principles to various domains of life. These can be very informal and simple (what we learned in kindergarten) or very formal and complex (what we put in the Constitution, the Bill of Rights, and our legal system).

Whereas principles are general (love and justice), rules tend to be more domain-specific (ways to apply love and justice to family life, social relationships, business dealings). So we have the Ten Commandments and the Sermon on the Mount. On a more specific (but culturally situated level) we have the Mosaic Law for the children of Israel. The social work Code of Ethics has well developed rules for our relationships with clients, colleagues, practice settings, the profession, and the broader society. We should not have sexual relationships with clients. We should obtain informed consent for interventions. We should not engage in situations in which we have a conflict of interest.

4. *Rules may conflict in case situations but judgments must be made.*

Rules like this can be helpful because they are more specific, but, dare I say it, they are less absolute in character when we get to the case level of application. This is because at the case level, we find that there may be other rules that also apply. Even a quite fundamental rule in social work, such as confidentiality, may be found in tension with another rule, such as the protection of human life, which may be even more important in the situation.

So any given rule may be a *prima facie* obligation (valid on its face; binding, all things being equal). But when more than one *prima facie* obligation is present in the case situation, our *actual* obligation is the

result of our judgment regarding how to balance and prioritize the various prima facie obligations and our perception of the likely consequences of the options available to us.

There is no simple formula for how to prioritize the values or rules, but we make a wholistic assessment of what we perceive to be the relevant values, rules, available options, and likely consequences and their relative weight in best approximating our core values or principles. As a Christian, I would say, “What can I do that has the best chance of achieving love and justice?”

The rules will help me explore the territory, but they won’t give me a definite answer when more than one apply. Because predicting the consequences of what I do is notoriously difficult, I had better have a very good reason if I decide to depart from any particular rule. But hard cases are hard precisely because more than one rule applies and any action I take will involve departing from some rule.

That’s why I have to avoid getting caught up in the technicalities of rules, as such. Legalism can have the appearance of righteousness, and may spring from a desire to do the right thing, but it can wind up causing us to do some very unloving and unjust things. I need to keep reminding myself what the rules are supposed to be about – applying the core values. I need to keep asking myself, “What are the core values at stake? What will make for love and justice? What will make for Shalom?”

Case Study is No Substitute for Character Development

Finally, it is important to note that case study is not character development when it comes to ethical practice. So case study will never substitute for the development of moral character (or virtue, to use a good, old-fashioned word) required to carry out our judgments regarding the best course of action. Our character must be sufficiently developed so that we actually *want* to do the right thing and that we will have the moral courage to *act* on our best judgment of what the “Right Thing To Do Under The Circumstances” may be. Of course, well-formed character needs information, theoretical understanding, and competent practice skills through which to work. Neither is a substitute for the other.

The development of such moral character is a process of repeatedly chosen and attempted obedience to our best understanding of our moral obligations. For Christians, I would say that this

is an outgrowth of deliberately living out the *practices* of Christian faith— worship, study of scripture, prayer, looking out for the good of others, trying to do the right thing even when it costs us. This is part of something that Eugene Peterson (2000) once aptly characterized as “a long obedience in the same direction” or discipleship.

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PREPARING SOCIAL WORK STUDENTS FOR PRACTICE WITH RELIGIOUS CONGREGATIONS WITHIN THE CONTEXT OF CHARITABLE CHOICE: THE GRACE HOUSE MINISTRY (A)

Michael E. Sherr & Terry A. Wolfer

The social work profession has a remarkable opportunity and challenge to reconnect with its religious roots and develop services in partnership with religious congregations. The professional literature, however, has provided social work educators with limited guidance in terms of resources and curriculum strategies for preparing students and practitioners for competent practice in religious settings. This paper posits the efficacy of a decision case module for covering content on Charitable Choice and working with religious congregations. The Grace House Ministry, a decision case written specifically for the curriculum module is included at the end.

Until the end of the 19th century, religious congregations and the organizations they spawned were virtually the sole providers of social services in the United States (Cnaan, 1999; Garland, Hugen, Myers, Sheridan, Sherwood, & Wolfer, 2002; Salamon & Teitelbaum, 1984; Wineburg, 2001). The social work profession itself emerged out of the efforts of “friendly visitors” and founders of settlement houses, both of which worked under the auspices of congregational outreach. Congregations and their volunteers founded relief agencies, children’s homes, recreation services, family and children associations, and mental health associations. In other words, religiously motivated volunteers preceded social work in almost every field of practice (Anderson & Ambrosino, 1992; Forte, 1997; Sherr, 2003).

Despite social work’s origins, the nascent profession quickly embraced the scientific method in the early 1900s, spawning eight decades of social services largely disconnected from religious traditions. As the delivery of services became more systematic, and social work became increasingly secular, religious congregations and other faith-based organizations (FBOs) silently continued providing a hidden safety net of services (Cnaan, 1999). Nevertheless, the role of congregations and their volunteers became increasingly marginalized and virtually ignored by the social work profession (Garland et al, 2002).

A Remarkable Opportunity and Challenge

Since 1980, several factors have created an opportunity for the social work profession to reconnect with its religious roots and develop services that more intentionally and competently utilize congregational resources. Devolutionary trends in social services have shifted more of the responsibility for decision-making and service provision to local levels of government. As a result, congregations were increasingly called upon to expand their role into the provision of social services. Then, in 1996, government leaders officially welcomed FBOs—of which congregations are the most numerous and dispersed type (Wolfer & Sherr, 2003)—into the circle of service providers by including the Charitable Choice provision in section § 104 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Wineburg, 2001). More recently, after his inauguration, President Bush announced the formation of the White House Office of Faith-Based and Community Initiatives. Commenting on the magnitude of

opportunities for congregations, Sider, Olson, and Unruh (2002) declare, “Never in our lifetime—perhaps not anytime in the last one hundred years—has the possibility of explosive growth in holistic ministry been so promising” (p. 11).

Social Work’s Response to Religious Congregations and their Social Programs

Until recently, social work scholars have tended to overlook the role of religious congregations in people’s lives (Wolfer & Sherr, 2003). This is ironic given the social work profession’s ecological and social systems perspectives. Commenting on the absence of interest, Wineburg (2001) laments:

The academic community skipped by the most dramatic shift in public policy in more than half a century...[And if the academic community is going to become effectively involved] it will be difficult without an overarching analysis of the impact of the service contributions the people in these 300,000 congregations make, with their organizational arms reaching both inward to help their own members and outward to support sectarian and secular agencies in the nonprofit sector (p. 40).

In the last several years, however, social work literature has given limited but increasing attention to religion and religious congregations. Research on religion has focused primarily on the notion of religious beliefs as a tool for practitioners to use in building rapport with clients for whom religion is an important issue (Cnaan, Wineburg, & Boddie, 1999). Furthermore, only a handful of studies exist on religious congregations as organizations providing social programs. While such studies are laudable efforts, they are primarily descriptive with findings that are difficult to interpret. After a review of the literature, Wolfer and Sherr (2003) conclude, “the American religious world is decentralized in the extreme.... [Because of the difficulty in locating good sampling frames], it is difficult if not impossible to measure the various aspects of congregational life” (p. 44). Despite the methodological difficulties, there is growing consensus among social work scholars that: 1) the efforts of religious congregations are greater than previously imagined; 2) there is a lot more to learn; and 3) social workers, if informed about Charitable Choice initiatives and the willingness of many religious congregations to provide social

services, can participate and provide leadership in coordinating partnerships with congregations to deliver effective service programs (e.g., Garland, 1992, 1998; Garland et al., 2002; Cnaan et al., 1999; Sherman, 2000).

In light of the current context, efforts to incorporate content about religion, congregations, and Charitable Choice into the social work curriculum have been distressingly slow. In fact, recent research on social work education and religion reveals that the profession is still primarily assessing the place of religion in the curriculum (Casio, 1999; Kaplan & Dziegielewski, 1999; Sheridan & Hemert, 1999; Staral, 1999). There are only a few conceptual reports that mention possible ways of including religious content (e.g., Canda, 1989; Netting, Thibault, & Ellor, 1990). However, they were written over a decade ago and lack any empirical support.

We suggest that the time for assessing the place of such content has passed, and a new era of social welfare requires attention. This paper outlines a decision case module for preparing students and practitioners to practice in potential partnerships involving religious congregations. Before providing the decision case, however, it briefly discusses what social workers need to know in order to work with or within religious congregations.

What do Social Workers Need to Know?

Curriculum content for social work with or within religious congregations requires information for both direct and indirect practice. To begin, social workers must have a solid grasp of the general principles of Charitable Choice legislation. Technically referred to as Section 104 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Charitable Choice attempts to: 1) encourage more States to contract with FBOs; 2) protect the unique character of religious organizations; 3) protect the religious freedom of potential beneficiaries; and 4) maintain separation of church and state (Carlson-Thies, 2001; Cnaan & Boddie, 2002). For instance, States that contract with any nonprofit organization must give FBOs an equal opportunity to compete for funding. Charitable Choice also affirms that FBOs can display religious symbols, use faith-based approaches in providing services, and

can use religious criteria in staffing the programs. The religious freedom of recipients are protected by ensuring that alternative services are available for recipients who object to religious providers, and affirms that recipients are not required to participate in religious activity as a precondition for receiving services. Finally, separation of church and state is maintained by requiring that government funds only be used for providing public service, and not for inherently religious practices such as worship, Sunday school, or proselytization.

However, Carlson-Thies (1999a) suggests that a religious congregation does not simply decide to begin a community ministry and automatically seek and receive federal funding. Furthermore, the presence of a legal sanction to involve religious providers does not necessarily lead to state agencies actively seeking and using their services. Rather, a great deal of preparation and planning must occur for religious providers and practitioners within governmental agencies to benefit from Charitable Choice legislation. For instance, before pursuing federal funding, faith-based organizations must ensure that they have specific plans for how to help populations in need. Although faith-based organizations have more flexibility than government agencies, they still must develop policies and procedures, and have personnel who can account for how funds are utilized. As more services develop, practitioners must be aware of the religious character of different services. Moreover, practitioners must be able to explain the religious differences to recipients in a way that conveys the benefits of the services, while protecting their religious freedom. If recipients object to receiving services from faith-based providers, then practitioners must be prepared to offer accessible, high quality alternative services. Finally, to encourage the highest quality of services, practitioners can offer training and assistance to ministry leaders and other lay people who are diligently working to help others (Carlson- Thies, 1999b).

As social work professionals, practitioners must also be able to critically assess the potential effects of increasingly involving religious providers in the American social welfare system. If the legislation encourages more faith-based providers to offer high quality services to people in need, then the shift to religious providers offers a great deal of promise. Cnaan and Boddie (2002) suggest, however, that there are a number of issues that remain unclear. For instance, studies on Charitable Choice tell

conflicting stories about how well the legislation is being implemented. While certain studies report great progress, others offer a view of money being given to faith-based providers that were already receiving funding prior to the legislation. In addition, some studies suggest that new providers rarely have the capacity to access funding and, in many cases, don't even know that Charitable Choice exists (Cnaan & Boddie, 2002). Cnaan and Boddie further report a lack of conclusive studies that measure the capacity of faith-based services to expand, incorporate large amounts of public funding, and still maintain the same quality of services to recipients. Recognizing the current political climate that supports faith-based services, however, Cnaan and Boddie (2002) state, "the number of social workers working in or with faith-based organizations [will likely] increase. Hence, it is imperative that social workers become wellversed in the Charitable Choice provision and its implications for education, practice, policy, and research" (p. 231).

For direct practice, social workers need to appreciate the unique cultural and religious beliefs and practices of particular congregations. Of primary importance is the duality of purpose for congregations addressing social problems. Social workers partnering with congregations to plan for community programs must simultaneously evaluate their work by: "1) whether or not the program accomplishes its stated objectives in addressing targeted clients needs, and 2) whether or not the involvement and long-term commitment to addressing community needs by congregations and their volunteers are enhanced" (Garland et al., 2002, p. 5). Garland and colleagues state:

Ultimately, social workers need to understand a congregation's framework for integrating faith and service. Working effectively with a congregation means understanding its culture and beliefs that support social service, and working within the frameworks of those cultures and beliefs. If volunteers serve as an expression of faith, then social workers, to be effective in leading and strengthening the service of volunteers, need to be able to relate volunteer service to that faith (p. 6).

Presently, few congregations actually hire social workers on a full- or even part-time basis. Given the emerging context, however, it may be increasingly likely that Christians in social work will have opportunity to collaborate with churches, their own and others, in developing small community service

programs. In some instances, such programs may eventually lead to development of formal programs and include professionals on staff. In the meantime, these programs may provide unusually exciting and challenging opportunities for professional social workers to develop or adapt their knowledge and skills in a church context.

In some ways, working with congregations allows practitioners to more authentically uphold ethical principles that reflect core social work values. Although sections 1.01 and 1.02 of the National Association of Social Workers' (NASW) Code of Ethics (1999) emphasize social workers' commitments to clients and their right to self-determination, often practitioners work within large bureaucratic agencies that pre-determine the boundaries for being committed to clients and limit the extent of self-determination. This occurs (perhaps unintentionally) as agencies define eligibility criteria, seek to provide services to large numbers of people, and deliver services in a uniform manner in an attempt to be efficient. Ultimately, people seeking services are potential customers in need of help, and their self-determination is limited to accepting the prescribed help offered by the agency or looking elsewhere for alternative services.

Congregations, however, have the freedom to develop programs with different stances toward delivering services. Rendle (1984) identifies three possible stances – welfare, charity, and ministry. On the one hand, congregations can develop programs guided by a welfare stance similar to government agencies. Such programs have strict eligibility criteria and reinforce a one directional relationship where clients receive whatever is offered by the church. On the other hand, congregations can develop programs guided by a ministry stance. As defined by Rendle, a ministry stance emphasizes a reciprocal interdependent relationship between the helper and recipient. Furthermore, helpers believe the relationship is guided by the will of God and seek to glorify Him within the relationship. Regardless of the circumstances or needs, each person is seen as deserving respect and dignity as a child of God. In this way, clients are seen as being on equal footing with practitioners and thus are capable of defining the help they need and capable of positively influencing the practitioner (Rendle, 1984).

As social workers help congregations develop and deliver services it is important to distinguish between charity and ministry stances. Rendle (1984) reports that service programs described as ministry,

though operating on principles of charity, are more difficult to deal with for the church than welfare programs. The distinction is subtle because charity often looks like ministry in that often people receive help according to their needs. The difference is that with charity the relationship remains one directional, with the helper sending the message: I am better than you so I will help you and I can disciple you, though you have nothing to offer me in the relationship. As social workers advocate for a ministry stance, therefore, they will be ensuring that services are truly ethical and reflect relationships that illuminate the glory of Christ's love.

The opportunities for working with religious providers also create challenges for social workers to learn new information and better adhere to other ethical principles. Consistent with sections 1.05(c) and 6.04(d) of the NASW Code of Ethics (1999), social workers will need to learn about different religious cultures, and advocate for social policy and action that respects the religious freedom of individuals and institutions. Social workers must learn to distinguish and appreciate the diversity of denominations in terms of the leadership structure, norms of behavior, general theological positions, and the history and experience with providing social service programs. Christians in social work, moreover, must advocate for the religious rights of their clients, and the right of congregations to have equal opportunity to secure funding and provide services. Specifically, we encourage Christians in social work to confront NASW in regard to its negative official statement regarding faith-based initiatives, as being in contradiction to its own Code of Ethics (NASW, 2001).

Using Decision Cases in the Classroom

Since the profession's inception, social work educators have used cases for teaching students about practice realities (Reynolds, 1942; Towle, 1954). Traditionally, however, educators have most often used "cases" to illustrate theoretical concepts by depicting practice situations with appropriate professional responses (Welsh & Wolfer, 2000; for example, see: LeCroy, 1992, 1999; McClelland, Austin, & Este, 1998; Rivas & Hull, 1996, 2000). In contrast, decision cases provide the basis for case method teaching, an innovation pioneered at the Harvard Business School in the early twentieth century but recently adopted by educators in a variety of professional disciplines, including law, medicine, public

administration, theology, education, nursing, and social work (Barnes, Christensen, & Hansen, 1994; Cossom, 1991; Lundeberg, Levin, & Harrington, 1999; Lynn, 1999). Rather than provide information, case method teachers rely heavily upon a variation of Socratic questioning to facilitate in-depth discussion of cases (Lynn, 1999; Welty, 1989).

According to Boehrer and Linksy (1990), decision cases are an abstraction of traditional apprenticeships that are removed from the field and placed in the classroom for students to consider together. Because they are open-ended, decision cases compel decision-making on the part of students, to both define problems and choose courses of action. For this reason, several authors advocate use of such cases for promoting critical thinking skills and better preparing students for professional practice by providing them with opportunities to exercise judgment and engage in decision-making (Barnes, Christensen, & Hansen, 1994; Boehrer & Linksy, 1990; Christensen, Garvin, & Sweet, 1991; Fisher, 1978; Meyers & Jones, 1993).

Case method teaching employs open-ended “decision” cases, a particular type of case specifically developed for this teaching approach. Such cases present students with the ambiguities and dilemmas of social work practice and require active decisionmaking (e.g., Cossom, 1991; Golembiewski & Stevenson, 1998; Lynn, 1999; Rothman, 1998). Sometimes referred to as “teaching” cases, they describe actual situations practitioners have encountered in great detail. Because they are drawn from practice, the situations are often messy and ambiguous. Because the cases are open-ended, they do not tell what the practitioner ultimately did nor how the case turned out. As a result, the cases require that students use their analytic and critical thinking skills, their knowledge of social work theory and research, and their common sense and collective wisdom to identify and analyze problems, to evaluate possible solutions, and to formulate a preferred intervention (Welsh & Wolfer, 2000).

Sherwood, Wolfer, and Scales (2002) make a point to distinguish decision cases from the case vignettes often used in social work education. Case vignettes, they argue, often present oversimplified examples of practice situations with appropriate responses. As a result, social work interventions can seem rather straightforward, giving students an artificial sense of the effortless of professional

practice. In contrast, decision cases present students with the complexities and ambiguities of actual social work practice.

The Grace House Ministry

The Grace House Ministry (A) is the first part of a two-part decision case specifically portraying potential social work practice in a religious congregation [See Appendix]. The case highlights the experience of Randy Samuels, a licensed clinical social worker, who was solicited by a church leader to meet with a family that had come to his church for help. What began as a one-time intervention eventually led to Randy considering broader changes in how the church utilized its deacon fund. Randy was invited to a meeting where he was given the opportunity to share some of his suggestions.

The case has many interesting twists and turns that work as step off points for reflecting upon a social worker's role within a religious congregation. For instance, Randy utilizes assessment skills at various levels of practice. On the one hand, when meeting with families, Randy assesses the families as target systems, assisting the church in developing new intervention strategies for helping specific families. On the other hand, as Randy continues meeting with families, he begins assessing the church's helping process.

Assessing the helping process brings about the use of other social work skills. As Randy begins sharing his concerns with church leaders, he must balance his desire for making the helping process more effective with appreciating the church's readiness and willingness to provide more extensive community ministry. As with any client system, Randy must decide what to share with church leaders. His responses have the potential for affirming and nurturing the church's spirit to help, but also the potential for discouraging the church from present and future community ministry.

In addition, when given the opportunity to share some of his suggestions, Randy need not limit his responses to conventional social work possibilities. The congregation has more freedom to be creative in developing their ministry than a governmental agency. For instance, the church can decide to make a long-term commitment to help only three or four families, rather than assist every family that comes to the church for help. Likewise, the congregation can decide to target their resources to only one specific

population. If the congregation wants to help only single women with teenagers, or only men recently released from prison, so be it. In other words, the congregation has a great deal of latitude and freedom in deciding how to use its donor and volunteer resources. In fact, approaching service development from traditional governmental and other non-profit models may diminish or eliminate the aspects of care that positively distinguish congregations and other FBOs.

The case also encourages practitioners to explore self-awareness issues. In the beginning, Randy had no desire to serve the church in any capacity. As a social worker, he believed that he participated in ministry each and every day at work. When asked to assist the church leaders, is he obligated to help as a social worker? When he meets with families, is he meeting as a member of the church, a social worker, or both? And what are the implications of how he defines the work? Should he seek payment for his help? Should Randy keep records of his meetings? Is he liable for what happens to the families? If Randy spends his evenings and weekends working with the church, can he be an effective clinician with his clients at work? The case elicits reflection on all of these personal issues as well as the opportunity to critically reflect upon the larger context of Charitable Choice and social work practice within the unique context of religious congregations.

The authors hope the case will encourage and inspire practitioners to view religious congregations as viable settings for developing and delivering social services. Likewise, the authors hope the case will help practitioners develop more informed positions regarding their roles in religious congregations. Although primarily targeted to social work practitioners, students, and educators, the case is also relevant for church leaders, community ministry leaders, and lay people who want to involve their congregations in community ministry.

In conclusion, the words of Sider, Olsen, and Unruh (2002) are especially pertinent:

Today the church faces a historic window of opportunity. This window, however, will not remain open for long unless large numbers of Christians quickly step forward. In five years, if we fail to respond, policy circles will conclude that the turn to faith-based approaches was a failure. They will look elsewhere for solutions. But at present, the larger society is looking to people of faith to demonstrate the power of faith in overcoming society's toughest problems (p. 13). ✕

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APPENDIX:
THE GRACE HOUSE MINISTRY (A)
Michael E. Sherr & Terry A. Wolfer

Randy Samuels, a licensed clinical social worker, moved to Gastonia, North Carolina in March of 2000, after accepting a position at the Mecklenburg County Mental Health Center. Randy and his family were at a park in their new neighborhood when they met a couple who invited them to visit Grace Presbyterian Church. They accepted the invitation and started attending regularly. A few months later, an elder from the church called Randy to ask if he would be willing to meet with a family that came to the church for help. When he agreed, he never imagined he would become so involved in the church's outreach ministry. What began as a one-time event, though, turned into a weekly commitment.

As he invested more time helping the church leaders, he came to believe that the church could be more effective in helping families if they changed how they utilized their resources. After talking to the pastor, Randy was invited to discuss his concerns with other church leaders. During the meeting, Eric Young, one of the church elders asked, "What do you suggest we do?" As the church elders looked on expectantly, Randy pondered how to respond. He had a few suggestions but wasn't sure which ones to share.

Grace Presbyterian Church

Grace Presbyterian Church was a member of the Presbyterian Church in America (PCA), a conservative denomination that historically new congregation's first pastor. As the membership grew, the church started meeting on Sundays in the fellowship hall of a Seventh Day Adventist church. On Christmas Eve of 2001, the church moved into its own building located in an upper middle-class neighborhood. There were currently 200-250 members at Grace. The majority of the church was young, and no one at the church was over the age of 62.

As in any other PCA congregation, the leadership of Grace Presbyterian Church consisted of a core group of elders. The elders were in charge of ensuring that the church maintained its focus on the gospel of Jesus Christ. The elders were also responsible for the daily operations and finances of the church. Only elders had an official vote on the direction of the church. The pastor, associate pastor, and youth minister were all elders. There were deacons who were in charge of carrying out all social outreach

ministry including managing the deacon fund, meeting with church members and other people in the community who needed assistance, and leading the small prayer groups. Once a month, every elder and deacon would meet to discuss church business. The meetings were an official gathering called the Session. Only men could serve as elders or deacons in the PCA denomination.

Randy Samuels

At age 27, Randy Samuels graduated from the MSW program at East Carolina University. He did his advanced year field placement at Pitt County Mental Health Center and was hired full-time in the same position after graduation. As a psychiatric social worker in a partial hospitalization program, Randy developed and facilitated five hours of mental health groups each day. He also performed psychosocial and substance abuse evaluations with new clients, and crisis intervention work with the emergency services unit every third weekend. He stayed at Pitt County Mental Health Center for two years until he completed all of his requirements to be licensed in North Carolina as a clinical social worker (LCSW). He then accepted a position as the lead therapist on an intensive family and child unit at Mecklenburg County Mental Health. He and his family bought a house in Gastonia, where he was living with his wife and two children.

In April 2000, Randy Samuels and his family started attending Grace Presbyterian Church. They found the congregation very welcoming and were invited to participate in several different worship activities. Within a few weeks, his family was participating in weekly small prayer groups, Randy was going to the men's early-morning prayer time, and his wife and children joined the mother's morning out program. In June 2000, after completing the new membership class and being examined by the elders, Randy and his family became members of Grace Presbyterian Church.

Getting Involved

For several months everything was going smoothly. He and his family were getting adjusted to their new home, Randy was enjoying his work, and they were fully connected to the church. In the

process of getting to know other church members, members asked Randy about his occupation. He explained that he was a licensed clinical social worker employed at the Mecklenburg County Mental Health Center.

Up to this point, Randy's involvement at the church was limited to participating in the usual church activities. No one asked him to help out with any of the church functions, nor did he volunteer to serve in any capacity. He was comfortable with how church fit into his life. He used to think to himself, "I'm a social worker; I participate in social ministry each and every day, I don't need to do more on my own time."

Then one evening around 9:00 o'clock, Kenneth Baum, a church elder, called the Samuel's house to speak with Randy. Randy's wife, Lynn, answered the phone. "Hello?"

"Hi, Lynn, this is Kenneth Baum from Grace."

"Oh, hi, Kenneth."

"Lynn, I was wondering if I could speak with Randy for a minute."

"Sure, I'll go get him."

After a few moments Randy picked up the phone. "Hey, Kenneth, how are you brother?"

"I'm fine, Randy. I am sorry to bother you so late in the evening."

"That's okay, what can I do for you?"

"Randy, the pastor thought you might be able to help us with something."

"Sure, what is it?"

"Well, you see, a woman came to the church this morning asking for help. Apparently she and her two children have been living out of their car for the past few weeks. We put them up at a local motel for the weekend, but we're not sure what to do next. Randy, the pastor and I were wondering if you would be willing to meet with the woman after church on Sunday. We told her that you were a social worker and she was willing to talk with you."

"Sure, I don't know how much help I will be, but I can at least help you figure out what to do next."

"Great, I'll tell Pastor Edwards and we'll schedule a meeting right after service on Sunday."

“Okay, I’ll see you then.”

When Randy hung up the phone Lynn asked, “What did Kenneth want?”

“They want me to meet with a woman they’re trying to help.”

“Oh, I think that’s great.”

“Yeah, I don’t mind helping out, I just don’t want to get too involved.”

“Well, it’s only one meeting; besides I think it will be good for you to help out.”

That Sunday, Randy met with Kenneth, Pastor Steve Edwards, and the woman. Within an hour Randy helped the woman identify and prioritize her needs, and facilitated a discussion between Kenneth, the pastor, and the woman to determine specific steps the church could take to help. After the meeting the pastor shared with Randy how impressed he was with how Randy handled the whole situation.

Is There a Better Way?

Over the next few weeks the pastor and other church leaders began asking Randy to help more frequently. As he continued to volunteer his time to meet with families, he was beginning to observe some problems in the church’s helping process. One evening after meeting with another family, Randy and the pastor were walking out to their cars when Randy asked,

“Steve, can I talk with you for a minute?”

“Sure, Randy.”

“Steve, I have some concerns about how the church uses the deacon fund. I think its great that Grace wants to be a place that people in need feel welcome. And I am honored that you and the elders want me to help. But, it seems to me the church gives out money from the deacon fund too sporadically. It also seems that Grace is trying to do everything for everyone.”

“Well, Randy, the deacon fund is the church’s main source of outreach ministry. We use it to help families in a way that may lead them to being receptive to hearing the Gospel. It’s meant to be used for such purposes and we don’t want to be stingy.”

“I understand what you’re saying, Steve. But lately, every time the church tries to help, the church discovers that the needs of these families are more complex then they initially appear. In my

opinion the type of help the church provides is basically a temporary band-aid to deal with a symptom of a greater problem.”

“What’s that?”

“Poverty. And it takes more than paying someone’s utility bill or buying a week’s worth of groceries to help these families get on their feet.”

“Brother, tell me about it. Sometimes we get frustrated and feel helpless. But I’ll tell you, Randy, Grace is a church for the nonbeliever and especially those in need. Besides, as I often say at the leadership meetings, I like doing something better than doing nothing.”

“Steve, a fundamental principle that I learned at school, and one I experience as a social worker, is that there are always unlimited needs and limited resources. And that is why, until Christ returns, I will always have a job. As a congregation, I think it is important for Grace to think about how they can provide the most effective help, given our limited resources. Otherwise, Grace will continue to provide superficial help, without really making a difference.”

“You have a point, Randy. Listen, the Session is meeting Monday, January 8th. Why don’t you plan to attend so we can talk about this with the entire leadership team?”

“Okay, I’ll be there.”

“Great. The Session meets at 7:00 o’clock in the fellowship hall next to the staff offices.”

Addressing the Session

When Randy arrived, the elders and deacons were already sitting around four tables arranged to form a large rectangle. The only open seats were at the end of the tables closest to the doorway. Randy sat down at the edge of the table next to one of the deacons. Although everyone was friendly and the atmosphere appeared informal, he felt a little insecure sitting among all of these church leaders.

Steve started the meeting by welcoming everyone to the meeting. He added, “Randy, we wanted to thank you for coming tonight.”

Randy replied, “Well, I am both honored and humbled to be here. To be honest, I am a little bit nervous.”

“Well, Randy, I approach each Session meeting with a reverent fear, recognizing the magnitude of our responsibility as leaders of this congregation. We spend a lot of time praying for God’s will for this congregation. We also get updates from each of the small prayer group leaders and talk about many of the church’s ministries and activities. Sometimes we’re here past 11:00 o’clock. You’ll be first on the agenda so you can get home to your family. ”

Looking over to the left side of the room, the pastor looked at one of the deacons and asked, “Matt, would you open us up in prayer?”

Matt replied, “Of course,” and everyone in the room bowed their heads and closed their eyes as Matt prayed. When he finished, Jeff Hatling, the deacon who managed the deacon fund, quickly turned to Randy.

“Randy, the pastor called me the other evening and filled me in on your conversation with him. Can you briefly tell the rest of the Session some of your concerns?”

Randy paused for a moment to gather his thoughts. “Well, when I started helping some of you with different families, I thought that it was great that the church even attempted to help such families. I thought to myself that Grace was a special place that really wanted to share the Gospel with everyone, no matter what his or her circumstances. But the more I became involved, the more I began to notice how the church begins a helping relationship with families, only to later find out that their issues are more complex than they initially appeared. As a result, the church sort of runs out of steam and gets frustrated helping these families. I am also concerned that Grace ends up unintentionally reinforcing a mistrust that many of these families may have for the church.”

“What do you mean, Randy?” asked the pastor.

“In social work, when families have bad experiences dealing with other social workers, it makes it more difficult to establish a helping relationship with them. I can’t even begin to tell you how many families I work with that are so mistrusting because of an experience they had with a therapist or social worker that ended poorly. I always have to be careful that in the process of developing a relationship with a family, I don’t perpetuate the same pattern by promising too much, and not being able to deliver. In my opinion, the same holds true for the church. We don’t want to offer help and refuge to families, tell

them about Christ's unconditional love, only to turn them away when we realize that a family's issues may require more time and money than we originally expected."

After what seemed to Randy like a long silence, Eric Young, one of the elders turned to Randy. "You know, we would love to be able to provide the kind of help these families need, but we just don't have the resources. We also don't want to turn anyone away. What do you suggest we do?"

Randy wondered what to say. He knew that PCA churches normally don't get involved in social service programs. However, he sensed that Grace was really committed to helping people. He also remembered Steve's sermons about the church being a place of refuge for the lost and downtrodden. Randy had a few suggestions but he wasn't sure which ones to share or where to begin.✂

Development of this decision case was supported in part by the North American Association of Christians in Social Work. It was prepared solely to provide material for class discussion and not to suggest either effective or ineffective handling of the situation depicted. While based on field research regarding an actual situation, names and certain facts may have been disguised to protect confidentiality. The authors wish to thank the case reporter for his cooperation in making this account available for the benefit of social work students and practitioners.

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