



“Catholic Social Teaching and Social Justice”

Thank you for taking part in this home study text-based course. The purpose of this course is to teach the principles of Catholic Social Teaching (CST), and applying those concepts to the field of Social Work. It describes the delivery of services while working from a CST perspective, as well as different populations that this type of delivery might specifically target. Both methods and advantages of spiritually-informed value sets are described throughout the context of the course, in addition to the history and effectiveness of CST based practice.

The following text-based course contains four separate articles regarding Catholic Social Teaching and its application in the practice of Social Work. The articles are as follows: *Catholic Social Teaching and the Ethics of Care* by Robert Constable, *Social Work Practice with People with Disabilities: Enhancing Practice through Catholic School Teaching* by Lynn Milgram Mayer, *Using Catholic School Teaching to Build Social Capital for Agency Mission and Workforce Development in Faith-Based Social Services and Beyond* by Stephen Edward McMillin, and *“To All People of Good Will”: Catholic Social Teaching, Natural Law, and Racial Disproportionality in Social Work* by Kathleen Belanger and Owen M. Smith. After completing this course, participants will be able to:

- List the six principles of Catholic Social Teaching described in the first text.
- Describe the correlation between Catholic Social Teaching and Social Work Practice
- Describe the implications of Catholic Social Teaching on direct practice with individuals.
- Explain the meaning of Natural Law Ethical Theory.

Upon completing the reading section of this course, please take the 15 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 a training evaluation, you will receive your CE certificate verifying that you have earned 2 continuing education contact hours approved by the Association of Social Work Boards.

Thank you again for your interest in this course, and for your interest in this influential figure in the social work field.

Catholic Social Teaching and the Ethics of Care

Robert Constable

The article outlines Catholic Social Teaching (CST) in relation to social work, integrating two ethics in social work, an ethics of rights and obligations and an ethics of care. Using CST concepts of moral agency, both are integrated and applied to issues of suffering, ethical conflicts, and to relational components of the practice of social work.

...and seeing him was moved with compassion. And he went up to him and bound up his wounds, pouring on oil and wine (Luke 10, 33-34).

Social work has to do with human needs and human rights, experienced through the medium of caring human relationships. Persons are such that they need to grow within caring relationships and form them, if they (and society itself) would become fully human. Social relationships are inherently complex and subject to breakdown. Relationships and membership (Constable, 1989) are the grist of social work, inherently involve an understanding of people's personal and social tasks, expected in relational and social justice in families (Constable & Lee, 2004) and in civil society. These tasks are central to the development of both social structures and individual persons. Together with the relational tasks of family membership, there are social tasks (e.g. development and learning) necessary for human flourishing carried out in civil society with varied systems, such as education. Social work practitioners often mediate these systems' relationships with their clientele. Work with persons, families, and societal systems is central to the mission of social work.

The Judeo-Christian religious tradition has long recognized the human hunger for relational and social justice. From this living source Catholic Social Teaching (CST) has developed and refined itself through several millennia of writing and application to particular cases. It continues to develop, in fact has accelerated its development, in response to modern and now postmodern conditions. Other faith traditions, drawing from similar sources, will not find CST surprising. At this point, despite doctrinal differences, one can safely assume a more general tradition of social thought, drawing from Judaic and Christian sources. In postmodern societies the fault lines become less denominational. They are more a matter of religious orthodoxy itself, which challenges ideologies of individualism without obligation, which destroy social understandings and meanings beyond the boundaries of one's self, or one's own advantage.

Many social work practitioners, silent followers of Christ, come to social work fearful of their differences from a prevailing ethic, and unaware of common points of agreement with others. Religious belief, conscience, unchanging commitments and beliefs would appear to be quietly proscribed, to the detriment and risk of the very social worlds most people, most clients, inhabit and the very obligations they try to assume. In this situation social work practice becomes abstracted, thin, procedural, and geared to strangers, not friends; much of the heart of practice goes underground. When the caring, personal relationship, an underlying condition of helping, is lost, practice loses much of its effectiveness as well.

This paper briefly outlines and discusses some of the great tradition of Judeo-Christian social thought with implications for the connections of two parallel ethics—an ethics of rights and obligations and an ethics of care. These two ethics need to be reconciled, not only for social workers, but for any profession that inevitably uses a relationship as its medium, for example those in healing and health care or those in education. The hope is that extensions of this discussion may eventually contribute to the naturalizing and thickening of our understanding of practice. Without such a framework, based on a deeper understanding of human social functioning as natural, consequential, and normed and clients as agents, social work practice becomes thin and simply procedural. Such value and ethical components of practice should no longer be seen as “personal baggage.” Practice is more than a methodology of getting things done. We need to understand more deeply what a caring relationship is and how professionals could learn to care.

Six Principles of Catholic Social Teaching

A good frame of reference for this general task can be developed using the *Compendium of the Social Doctrine of the Church* (2004), and recent papal encyclicals as sources. Both bodies of teaching summarize millennia of experience, case applications, and teaching. They are particularly geared to modern and postmodern beliefs and conditions. One finds remarkable consistency in all of this.

In this article outlining Catholic Social Teaching (CST) in relation to social work, our frame of reference results in six principles. Their application to social work is necessarily condensed, requiring further discussion to fully explicate the many implications of the body of CST for social work and other caring professions. It is important to illustrate the logic of the body of CST as a whole, seeing the inter-relations of persons, families, and civil society, without fragmenting a necessary whole into reactive ideologies, whether of the individual or ideologies of society.

1. The Centrality of Persons (and Families)

The good of each person, made in the *imago Dei*, in God's image with intellect and will, is of overriding importance to the common good. The person is the source, the center, and the purpose of all economic and social life (*Gaudium et Spes*, 1965). Each person is by nature social, free under God's law, capable of knowing and acting in accordance with the good, but with wounded potential. CST provides an optimistic picture of human potential, tempered by the reality of our wounded condition. In human nature there is an inherent attraction, a resonance, an inherent *connatural*ity, for what is truly good (*Veritatis Splendor*, 64, p. 81) and some inherent understanding of "right" relationships, even if one violates this understanding. Every person has an ability to seek the good. However, the good is not always self-evident, and so there is a need for clear criteria to form one's conscience. One's conscience is the proximate, but not absolute, norm of morality. Conscience formation in a broken and confused world demands that it become "the object of a continuous conversion to what is true and good" (*Veritatis Splendor*, 64, p. 81).

Families are the foundation of civil society. Family is an "ecclesia domestica" (*Catechism*, number 1655-57), thus the core of the Church as well. Civil society, the workplace, and the community are meant to serve the common good of persons and families (Messner, 1949; Charles, 1999; Pontifical Council Justice and Peace, *Compendium*, 2004, Martin, 2006). In this context the deficiencies of every social organization in relation to personal/familial needs and the common good give social work a mission (Tillich, 1963). These deficiencies, part of our wounded social and personal condition, challenge social workers to seek justice both in society and in human relationships. This is a twofold mission, embracing social institutional arrangements and relational justice. Thus. Social workers work with persons, family and institutional arrangements, assisting each to develop fully in relation to the others.

2. The Obligation in Natural Justice of All Persons to Care for One Another

There is rooted in Christian social thought the primary principle of *solidarity* (Pontifical Council for Justice and Peace, *Compendium*, 2004, p. 193), the obligation of every human being to care for the good (not always the same as the felt needs) of the other. Solidarity precedes individual rights and forms the foundation for them. It is the necessary common ground for a conversation with the concerns and casualties of the post-modern world (Martino, 2006a). The obligation of solidarity is placed on every person and *communio*. Unless (every person) relates himself to others, he can neither live nor develop his particular potential (*Gaudium et Spes*, 1966, 1034). This principle forms the basis for social work and the social services as well.

Love is the personal aspect of solidarity, often confused for its many caricatures. Love is neither a commodity nor simply a feeling, but a relational good. Failing the relational context of love, we would have a love that lacks boundaries and thus respects neither the self nor the other. There would be a love that weakens the other, giving to the other without any care for the appropriateness of the gift or for the effect of the gift on the other's full development as a person. There would be a love, whose exclusivity becomes a type of ownership of the other. To counter the degeneration of love into its caricatures, CST has developed precise concepts of higher-level love, *agape* and *caritas*, the love of sharing with, not using, the other (*Deus Caritas Est*, 6, 17, 18), and *miser cordia*, the love which reaches out to suffering to elevate. Here is the "creative and merciful love," found in reciprocal relationships between persons (*Dives in Misericordiae*, 14).

3. The Christian Anthropology of the Person

Social teaching and practice is founded on the worth, dignity, and full realization of the human person *sub specie aeternitatis*, that is, in relation to the person's full dignity as *imago Dei* whose goal is to be with God. The concept of the person is a moral and relational concept, running counter both to individualism and to the utilitarian concept that a person is primarily useful for some end outside of him or herself. And so, every person's existence or welfare is a matter of universal moral obligation. Unique and unrepeatable, every person is a being whose nature is to be open to relationships with others in society (*Compendium*, 61). Through the redemption of Christ each person is "newly created" (*Redemptor Hominis*, p. 10), not simply as an individual (a concept which emphasizes relational separateness), but as a *person*, a subject capable of knowing and loving the good, potentially an agent of his or her own development through the capacity to reflect and to act. Persons can gradually discover and become what they are. The key is to discover *who* one is through action with others, even in the quiet, reflective conversation of practice. Persons have capacity to transcend their conditions through such action, through giving to others in relationships, through love (Wojtyla, 1981). They are "alienated" from themselves and from others if they cannot do this. A society is alienated if its forms of social organization, production, and consumption make it more difficult to offer this gift of self and to establish this solidarity between people (*Centesimus Annus*, 844-845, quoted in *Compendium*, 47). And so, human action can be nothing other than personal and social at the same time. Illness, suffering, and addictions often shut down a person's ability to act (*agency*), together with his or her ability to receive or give support to others (*communio*). Social workers assist people to recover these capacities (Ruddy & McDaniel, 2003). They also work to change social institutions and public policies to develop milieu where persons may flourish in the fullest sense.

The *personalistic norm* contrasts with any use of utility as a primary measure of human worth and dignity or social support. In its negative form, the norm states that the person is the kind of good, which cannot be treated as an object of use and, as such, the means to an end (Wojtyla, 1981, 40-41). In its positive form the personalistic norm confirms that every person is a good toward which the only proper and adequate attitude is love (Wojtyla, 1981, 41).

4. The Christian Anthropology of the Family

The concept of personhood is an inherently social and relational concept. The person becomes a person through other persons. He or she grows, develops, and acts in and in reference to a living, social environment, a world of *intersubjectivity*, indeed internalizes the relational framework and expectations of that world through relations and membership in the social institution of the family and the institutions, groupings, and citizenship within the broader community. The intersubjective world of development is first and continually experienced in the family, a fact that gives the family a moral significance as an agent of its own development somewhat parallel to the persons who share membership in it. The family is the basic cell of society, not to be colonized by economic or political systems or by individual preferences. Intended as the primary system of social caring, it can be constructed by its members according to this built-in resonance with the good. Family is inherently a community of life, love, and educational growth of people and for people (Martino, 2006b). When family, "the first and fundamental school of social living (*Familiaris Consortio*, p. 37)" cares for its members, persons in families can then learn to care for others in society. Social institutions, such as schools, share and support the socializing mission of the family, but in a subordinate way. In his *Letter to Families* (1994), John Paul II notes, "...it is not an exaggeration to reaffirm that the life of nations, of states, and of international organizations 'passes' through the family... (Indeed) through the family passes the primary current of the civilization of love, which finds therein its social foundations" (*Letter to Families*, 39-43).

Given the nature and mission of the family and the principle of subsidiary function (discussed below), the family, not the state, is the basic unit of assistance to its members. A family policy must be the basis and driving force of all social policies (*Letter to Families*, 143). A charter of family rights, developed in *Familiaris Consortio* (p.72), enunciates rights of every human being to found and support a family, to educate children, to experience a stable bond and institution of marriage, to profess and propagate one's faith, to obtain physical, social political and economic security, to access housing, and to emigrate in search of a better life. This comes close to developing a model family policy, but remains general.

5. The Principle of Subsidiary Function

CST can only provide broad guidelines for the development of social policies appropriate to various possible secular societies. Formulating particular solutions for a given society is the proper responsibility of members of the secular sphere. Built into this theme is an important general principle, which underlies everything: the *Principle of Subsidiary Function*, otherwise called *subsidiarity*. According to this principle no social authority at a higher level of authority has the right to interfere with activities for individual and/or social ends at a lesser level so long as those responsible for those ends are able and willing to cope with them (Messner, 1949). Or in a positive sense the appropriate self-organization of the smaller *communio* is both right and necessary. And so the broader *communio* has the obligation to provide help—support, promotion and development—to the smaller *communio* (*Compendium*, 186). A simple and obvious example of this relation is that of family and state. How may the larger community interface

with families, reinforcing their functions, rather than supplanting or undermining them? In the same vein, other associations, such as schools, labor unions, social agencies, and professional associations, need to carry out their functions without the larger agencies of society inappropriately interfering. The principle prescribes a harmonious relationship. It places rights and responsibilities at each level, and prevents one from taking over the proper sphere of the other. Social workers work right in the middle of these social systems, whether schools, health care, or welfare systems. They seek synergy, that the energies of each be used for the betterment of all, but particularly of their members.

The first reason for the principle of subsidiary function is that persons (and families) are prior to the state. For the state to take over what the person or family can accomplish for itself is a violation of the autonomy of the person and personal rights. The purpose of the state is to supplement, not to supplant, the person and by extension the family, to assist in each person's growth, not to stunt it by undue restrictions. The closer decision making is to the problem to be solved, the more effective and reliable it will be. However in some cases the protection of persons and the common good may demand intervention, which "must not continue any longer than it is absolutely necessary." This takes place where there is "serious social imbalance or injustice" in the exceptional circumstance when the problem cannot be resolved at the appropriate level, where "only the intervention of the public authority can create conditions of greater equality, justice and peace"(Compendium, 188). These extraordinary circumstances demand public intervention in a way that respects rights, subsidiary functions and tasks. Using the example of child welfare practice, the social work mediating function, reinforced by public policy through the court, may have the best chance to work out a necessary and complex balance between personal rights, responsibilities and relational tasks (including removal and placement if necessary), where children's rights are at stake. The principle of subsidiary function makes skilled intervention necessary.

6. The Respect for Human Life in Its Fullness at All Stages of Development

John Finnis (2004, p. 17) contends that it is a "claim of our civilization that human beings are fundamentally equal in dignity and basic worth and that their life—their very reality as persons in this world—is a basic and true good even when immature or smitten by disease or disability." Yet the inconsistent and qualified observance of this claim points out an ambivalent struggle between rhetoric and reality, between social and individual constructions of rights. Where is the boundary of what makes us human? Would air in the lungs qualify one for human membership? The contrast is stark. A culture, which does not respect *every* form and stage of human life is a culture of impoverishment and death (*Evangelium Vitae*, p. 43). It becomes a culture, which denies solidarity, a war of the powerful against the weak. Any life, which would require greater acceptance, love, and care, is often considered useless, or held to be an intolerable burden, and therefore rejected in one way or another. A person who, because of illness, handicap or, more simply, just by existing, compromises the well being or life style of those who are more favored would tend to be looked upon as an enemy to be resisted or even eliminated. In this way a kind of conspiracy against life is unleashed (*Evangelium Vitae*, p. 27). Intrapersonal and interpersonal relations in a broad sense would become seriously impoverished and qualified. The criterion of personal dignity is replaced by the criterion of efficiency, functionality, and usefulness. Others are considered, not for what they are, but for what they have, do, and produce. This is the supremacy of the strong over the weak (*Evangelium Vitae*, p. 43), an impoverishment of human dignity and productive human relationships.

Life is an indivisible good to be respected and cherished. The first principle of any "civilization of love" is that "we ought to show care for all life and the life of everyone" at every stage, in every situation (*Evangelium Vitae*, p. 13). We ourselves as members of civil society and professionals must first be engaged in promoting human flourishing of everyone, building societal structures, particularly families, which respect, protect and promote the dignity and best development of every human being.

Sources of Catholic Social Teaching and Significance for Social Work Practice

What are the sources of CST? Scripture clearly recognizes the duty of every person to share resources with others, to take care of the widow and orphan, to take care of all those placed in our path, to look for and to have compassion for the stranger in need as one encounters and cares for Christ in the distressing disguise of the poor, the constant dictum of Mother Teresa of Calcutta. Based on the light of faith, moral theology is constructed to assist one's conscience in its deliberation. Over thousands of years CST continues to inspire countless institutional and personal works. But for many the postmodern condition is not one of faith. Lacking faith, the moral grounds and the map of our obligations to care for the other can be found in an understanding of what are goods for our human nature, adequately considered. Ethics, grounded in this understanding of what really completes human nature in its dignity provides a basis for the deliberations of conscience, grounded in philosophical realism, rather than positivism or Kantian dualism.

In the absence of revelation CST assumes that there still remains in every person an inchoate, even suppressed, understanding of who we are, of what is good and right for our shared human nature (even if one should violate that

good). In the absence of faith-based teaching, a “natural law” understanding of what is “right,” of what one ought to do, would inform the conscience and provide a realistic, non-arbitrary basis for one’s deliberations of conscience.² Natural law is based on a constant picture of human nature, wounded as it is, and a deep reflection on what goods would really fulfill it. In this sense CST speaks for a non-arbitrary morality, based on the discernment of human good. Such may be even more difficult to achieve under postmodern conditions when the normal ties of one person to the other and the collective experience of tradition are weakened. An ideology of radical subjectivism emerges where moral judgments and moral criteria would become essentially arbitrary, reflecting individualism, rather than an inherent understanding of the complex connections, rights and obligations our membership with others entails. From the standpoint of CST, radical subjectivism is a deformity, preventing a person from making any appropriate moral judgment. Morality becomes empty and arbitrary, merely reflecting power (or paternalism). Such may be the postmodern perception of morality. The resulting social arrangements would become chaotic and inherently unjust.

And this of course affects social work practice. Social workers are necessarily engaged with the complexities of clients, relational systems, and social systems. Social workers assist people to sort out and discern the effects on themselves and others of their contemplated actions. Practice simply cannot be reduced merely into procedural and/or legal compliance or into an abstracted, evidence-based methodology with the assumption that there is nothing more to it. Skills, techniques, or procedures, a manualized practice, would be insufficient to fully encompass it. Nor would the client’s discernment and resolution of a problem necessarily be the same as that of the social worker. Social workers work to achieve personal, relational, and social justice at the same time. Inherent in the social worker’s role, is the challenge to develop a concept of justice that goes beyond self-interest. A coherent understanding of justice is essential for social workers. Yet, on what bracing morality, on what picture of the human good should this justice be based? And how may it allow for the differences inherent in a conversation of two or more moral agents?

For all of these reasons, practice requires that we develop a moral maturity in the understanding of what we do and why we do it. Or in the end we would burn out. We would cease doing social work because it has become too stressful and too conflictual. Even if we remained, the work would become a ritual. A reflexive understanding of the nature of practice itself needs to bring the heart, the mind, and the conscience of the social worker to that “complex maturity in self-giving to which human freedom is called” (*Veritatis Splendor*, 17, p.30).

For the Christian, this moral maturity demands taking responsibility for one’s own “formation of the heart.” Benedict XVI alludes to this in his discussion of our work.

Those who work...must be distinguished by the fact that they do not merely meet the needs of the moment, but they dedicate themselves to others with heartfelt concern, enabling them to experience the richness of their humanity. Consequently, in addition to their necessary professional training, these charity workers need a “formation of the heart”: they need to be led to that encounter with God in Christ, which awakens their love and opens their spirits to others. As a result, love of neighbor will no longer be for them a commandment imposed, so to speak, from without, but a consequence deriving from their faith, a faith which becomes active through love (cf. Gal 5:6) (*Deus Caritas Est*, 31(a)).

Justice and caring. How do we integrate these as social workers when they seem so different? And how do we form our own hearts to see the meaning of what we do?

The Ethics of Care

Care takes place as a mutual, undetermined (thus not totally predictable), and potentially healing relationship between persons. The presence of at least two free moral agents in a mutual, purposeful, socially constructed relationship demands another ethical language appropriate to persons in relation. The problem is that in a secular, utilitarian, procedural, rights-based world of relative strangers, caring remains for the most part poorly understood and undeveloped. Since the time of Kant, the major focus of secular ethics has been on abstracted considerations of rights, obligations, principled thinking (Kohlberg, 1984) and individual moral agents. Such language of rights and obligations is fundamental but inadequate for social work or for other caring professions. To explain practice we would have to explore what an ethics of care might be, and then how it might be related to rights and obligations. Such would “thicken” our understanding of what happens in practice.

The ethics of care both builds upon and goes beyond the ethics of rights and obligations. Caring means that other persons matter, that what happens makes a difference, not only to the person directly affected, but also to others who care (Imre, 1982, p.114), that the needs of others must be a part of our decisions and choices. Persons by their natures have rights to be cared for. With membership in the human condition there comes an obligation for each to care for the other and to create caring social institutions, such as family. A language of caring, directed and adapted to persons, is a language of compassion. It has the same Latin root as *Caritas* (Greek: *agape*; Hebrew:

gemelech chesed (Siporin, 1972)), and Charity. Paul Tillich (1962), coming out of the personal experience of working with social workers in post-World War II refugee resettlement, saw the energy and soul of social work as a personal love, which reaches out in solidarity to elevate suffering (Tillich, 1962), *miser cordia* in CST.

Much has been written about an ethics of care over the past several decades and in contexts different from CST. Warren Reich (1995), a medical ethicist, discusses over 2000 years of care of souls, *cura animarum*, throughout the ages by medical, psychological and religious healers. According to Reich, care is a precondition for the whole moral life, a vision of the capacity to care or to be concerned about things, persons, a whole life course, a society, one's self (p. 329). Psychologist Carol Gilligan (1982), reacting to Kohlberg, differentiated ethics of care from ethics of rights and obligations—a justice view of morality from a care view of morality. The care view of morality would say that we can and should put the interests of those who are close to us above the interests of complete strangers, and that we should cultivate our natural capacity to care for others and for ourselves. Developing from some of Gilligan's thought, Nel Noddings (1984), an educator, believes that caring should be the foundation for ethical decision making. Ethical caring arises out of natural caring. It is a state of being in relation, "where we meet the other morally" (1984, p. 4). It is characterized by receptivity, receptiveness, and engrossment. We want to be *moral* in order to remain in the caring relation and to enhance the ideal of ourselves as one-caring (1984, p. 5). Her powerful phenomenological analysis of ethical caring is differentiated from what she sees as a Kantian law and principle orientation. "The approach from law and principle is not the approach of the mother. It is the approach of the detached one, the father" (1984, p. 2). This article cannot really do justice to this rich vein of thought, except to see it running in parallel, perhaps ultimately contributing its profound phenomenological analysis to a deepened understanding that caring and being cared for is essential to any understanding of both nature and justice. Because of its relational and healing qualities, an ethics of care is inherently more complex than an ethics of rights and obligations.

On the other hand an ethics of care cannot contradict rights/obligations without undermining its own foundations. Tristram Englehardt (2000) implicitly takes up Noddings' critique when he suggests that bioethics has to date developed "procedural moral framework(s) grounded in permission as the basis for a bioethics that can encompass moral strangers" (p. 131). In contrast to the "sparse, secular morality that can bind moral strangers when they are deaf to God," he would embrace the "thick morality of moral friends" (Englehardt, 2000, xvi).³ In response Englehardt develops a sort of moral theology applied to bioethics, based on Orthodox Christianity, where the Christian orientation provides the thick morality of friendship. It is very compatible with CST.

Social work is certainly not friendship in a conventional sense, but even in its necessary boundaries, its removal, its difference, and its discipline, there is friendship in a deeper sense. Indeed the boundaries allow the friendship to develop. This paradoxical reconciliation of professionalism, justice (making relationships "right") and the caring of friendship may give us a clue to the reconciliation of these two ethics.

Caring and Religious Orientations

The history of an ethic of care (*cura*) may be as old as humankind, perhaps to a cave dweller who had lived far longer than his disability would allow in a hunting gathering society. The Hebrew people pictured *Chesed* (Siporin, 1972, p. 70) as the loving kindness and faithfulness of God, the best of mothers with a weaned child, a model of relations with others. *Tsedakah*, relational justice of membership and care for the individual situations of others in need (Nussbaum, 1983), is a core concept of Talmudic teaching. In each *shtetl*, each small Eastern European Jewish community, with membership (not just citizenship) in the community would come obligations to care for others. The Talmud outlined ten basic areas of human need and obligation: food, shelter, clothing, health care, a dowry and other support for the newly-wed, provisions for the traveler, ransom from captivity, support in old age, burial needs, and education (Nussbaum, 1983). Both personally and socially oriented, the Talmud based its definition of need on what the recipient was accustomed to in the past. It saw the situation from the subjectivity of the other.

And even if he was accustomed to ride on a horse when he was rich and have a servant run before him and now he is poor, buy him a horse and servant and therefore (to) each according to what he needs... (Yoreh Deah 250:1, cf 249; 1 in Nussbaum, 1983).

Talmudic precepts dictated, for example, that banquets had to be shared with the hungry, that the needy had to be cared for according to their previous life style, that there were special obligations to widows and orphans, parents, and the aging. This powerful and overriding tradition is still evident in Jewish social welfare today (Nussbaum, 1983).

An ethic of care has long been a part of Christian social thought. Core values, *caritas*, *agape*, *miser cordia*, the *preferential option* for sick, poor, or needy persons, denote normed relationships, rights, and obligations due others in justice. These must be more than convenient abstractions. Love goes beyond political entitlement and economic rationality (both offspring of the French Enlightenment). The love, which reaches out to misery and suffering to

elevate (Tillich, 1962) is a relational gift. Indeed the rights, obligations, and concerns of an ethic of care come with membership, whether in a family or other group. We are not simply individuals, but couples, parents of a family, and members of a group or community (Falck, 1988). The social worker helps others to carry out and to receive this care with and from each other as a necessary aspect of their memberships.

A person coping with sickness demands care. The *Charter for Health Care Workers* (1995) goes far beyond technical principles to define justice for the sick person and the consequent duties of those called to be ministers of health. A sick person places a relational claim on our humanity:

the sick person is never merely a clinical case—an anonymous individual on whom to apply the fruit of...knowledge—but always a “sick person” towards whom he shows a sincere attitude of “sympathy” in the etymological sense of the term (John Paul II, 1982).

This [attitude] requires love: availability, attention, understanding, sharing, benevolence, patience, dialogue. Scientific and professional expertise is not enough; what is required is personal empathy with the concrete situations of each patient. (John Paul II, 1984)...

This means that health care is a ministerial instrument of God’s outpouring love for the suffering person; and, at the same time, it is an act of love of God, shown in the loving care for the person. For the Christian it is an actualized continuation of the healing love of Christ, who “went about doing good and healing everyone (Acts 10:38)” (Pontifical Council for Pastoral Assistance, *Charter*, 1995, pp. 18, 19).

The commonly accepted values of social work reflect a professional ethic of care (Reamer, 1993; Siporin, 1972), when ordinary care fails or is conflicted, either in the family or in the community. Social workers assist people to develop relationships that respect each other as persons. After all, care is due in justice to persons. In any case the social worker helps persons, not simply as individuals, but as *members*, to work out their relationships with other persons and with society. Membership is a social status, involving respect for the needs of others, reciprocity, rules governing access, and permanence of a bond, obligation, conceived duty, desire, and self-definition (Falck, 1988). The social worker works with persons’ search for workable relationships, through formation of a helping relationship, itself with implicit values and norms. This relationship becomes a teaching tool to learn to value one’s self and others, who are in relation to us. Working in this “archetypical fellowship bond” (Halmos, 1966, p. 106) under the mask of scientific neutrality, the social worker is a coach and a moral agent, helping clients (systems) to form workable relations with each other, to become themselves responsible agents and actors in a relational field.

Suffering: Language and Compassion

All of this is challenged by suffering. Bioethicist, Warren Reich (1989), sees compassion as a rational and creative love directed to the person suffering. It is rational because it is the appropriate response to persons who suffer. As such, it is not simply an individual virtue, but participation in a relationship. Suffering persons are often alienated from compassion for themselves, as well as for others. Suffering is unexpected and seems unjust, but the suffering person is even less ready to receive compassion. Responses to suffering can be passivity, a need for control, or frantic, disengaged activity. In any case the suffering person (system) may be cut off, mute, silent, without language or communication, and resisting compassion—the legendary client we have all learned to “begin” with.

The suffering of one imposes obligations on the other. The helper is also initially mute in the face of such suffering. How can there be words to connect with the suffering person and to what suffering does to him or her? The first words of the suffering person are often a complaint, the perception of injustice. Listening to the complaint and validating it for what it says, helpers learn and teach another language—one of relationship and of compassion. Both the person who helps and the person who suffers find together a new language and a new identity no longer colonized by suffering (Reich, 1989). John Paul II (1984), speaking from his personal experience, discovered in suffering a new dimension of his entire life, a conversion to a new person, “For suffering cannot be *transformed* and changed by a grace from outside, but *from within*” (*Salvifici Doloris*, 26, italics from original). To do this however the social worker must also be ready to learn from the other, to become a person who is fully human both to himself/herself and to others, a *Mensch*, alive to every aspect of his or her *Menschlichkeit* and that of others. Becoming a *Mensch* requires that we learn from and love our clients, our family and friends, especially those very different from our preconceptions and choices, each in an appropriate way. The task entails a constant formation of the heart.

Becoming Moral Agents

Free moral agency involves each person’s capacity for voluntary and purposeful actions, and recognition that such actions influence the well-being or freedom of others (Mahowald, 1995, p. 1939). Such moral agency may be a

rare commodity to the extent that people, including social workers, often live their lives reacting to external factors, rather than becoming able to respond with mind and heart. One has to learn not to judge, to direct or to use others. Steven Stosny (1995, p. 9) develops the concept of moral agency in his work with abusers. He finds that abusers lack a good awareness of either self or others, something Stosny will work at changing. According to him, moral agency requires: 1) enhanced sensitivity to the inner experience of self and 2) enhanced sensitivity to the experience of other people, both learned through every person's systematic discovery and identification of compassion for self and others as a core value. For example, where there is spouse abuse, Stosny (1995, 2006) sees as a key goal of practice that the abuser, morally dulled by the experience of abusing another person, learns to become a compassionate moral agent. Such growth is a prerequisite for living with others.

In a broader sense, the ethics of care cannot be an ethics of paternalism or control. It does not judge others. A client's choices are his or her own, not fully subject to influence, and not fully predictable. A breach of these boundaries (the eternal problem of the beginning helper) would create serious problems for the client(s) and for the helper. Client self-determination (Biestek, 1957) recognizes the possibility of each person's capacity for action and responsibility for his or her actions and outcomes. In this process the social worker helps persons to act, gradually to become free moral agents who can heal themselves and then help others to heal. Of course, the social worker must also learn to become a free moral agent if he or she is to assist others in this. This is another part of an extensive formation of the heart.

The Practice of Social Work

For a follower of Christ, the complex vision of society encompasses persons, families, and social institutions in ascending circles, each gradually and over time learning to become an agent for one's own development in relation to a common good. Persons accomplish this through membership in families. Families are themselves incomplete without broader membership in ascending, but independent and differentiated, circles. Family takes part in the work system, the welfare system, the education system, the health system, the justice system, and so on. Family works with systems of care that substitute for or assist family functions in the care of others, particularly vulnerable people, children and the elderly.

Help is a personal relationship, defined uniquely by its unique subjects. The basic social work paradigm is relational, that is, it involves two (or more) independent moral agents in a relationship, framed by values and geared toward one assisting the other(s) to function better. In the dynamics of a helping relationship the social worker recognizes and responds to persons. This makes a helping and healing relationship an intrinsically complex alliance, often in conflict and laden with values. We know that social work assists individuals, couples, groups, and communities to cope and to solve problems. Persons can learn to act in relation to the other(s). Persons demand participation in decisions and actions, not control. They can impact their relational environment. The social worker is a coach for such human activity and healing work inherent to the human condition. Social workers need to discover their active compassion as a tool to assist people to use the relational and communal goods they need, to discover themselves as subjects and as agents and to act (interact) effectively in this relational work. "Clients" are persons in relationships, and relationships always involve differences. With parents come relations with children and so children, whether in the room or not, are clients as well. In multicultural societies there are even more systemic differences of expectations, rights, obligations, and care.

The helping process becomes a free conversation of at least two agents, a free and undetermined conversation of friendship, where, in mutual creation of this respectful, open and equal context, differences, as well as cooperation, become normal and appropriate possibilities. For this to happen, social workers must continually attend to the potential for power differentials between them and their clients to prevent or distort such a free conversation. What the social worker may do (or not do) to assist client(s) depends on what clients seek. The whole beginning process of helping is a process of developing and testing the limits and nature of this potential alliance. Ultimately the decision to act in relation to perceived goods is the client's. In this process social workers need to decide how and whether they or the organization should be a part of the decision and action, as well as whether others ought to be protected from the effects of a dangerous decision. The social worker and the client recognize that as part of their both being agents-in-relation.

This assumption, that help should be a free, interpersonal process, provides a deeper rationale for core social work principles than the simple fact that it works. Persons need to express feelings, receive a compassionate response to their concerns, be recognized as persons of worth, not be judged, and make their own choices and decisions. Their secrets should be protected. The client is aware of the social worker's response and uses it to act on the problem(s). Felix Biestek (1957, p. 17) delineates practice principles of: *Individualization, Purposeful expression of feelings, Controlled emotional involvement, Acceptance, Nonjudgmental attitude, Client self-determination and Confidentiality*, from an analysis of the personal dynamics of this personal encounter and from an analysis of social work literature. His work points out that these taken-for-granted social work principles existed long prior to their

confirmation in research findings on the underlying conditions for effectiveness of psychotherapy (Orlinsky, Grawe & Parks, 1994; Lambert & Bergin, 1994).

Social workers who seriously follow Christ may feel like strangers in their own societies. There often are deep conflicts with their societies in areas that affect others, such as protection of human life, protection of the family, protection of vulnerable people and human procreation. Health care workers, for example, work close to decision-making processes, but are ancillary to the other's decision. Would the worker, who deals with difficult situations, become an unwitting tool of what client systems, agencies, or social policies wish to create? How might workers assist a process or work to change a policy? What is the right of the worker's conscience? Where must they draw a line on the possible nature of their assistance or give the client the option not to use them in this without damaging the goods of the relationship? How would this be taken by a client, by an employer, or by an accrediting association? What could the worker do in these daily dramas in consultation, and in collaboration? What can one do when processes, which would violate ethical principles, are socially adopted and politically supported as convenient solutions to difficult problems? What can and should the worker support or not support? While social work remains the same, the crucial issue here concerns the relation of the worker's conscience to the helping process. There is very little guidance on a professional level, although a *Charter* (Pontifical Council on Pastoral Assistance, 1995) of first principles for health care workers is a step.

Conclusion

Beginning answers to these questions may be closer than we realize. As social work students we began by learning the dynamic (reflexive) boundaries of helpfulness for another. This learning only continued to develop through the challenges of practice. But the direction was clear. The social worker's responsibility for what the other does is limited to the assistance implicitly or explicitly provided in carrying out the client's (system's) intentions (Constable, 1989). And so respecting clients (systems) as free moral agents and persons means respecting ourselves so that neither the client nor we become an unconsenting means to another's purposes and ends (Constable, 1989). One learns what parts of a person's functioning and awareness to support and what not to support, what to disengage from and even what to report because it is something harmful. In the conversation of practice there is a balance of respect for freedom and concern for others. This concern demands that the social worker not intentionally cooperate (participate in, support) with something harmful.

Using the example of CST, getting to discuss particular cases demands an older and more developed tradition of discourse, a language of first principles with some agreement on good ends and good means, something not explicitly understood at this point. From the CST perspective *general ethics* concerns rights and obligations and the derivation of ethics itself within the field of philosophy. *Special ethics* has to do with the often surprising, subtle and humanistic ways general ethics is applied to individual cases. And CST has several thousand years experience in this. In this context concepts, such as double effect, developed in Catholic moral theology (Constable, 2007; Garcia, 1995) could provide a useful way of differentiating what level of cooperation the practitioner may provide actions which inevitably have multiple effects on others. However the conversation is barely at a beginning stage.⁴

CST remains radically countercultural when it teaches any objective morality, that human nature is a constant, and there are goods, which persons can, indeed must, seek and find. "Only actions in conformity with the good can be a path that leads to life" (*Veritatis Splendor*, 72, p. 91). However, if the only moral criteria are sincerity, authenticity, and "being at peace with oneself," moral judgment becomes radically subjectivist (*Veritatis Splendor*, 32, p. 48), each conscience creating its own values and moral norms (*Veritatis Splendor*, 40, p.56) without reference to external criteria. Because caring brings obligations with it, our clients, and we as well, inevitably ask, "What is my obligation to myself and to others?" What is good and what are its claims on me? What should I do? Such questions, rarely directly answered, are the beginning of moral dialogue. Practice experience points out that the central need of persons in trouble is often to rediscover the normativity in things and in circumstances, to rediscover compassion (for themselves as well as for others), and to rectify relationships in the light of these discoveries.

This statement of principles can be no more than a beginning. There is much work to be done in the accommodation of this vision of society and of persons into a thicker and more sophisticated picture of practice, not simply finding the most convenient solution, but acknowledging practitioners and clients as persons of conscience. The ethics of care, more than a simple focus on rights and obligations, provides the beginnings of a framework for this, as do a century of evolved experiences of the practicing profession, and two millennia of CST. The compassionate vision of the follower of Christ is not a detriment, but a contribution to all of this. It will discover the way.

References

- Benedict XVI. (2006). *Deus caritas est*. Zenit News Agency (<http://www.zenit.org/english/visualizza.phtml?sid=83355>)
- Biestek, F. (1957). *The casework relationship*. Chicago, IL: Loyola University Press.
- Budziszewski, J. (2009). *The line through the heart: Natural law as fact, theory and sign of contradiction*. Wilmington, DE: ISI Books.
- Cassidy, J., & Shaver, P. R. (1999). *Handbook of attachment: Theory, research and clinical applications*. New York, NY: Guilford.
- Catechism of the Catholic Church*. (1994). United States Catholic Conference – Libreria Editrice Vaticana. New York, NY: Doubleday.
- Charles, R. (1999). *An introduction to Catholic Social Teaching*. San Francisco, CA: Ignatius Press.
- Constable, R. T. (1989). Relations and membership: Foundations for ethical thinking in social work. *Social Thought*, 15(3-4), 53-65.
- Constable, R.T. (2007). Catholic social thought and the caring professions: Social work. *Journal of Religion, Spirituality and Social Work*, 26(3), 81-100.
- Constable, R. T. & Lee, D. (2004). *Social work with families: Content and process*. Chicago, IL: Lyceum.
- Donagan, A. (1977). *The theory of morality*. Chicago, IL: University of Chicago Press.
- Engelhardt, H. T. Jr. (2000). *The foundations of Christian bioethics*. Exton, PA: Swets & Zeitlinger.
- Falck, H. (1988). *Social work: The membership perspective*. New York, NY: Springer.
- Finnis, J. (1980). *Natural law and natural rights*. Oxford: The Clarendon Press.
- Finnis, J. (2004). Secularism, faith and public policy. In K. D. Whitehead, (Ed.), *The Catholic citizen: Debating the issues of justice* (p. 17). South Bend, IN: St. Augustine's Press.
- Garcia, J. L. A. (1995). Double effect. In Reich, W. T. (Ed.), *Encyclopedia of bioethics* (Rev. Ed.), (pp. 636-641). New York, NY: Simon & Schuster Macmillan.
- Gaudium et Spes*. (1966). Pastoral constitution on the church in the modern world, *Gaudium et Spes*. In Walter M. Abbott (Ed.), *Documents of Vatican II* (pp. pp. 199-248). New York, NY: Guild Press, America Press, Association Press.
- Gilligan, C. 1982. *In a different voice: Psychological theory and women's development*. Cambridge, MA: Harvard University Press.
- Grisez, G. (1983). *Christian moral principles*, Vol. 1 of *The way of the Lord Jesus*. Chicago, IL: Franciscan Herald Press.
- Halmos, P. (1966). *The faith of the counselors*. New York, NY: Schocken.
- Hittinger, R. (1995). Natural law. In W. Reich, (Ed.), *Encyclopedia of bioethics* (pp. 1805-1811). New York, NY: Simon & Schuster Macmillan.
- Imre, R. W. 1982. *Knowing and caring: Philosophical issues in social work*. Lanham, MD: University Press of America.
- John Paul II. (1991). *Centesimus annus*. Boston, MA: St. Paul Editions.
- John Paul II. (1981). *Dives in misericordiae*. Boston, MA: St. Paul Editions.
- John Paul II. (1995). *Evangelium vitae*. Boston, MA: St. Paul Editions.
- John Paul II. (1994). *Letter to families*. Boston, MA: St. Paul Editions.
- John Paul II. (1979). *Redemptor hominis*. Boston, MA: St. Paul Editions.
- John Paul II. (1984). *Salvifici doloris*. Boston, MA: St. Paul Editions.
- John Paul II. (1982, 1995). To the Participants at a Medical Congress on Tumor Therapy, February 25, 1982. *Insegnamenti*, V (1) 698. In Pontifical Council for Pastoral Assistance, *Charter for Health Care Workers* (pp. 18-19).
- John Paul II. (1981) *Familiaris consortio: The role of the family in the modern world*. Boston, MA: St. Paul Editions.
- John Paul II. (1993). *Veritatis splendor*. Boston, MA: St. Paul Editions.
- Kohlberg, L. (1984). *The sychology of moral development*. New York, NY: Harper & Row.
- Lambert, M. J. & Bergin, A. E. (1994). The effectiveness of psychotherapy. In A. E. Bergin & S. Garfield, (Eds.), *Handbook of psychotherapy and behavior Change* (pp. 143-189). New York, NY: John Wiley.
- Loewenberg, F. M., Dolgoff, R., & Harrington, D. (2000). *Ethical dimensions of social work practice* (6th ed.). Itaska, IL: Peacock.
- MacIntyre, A. (1984). *After Virtue* (2nd ed.). Notre Dame, IN: University of Notre Dame Press.
- MacIntyre, A. (1984). *Whose justice? Whose ationality?*. Notre Dame, IN: University of Notre Dame Press.
- Mahowald, M. B. (1995). Person. In W. Reich, (Ed.), *Encyclopedia of bioethics* (pp. 1934-1948). New York, NY: Macmillan.
- Martin, D. (2006). *Toward a global common good*. www.zenit.org.

- Martino, R. (2006a). *Social teaching offers common ground says Cardinal*. Address of Renato Cardinal Martino to the Twentieth anniversary of the Cuban Ecclesial meeting, 17 February 2006. Accessed 18 February 2006. Zenit News Service 061007 www.zenit.org. (accessed 10-07-06).
- Martino, R. (2006b). *Address in Singapore on the laity, social doctrine and human promotion*, 20 June 2006. Accessed 26 June 2006. www.zenit.org
- Messner, J. (1949). *Social ethics*. St. Louis, MO: Herder.
- Noddings, N. (1984). *Caring: A feminine approach to ethics and moral education*. Berkeley, CA: University of California Press.
- Nussbaum, D. (1983). Tsedakah, social justice and human rights. *Journal of Jewish Communal Service*, 59(3) Spring, 228-236.
- Orlinsky, D. E., Grawe, K., & Parks, B. (1994). Process and outcome in psychotherapy—Noch Einmal. In A. E. Bergin & S. Garfield (Eds.), *Handbook of psychotherapy and behavior change* (pp. 143-189). New York, NY: John Wiley.
- Pontifical Council for Justice and Peace. 2004. *Compendium of the Social Doctrine of the Church*. Vatican City: Libreria Editrice Vaticano.
- Pontifical Council for Pastoral Assistance. (1995). *Charter for health care Workers*. Boston, MA: St. Paul Books.
- Reamer, F. D., (1993). *Ethical dilemmas in social service* (2nd ed.). New York, NY: Columbia University Press.
- Reamer, F. D., (1993). *The philosophical foundations of social work*. New York, NY: Columbia University Press.
- Reich, W. (1995). History of the notion of care. In W. Reich (Ed). *Encyclopedia of bioethics* (pp. 319-336). New York, NY: Simon & Schuster Macmillan.
- Reich, W. T. (1989). Speaking of suffering: A moral account of compassion. *Soundings*, 72(1) 83-108.
- Richmond, M. E. (1907). *The good neighbor in the modern city*. Philadelphia, PA: Lippincott.
- Ruddy, N. B. & McDaniel, S. H. (2003). Couple therapy and medical issues: Working with couples facing illness. In A. S. Gurman & N. S. Jacobson (Eds), *Clinical handbook of couple therapy* (pp. 699-716). New York, NY: Guilford.
- Second Vatican Council (1965). *Gaudium et Spes: Pastoral constitution on the church in the Modern World*. In *Readings on Catholics in political life* (pp 35-47). Washington, D.C.: U.S. Conference of Catholic Bishops.
- Siporin, M. 1972. *Introduction to social work practice*. New York, NY: Macmillan.
- Siporin, M. (1982). Moral philosophy in social work today. *Social Service Review*, 56(4) 516-538.
- Smith, C. (2010). *What is a person? Rethinking humanity, social life, and the moral good from the person up*. Chicago, IL: University of Chicago Press.
- Stosny, S. (2006). *You don't have to take it anymore*. New York, NY: Free Press.
- Stosny, S. (1995). *Treating attachment abuse: A compassionate approach*. New York, NY: Springer.
- Tillich, P. (1962). The philosophy of social work. *Social Service Review*, 36, 513-516.
- Wojtyla, K. (John Paul II) (1981). *Love and responsibility*. New York, NY: Farrer Straus Giroux.

Social Work Practice with People with Disabilities: Enhancing Practice through Catholic Social Teaching

Lynn Milgram Mayer

Social work practice with people with disabilities is a complex area that has historically been influenced by many changing social constructs and theoretical orientations. To enhance services to this population, a paradigm shift is proposed to apply Catholic Social Teaching (CST) to social work practice with people with disabilities across individual, family, community, and policy realms. Specifically, three core principles of CST are applied: life and dignity of the person; call to family, community, and participation; and solidarity.

Social work practice with people with disabilities has been greatly influenced by the medical model, which can inadvertently lead to increased segregation. In contrast, Catholic Social Teaching (CST) strongly affirms responsibility to respect and support persons with disabilities, which can make a significant contribution to enhancing social work practice with individuals with disabilities. This paradigm shift from medical to CST-informed practice recognizes the gifts of all individuals in a manner that allows for full inclusion and participation of people with disabilities in society. Building on the Pastoral Statement of the U.S. Conference of Catholic Bishops (USCCB), CST-informed practice calls social workers to emulate Jesus in their interactions with people with disabilities. They state “we call upon people of good will to reexamine their attitudes toward their brothers and sisters with disabilities and promote their well-being, acting with the sense of justice and the compassion that the Lord so clearly desires” (USCCB, 1978/1989, p. 1).

In the United States, 15% of the population five years of age and older are individuals with disabilities, with the prevalence of disability increasing with age from 6% at age 5 to 15, to 13% at age 16 to 64, and to 43% at age 65 and above (Brault, 2008). The Committee on Disability in America (2007) estimates that disabilities are reported by between 40 and 50 million people, (16.7%) and they anticipate that the numbers will increase significantly as the baby boomer generation ages over the next 30 years. However, it is important to note that disability prevalence can be difficult to estimate because there is no one universally agreed upon definition of disability and, as a social construct, it is highly influenced by historical context. Furthermore, the experience of disability varies significantly for each person with regard to timeframe and severity (Burch & Sutherland, 2006; Lollar & Crews, 2003). As such, social workers working with individuals, families, and communities are likely to be providing direct and indirect services to individuals with disabilities in many different service settings.

All of the major themes of CST offer insight and wisdom into how social workers can more effectively serve individuals with disabilities. This article specifically explores the application of three of the core principles of CST to social work practice with individuals with disabilities: life and dignity of the person; call to family, community, and participation; and solidarity.

Social Work Practice with Individuals with Disabilities

Social work practice with people with disabilities has been influenced by many different theories and perspectives. Direct work with individuals and families and indirect work with communities is complicated by the fact that this population is not a homogenous group. Rather, disabilities encompass a range of conditions with varying etiologies (Burke & Fell, 2007; Rothman, 2003). Diagnosis of disability does not follow the same trajectory for everyone. Some individuals become labeled with a disability during childhood for a condition that they are born with or from a condition identified during childhood. Others acquire a condition in adulthood that leads to a disability or experience a life-altering event, such as an accident, that results in a disability. Some disabilities are influenced by individual and collective life choices and are therefore preventable (Committee on Disability in America, 2007). Disabilities can reflect physical, developmental, cognitive, or mental health issues, which further confuses the common understanding of who is a person with a disability (Hiranandani, 2005).

As a social construct, the definition of disability has changed, which has complicated the understanding of who has a disability and what it means to have a disability. Mackelprang and Salsgiver (1996) traced the history of the treatment of people with disabilities from ancient beliefs through beliefs in the 20th century; throughout, they note

how cultural beliefs shape how people with disabilities have been treated. The experience of disability is also influenced by the societal environment and whether disability is considered to be an individual or societal phenomena (Rothman, 2003). There is no one accepted definition of disability. The lack of agreement on definition, concepts, and terms is a barrier to advancing knowledge (Committee on Disability in America, 2007). But, despite the heterogeneous nature of disabilities, Hiranandani (2005) argues that the label of disability yields a similarity of experience for all of those individuals who acquire the label related to the experience of stigma.

Catholic Social Teaching

Historically, Jesus is the root of CST (O'Brien & Shannon, 2010). CST dates back to the principal teachings of Jesus and the Jewish foundations of the Catholic Church. In the *Compendium*, the Pontifical Council for Justice and Peace (PCJP) expand on this idea by describing the social doctrine of the Catholic Church as "the expression of God's love for the world" (Pontifical Council for Justice & Peace, 2005, p.2). Pope Pius XI and the Encyclical Letter *Rerum Novarum* introduced the term "social doctrine" to describe the long history of the caritative mission of the Church (Pontifical Council for Justice & Peace, 2005). CST addresses the "overall health of a society" (Hughson, 2010, p. 5). While there have been numerous initiatives born out of CST in the United States, including Catholic Charities, school programs, and other social services, there has been a tendency to pay inadequate attention to these programs, leading to the belief that CST reflects the "best kept secret" (DeBerri, Hug, Henriot, & Schultheis, 2003, p. 3) of the Catholic Church.

CST is not purely individualistic nor collectivist (Cloutier, 2009). It is also important to recognize that CST is not a static entity, but instead is an evolving set of themes that are responsive to changes in attitude and methodology (DeBerri et al, 2003; Pontifical Council for Justice & Peace, 2005). Many credit Pope John Paul II with advancing the foundations of CST and broadening its reach, while the pastoral letters of the American bishops have also garnered attention as they have applied CST to current conditions in the United States from 1919 to the present day (O'Brien & Shannon, 2010). While CST changes over time, one theme that is consistent across CST is that the needs of the poor and the vulnerable must be put first, with a focus on viewing society as a composite of all members (Shank, 2007). Another theme related to human rights that is elaborated through CST is love, with a particular emphasis on "God's love for humanity" (Miller, 2009, p. 5). These ideals are evident in the seven key themes of CST articulated by the USCCB (2005): life and dignity of the human person; call to family, community, and participation; rights and responsibilities; option for poor and vulnerable; dignity of work and the rights of workers; solidarity; and care for God's creation.

Life and Dignity of the Person

The dignity of the human person is the first principle of the social doctrine of the Church, and it can be argued that it forms the basis for all the other principles (PCJP, 2005; USCCB, 2005). CST tells us that each person is unique (Constable, 2007). In the *Compendium*, the importance of the person is clearly articulated:

The Church sees in men and women, in every person, the living image of God himself. This image finds, and must always find anew, an ever deeper and fuller unfolding of itself in the mystery of Christ, the Perfect Image of God, the One who reveals God to man and man to himself (Pontifical Council for Justice & Peace, 2005, p. 49).

Each person is a reflection of the image of God and is a carrier of God's dignity; each person, as such, possesses both intelligence and free will (Shank, 2007). While free will and intelligence come from God, it is through these attributes that each person is open to God and is able to move toward the "absolute good" (PCJP, 2005, p. 57). DeBerri et al. (2003) believe that the life and dignity of the person is comprised of the following components: authentic human development, love of God and neighbor, love and justice, and dialogue. Also, as reflections of God, human life is sacred (Himchak, 2005).

The value of the person as a reflection of God is to be understood as not varying based on individual attributes of the person, such as gender, race, or age (Shank, 2007). People, as reflections of God, have dignity as a "God-given inherent right" (Himchak, 2005). This perspective is different than the notion sometimes held that saw people with disabilities as a sign of displeasure from God (Mackelprang & Salsgiver, 1996). Instead, as noted in the *Compendium*, "the glory of God shines on the face of every person" (PCJP, 2005, p. 63). This sense of value and equal dignity for each person is now easily extended to include individuals with disabilities. An example of the power of the belief in the dignity of the person as a child of God is St. Margaret of Costello. As a child, she was imprisoned by her family because of her severe disabilities. She was later abandoned in a Church after her family brought her to experience a miracle and none occurred. She spent her life in prayer and serving the poor. After her death, a miracle did occur, resulting in her canonization. None of this would have been possible without the belief in the dignity of the person as a reflection of God. Social workers practicing with people with disabilities from a CST perspective will honor the worth and dignity of each client. According to USCCB (1978/1989), "what individuals

with disabilities, need, first of all, is acceptance in this difference that can neither be denied or overlooked” (p. 1). This CST principle is in keeping with social work’s key belief that all humans have worth and are entitled to experience human dignity (Shank, 2007). Further, CST indicates that the growth of each person and the common good for all are tied to the recognition of the dignity of each person (Pontifical Council for Justice & Peace, 2005). So, to deny the dignity of a person with a disability is to preclude the growth of everyone and to negatively inhibit the pursuit of the common good.

Call to Family, Community, and Participation

Just as there is specific focus on the individual in CST, there is a clearly articulated emphasis on the family and community. When God created people in his image, he did not intend for them to live alone (Himchak, 2005). People were created as social beings who need to be in relationship with others to reach their full potential (USCCB, 2005). As such, people need to be able to be fully participating in their families and communities to be able to self-fulfill their potential (Himchak, 2005). With Vatican II and the *Pastoral Constitution on the Church in Modern World*, more focus was given to this idea that people are social beings and cannot reach their full potential in isolation (O’Brien & Shannon, 2010). In addition to the prominent role ascribed to families, CST also focuses on participation in community. USCCB (2005) clearly articulates the importance of how society is organized as the social structures impact the dignity of the individual: “we believe people have a right and a duty to participate in society, seeking together the common good and well-being of all, especially the poor and vulnerable” (p. 1). The call to community, with the emphasis on participation in community, is particularly relevant to work with individuals with disabilities.

Furthermore, the call to community suggests that there needs to be more cooperation and less competition among groups (Cloutier, 2009). Vanderwoerd (2007) argues that while most Christians will agree when asked to answer, who is your neighbor, he argues that there is less agreement and more complexity when they start to try to answer how to help their neighbors in response to their need for resources. When groups compete, including groups focused on serving people with disabilities and advocating on their behalf, they detract from the fact that we are all God’s children. While the reality of scarce resources might prompt competition, social workers from a CST framework would be called to intervene to promote cooperation.

The call to participate in community extends to participation fully in the Catholic faith. USCCB (1979/1989) recognizes the need to do more in this area: “just as the Church must do all in its power to help ensure people with disabilities a secure place in the human community, so must it reach out to welcome gratefully those who seek to participate in ecclesial community” (p. 3).

Solidarity

Solidarity refers to the idea that the world is interdependent, that all humans are connected as part of one family. As Kaulemu (2010) states, “we all belong to one human family because we were all created by God. It is this relatedness as children of God that gives us obligations toward one another” (p. 75). Through solidarity, the idea of love of neighbor crosses national boundary lines to be truly global (USCCB, 2005). Pope John Paul II is credited with establishing the importance of solidarity as part of Catholic Social Teaching (Coleman, 1999). Furthermore, solidarity “forms the basis for social work and the social services” (Constable, 2007, p. 84). Through the lens of solidarity, it is important for all to achieve the good, because “the failure of some to attain the good life hurts us all” (Cloutier, 2009). In the perspective of DeBerri et al (2003), solidarity includes concern for the unity of humanity, peacemaking, pacifism/non-violence, and just war.

One way that the concern for the unity of humanity is expressed is the idea the common good (Shank, 2007). Cloutier (2009) says “a common good suggests that you and others are not simply isolated individuals pursuing isolated goods, but also that you and your neighbor are not simply cogs in a larger social collective. Rather, there is a shared good that belongs to everyone” (p. 98). Concern for justice and the promotion of peace play critical roles in the theme of solidarity (USCCB, 2005).

Social workers acting from a CST framework understand that people with disabilities are children of God and work to promote solidarity on the individual and societal realms. As DeBerri et al (2003) indicate:

...the core truth of Catholic social thought is the recognition that we are all one in being children of God. No one’s fulfillment and salvation can be completely isolated from any other in the web of existence. Each depends ultimately on solidarity in the fulfillment and salvation of all. Catholic social thought challenges us to promote that vision, which is essential to the Gospel of Christ, and to develop principles to guide the achievement of that reality in human society (p. 31).

Social workers have long viewed ourselves as working in solidarity with the oppressed (Shank, 2007). Therefore, applying this lens to work with people with disabilities is a natural fit. It is also important that we consider ourselves as working in solidarity with individuals with disabilities in other nations as well as the United States. Not only do

social workers work in solidarity with people with disabilities, but they also work with social structures and with other members of society so that they, too, are in solidarity with people with disabilities. Through this work, social workers are helping to change society for the better by making it more inclusive and promoting the common good for all.

Social structures and institutions can be organized to enhance or diminish solidarity (Kaulemu, 2010). One way solidarity can be increased is by providing services that are accessible (Camilleri & Winkworth, 2005). Accessibility influenced by solidarity would mean that people with disabilities are entitled to equal access. Equal access is more than simple accommodation. For example, the accessible entrance to a building should not be around the back of the building, but in the front so that people with disabilities are able to enter through the same door as everyone else. Failure to arrange structures that are inclusive, but that instead increase the estrangement of people with disabilities, would be seen to be morally wrong under this CST principle (Kaulemu, 2010).

Implications

Direct Practice with Individuals

Clinical social work practice with people with disabilities has a long history of using the medical model. Intervention models tend to focus on issues of grief, loss, and bereavement, and to use the ecological and psychosocial perspectives to inform practice (Hiranandani, 2005). Clinical social workers practicing from this traditional framework are challenged by many ethical dilemmas, including issues of access to services, confusion over who is the client, informed consent, guardianship, assessment, competence, and treatment (Adams & Boyd, 2010).

Intervention modalities have changed over time and the idea of what is “best practice” has shifted with each new paradigm. For example, the disability rights and the consumer orientation movements have challenged the ideas of traditional rehabilitation and moved the focus to rights and empowerment (Beaulaurier & Taylor, 2001). Others have opposed the use of traditional prevention and intervention models and have argued for the use of postmodern, poststructural, constructivist, and feminist perspectives (Fawcett, 1998; Hiranandani, 2005). Generally, while practice with people with disabilities has now moved from a medical paradigm to a disability rights paradigm, there are still many social workers operating from a deficit perspective (Pfeiffer, 2005). To respond to these ethical and advocacy challenges, new paradigms for explanation and intervention are needed that foster respect for the individual as well as inclusion and full participation in society. CST provides one possible solution to enhancing clinical work with this population.

In CST-informed clinical work with this population, the social work value and CST theme of the dignity of the person are closely aligned. Clinical social workers should build their practice on the idea that the person with a disability is a person first. Social workers should support this tenet by remembering to consistently use person first language to continually remind themselves that the person with a disability is a person and not a diagnosis. As such, it can be useful to incorporate the disability paradigm advocated by Pfeiffer (2005), recognizing that “people with disabilities (like all people) are human, fallible, make mistakes, and are capable of taking risks” (p. 39). Social workers need to encourage their clients with disabilities to try new things, to remember that making mistakes is normal, and that not everyone gets it right on the first try. If we do not encourage our clients to take these risks, we are guilty of falling back into the traditional framework of paternalism.

In contrast to traditional models of practice, CST-informed practice focuses on the belief in the life and dignity of the person and extends the conceptual ideas related to rights to the right to self-determination. CST specifically notes the same right to self-determination that is of value in social work practice. In CST, “man exists as a unique and unrepeatable being, he exists as an ‘I’ capable of self-understanding, self-possession and self-determination” (Pontifical Council for Justice & Peace, 2005, p. 58). Self-determination from a CST perspective grows out of the belief that humans possess intelligence and free will (Shank, 2007). From this principle, it is evident that social workers respect that individuals with disabilities are entitled to the same opportunities for self-determination that are granted to other clients. While this might be more complicated because some disabilities do impose barriers to full independence for the person, the person’s right to self-determination should be honored. For example, while an individual with a cognitive impairment might need support to live as independently as possible, the person should be an active participant in the decision process.

To respect the life and dignity of the person, it is also necessary to recognize that there is an intrinsic connection between respecting dignity and rights, responsibilities, and participation (Shank, 2007). The *Compendium* clearly states, “people with disabilities are fully human subjects, with rights and duties” (Pontifical Council for Justice & Peace, 2005, p. 64). According to Pope John Paul II (2000), “we know that the disabled person—a unique and unrepeatable person in his equal and inviolable dignity—needs not only care, but first of all love which becomes recognition, respect and integration” (p 2). In addition, O’Brien and Shannon (2010) argue that Pope John Paul II advanced ideas on how to live life with dignity while coping with illness himself. This powerful example

offers insight into how social workers can openly address issues of health and disability and allow the individual to experience “the dignity of the person radiant even under adversity” (p. 371).

Participation is also a critical aspect for social workers to consider in their practice. People with disabilities have the right to full participation in society, including activities that build on their faith. USCCB (1978/1989) notes that there has been a problem with how people with disabilities are treated within the Church that needs to change in order to grant opportunities for full participation: “when we think of people with disabilities in relation to ministry, we tend automatically to think of doing something for them. We do not reflect that they can do something for us and with us” (p. 4). For example, people with disabilities are not just in need of ministry. They can be ministers and have the capacity to serve others. During the “Year for Priests” in 2009, the National Catholic Partnership on Disability highlighted numerous examples of priests who have disabilities and who clearly demonstrate not only the right to full participation, but how respect for the dignity of one improves society for us all. For example, Father Rick Curry had served for years as a Jesuit Brother and only sought to become ordained after wounded veterans asked him to serve them as a priest would. As such, social workers, from a clinical perspective, are called upon to help clients with disabilities to be fully participating and to advocate on their behalf when necessary to facilitate participation in all settings.

This paradigm also clearly implies the importance of using a strengths-based perspective in clinical work with people with disabilities. The strengths-perspective reminds us that all people have resources and assets and that it is imperative for the social worker to build on those rather than to focus on the deficits. And yet, a disturbing trend is that practitioners in general tend to describe clients with weakness words (72%) more than strengths (28%) (Saint-Jacques, Turcotte, & Pouliot, 2009). Social workers working with people with disabilities need to be particularly cognizant of their word choice and their underlying beliefs if they are to practice from a CST perspective. They need to remember to focus on what their clients can do rather than what they cannot do.

Individual level clinical work should include traditional social work assessment tools developed from an ecological framework, including eco-maps, PIE maps, which let the client express what is essential to her or him, and environment maps, which focus on the client’s nurturing and sustaining networks (Rothman, 2003). All these tools value the uniqueness of the individual and are not predicated on a deficit focus. A practice paradigm shift to CST adds a sixth dimension to Raske’s (2005) blended practice model, which incorporates the use of the strengths perspective, empowerment, resiliency, disability discrimination, and medical models into practice with people with disabilities.

Direct Practice with Families

The call to family reminds us that God did not create us to live in isolation. When we work with people with disabilities, we need to be acutely aware that they are embedded in family systems. The family in CST is “the primary system of social caring” (Constable, 2007, p. 85). To explore this further, USCCB (1978/1989) has begun to consider the relationship between children with disabilities and the impact on the family:

No family is ever really prepared for the birth of a child with a disability. When such a child does come into the world, families often need strong support from their faith community. That support must remain firm with the passage of years... Family members need to know that others stand with them, at least in spirit, as they help their children along this path (p 4).

Social workers in this field need to recall that the person with the disability is not the only person in the family who is affected by the disability. As Seligman and Darling (2007) note, “the family operates as an interactive unit, and what affects one member affects all members” (p. 17). Traditional social work services, such as resource and referral provided in case management, continue to have an important role in helping families of an individual with a disability. The family needs help to learn what resources are out there for them to use and they sometimes need help from the social worker to be able to access these resources. They might need to find legal help, support networks, or related service providers such as occupational, physical, or speech therapists. They might need assistance to plan for long term care options and need support through the process of realizing their family member may have lifelong needs that they will be unable to meet as they age. They might need help finding sources of respite care so that they do not become overburdened by the care needed by the person with the disability.

Yet, to be effective from a CST standpoint, the resource and referral process needs to go beyond seeking services for the individual and recognize the inherent strengths in the family system as well as the individuality of each family member. While the family may have needs, they bring with them resources and assets that should be incorporated into the work. As such, intervention with families should address what they already have in place that will help them face their current challenges.

It is also critical to recognize that some family members are acutely affected by the process of labeling that tends to accompany the receipt of services related to disability. The experience of being labeled can prompt some

family members to feel “stigma by association” (Burke & Fell, 2007, p. 51). Social work practice should be particularly sensitive to siblings who may feel a sense of embarrassment or shame. Social work practice with families needs to consider all members of the family, but it is also critical not to have predetermined ideas about what each family member’s reaction will be. There is no one reaction or pattern of reaction found in all families to learning that a member of the family has a disability (Seligman & Darling, 2007). As such, social workers should be careful not to project their ideas of what the “right reaction” is onto the family members.

Further, social workers need to be aware that they themselves are likely to incite strong emotions in the families that they work with that are both positive and negative. Often, families associate negative connotations with the professional who is sharing the diagnostic “bad news” and positive connotations with the professional who is offering support and hope (Seligman & Darling, 2007, p. 280). Social workers should question whether their attitudes towards families with disabilities are hindering the relationship and fostering increased experience of stigmatization. In addition, social workers should reflect on how they respond to parent activism (Seligman & Darling, 2007). Social workers from a CST paradigm will not be threatened by the activism of parents or individuals with disabilities as they advocate for the right to be included in society as full participants. Rather, they will see it as an act of solidarity to stand with them and recognize the impact of advocacy on the common good.

Indirect Practice with Communities

Social work has a long history of community practice (Mendes, 2009). CST advocates that individuals also have the right to participate in their communities through the call to community. Full participation in community calls for enhanced educational opportunities. If people with disabilities are to participate fully in their communities, it is necessary for education to be offered to all children in a setting as inclusive as possible. Inclusion is necessary to promote understanding: “children with disabilities often suffer as much from the misunderstandings of those in their community and schools as from their own physical conditions” (Brown & Celeste, 2006, p. 474). Schools and early childhood programs should embrace inclusion for the benefit of all. While most proponents of inclusive education discuss the rewards for the people with disabilities who are included in a “normal school environment,” it also has the potential to produce benefits for the other children who are given the opportunity to experience difference and to learn it is not something to be feared.

As such, social work community practice is in accordance with this CST theme. Historically, community practice can work to maintain the status quo or prompt change and to reinforce conflict or establish commonalities (Shaw, 2007). Both types of community practice could enhance the experience of people with disabilities living in their communities. People with disabilities have been involved in numerous movements to advance societal change through greater inclusion into their communities, including being integrated into the least restrictive school setting and being able to access public transportation (Fleischer & Zames, 2001). Social workers can engage in practice to promote these types of enhanced opportunities for inclusion. In their effort to help others also be in solidarity with people with disabilities, social workers can work to mobilize volunteers in congregations and help link service and faith (Garland, Myers, & Wolfer, 2008). Another approach that social workers can use to facilitate community involvement is through conducting or assisting with needs assessments (Rothman, 2003). Social workers can help answer questions about whether the resources available in the community are meeting the needs of individuals with disabilities. Rothman (2003) also articulates the role of the social worker in the self-help group model, acknowledging that the social worker is an outsider, but might help facilitate social action. Empowerment models of community practice have particular value for community work with people with disabilities in that it recognizes that the people with disabilities have a role (Rothman, 2003).

Indirect Practice through Social Change

Social workers engaged in macro practice with people with disabilities can benefit from CST-informed work as they work for policy change across local, state, and federal levels. CST-informed policy advocacy could help unify the social work approach to social change efforts while also moving the agenda forward. While disability has been historically treated as an individual level issue and most social work practice on this topic has largely utilized the individual model, challenges to this viewpoint have resulted in the need for alternative perspectives (Hiranandani, 2005). The disability rights movement includes many examples of the use of community organizing on behalf of people with disabilities by family members and by disability organizations and by people with disabilities themselves to prompt changes, increase access to services, and provide support.

Societal shifts have occurred, starting with the change in language from “handicapped” to “person with a disability.” But these areas of progression can and should go further with a paradigm change to CST. Additionally, on the policy level in the United States, Hahn (2005) argues that policies related to disabilities have been based on contradictory ideologies related to key concepts, including work and quality of life. For example, there is an inherent contradiction in our policies that argue for benefits so people with disabilities do not have to work, while at the same time we advocate for opportunities for full participation in society (Mackelprang & Salsgiver, 1996). At times, the

focus has been on increasing technology, which can also prompt the need for social work advocacy (Fleisher & Zames, 2001). CST-informed policy advocacy could help to unify the social work approach to social change efforts while also moving the agenda forward.

Social workers in the policy arena on all levels who are operating from a CST paradigm should strive to ensure that people with disabilities are granted opportunities to display their worth, dignity, and value based on a basic spirit of respect for the life and dignity of the person. While there has been local, state, and federal legislation passed that affects the daily lives of people with disabilities, including the Americans with Disabilities Act, unfortunately, there has not yet been an end to discrimination (Hayashi, 2005). May (2005) argues that social workers have a responsibility to engage in policy practice since “disability-related impairment is a consequence of the environment” (p. 113). For example, there are clear connections between living in poverty and the incidence and prevalence of disabilities. While social workers have a history of policy advocacy, they have not been active enough regarding policies that affect people with disabilities and it is now time to work to change the “status quo” (May, 2005, p. 125). Advocacy efforts can focus on the components identified by the Pontifical Council for Justice and Peace (2005) of opportunities for job advancement and a just wage and removal of barriers to employment. Coalition building, policy advocacy, and social movement models are viable practice modalities for pursuing social change with people with disabilities (Rothman, 2003).

Social workers can target advocacy efforts to remove physical, cultural, and social barriers to integration for people with disabilities (Seligman & Darling, 2007). Removing barriers would benefit the common good and broaden solidarity. Cavanaugh (2008) argues that while most people following Christian ideals would not deliberately harm others for their own benefit, they might unconsciously hurt others by participating in our consumer economy. Following that logic, they might not intend to harm people with disabilities by the barriers enacted and would therefore benefit from learning how they might be impinging on others’ full participation in society. For example, social workers can advocate to increase access and eliminate barriers to full inclusion. One way to accomplish this elimination of physical barriers is to advocate on behalf of universal design, which applies principles of accessibility to the design of the environment (Fleischer & Zames, 2001). Rothman (2003) describes this accessibility movement in terms of the benefits it has had for all individuals to be more independent. While universal design enables the person with a disability to fully participate, it also helps others to participate, which respects the dignity of all while also enhancing the common good.

In addition, being in solidarity with people with disabilities means that social workers need to advocate for change within the social work profession related to people with disabilities. Social workers can be seen as agents of oppression rather than proponents of self-determination (Hayashi, 2005). Shank (2007) argues that “institutions and policies must be evaluated by their commitment to human dignity” (p. 5). One example of this need for evaluation of policy relates to the issue of residential segregation in long-term care facilities since social workers in this environment are called to reexamine their roles in order to stop serving as agents of oppression (Hayashi, 2005). Raske’s (2005) disability discrimination model suggests that social workers should also advocate for changes within their agencies related to diagnostic procedures, intake practices, and supervision.

Conclusion

While we often characterize people with disabilities as a minority group, the Committee on Disability in America (2007) clearly articulates that disability is an issue affecting a majority of people in the United States and should not be thought of as a “minority issue” (p. 16). And yet, it is important to remember that people with disabilities also need opportunities to develop to their full potential and may need services that other populations do not need. Shank (2007) notes, a “basic moral test of a society is how it provides and cares for its most vulnerable members” (p. 11). One could argue that we are not passing this test in regard to people with disabilities.

While progress has been made in regard to enhancing social work practice with people with disabilities, there is much still to be done. While “social work and the disability movement have much to offer each other... It is a partnership that is long overdue” (Mackelprang & Salsgiver, 1996, p. 13). Social work has clearly demonstrated our commitment to service, but we need to do more to show our commitment to justice (Brendan, 2006). We have tended to embrace the medical model in regard to practice with people with disabilities rather than a societal model. As such, a paradigm shift is necessary to enhance practice with this population.

Incorporating CST into social work practice with people with disabilities can be a powerful supporting framework for such a paradigm shift. The Catholic Church has a long history of attention to people with disabilities, dating back to Christ. Many Catholic saints dedicated their lives to work with people with disabilities, including St. Thomas the Apostle, St. Francis de Sales, St. Germaine Cousin, St. Henry II, St. Agnola Merici, St. Margaret Mary Alacoque, and St. Lazarus. Individuals with disabilities have recently been striving for greater levels of inclusion in the Church as evidenced by statements issued by the Vatican and by the United States Conference of Catholic Bishops (Long & Schuttloffel, 2006). The USCCB (1978/1989) indicate that the Catholic Church has focused on

ministry to people with disabilities, while at the same time being concerned with ensuring that their rights are not violated. In Pope John Paul II's Homily at the Jubilee of the Disabled (2000), he clearly articulated the Catholic perspective on the inclusion of individuals with disability:

By your presence, dear brothers and sisters, you reaffirm that disability is not only a need, but also and above all a stimulus and a plea. Of course, it is a request for help, but even before that it is a challenge to individual and collective selfishness; it is an invitation to ever new forms of brotherhood (p. 2).

For social workers who use their faith as a practice guide (Brandsen & Hugen, 2007), CST supports social work in general and with individuals with disabilities in particular. Epple (2010) reminds social workers that "Jesus embodies qualities and practices that social workers embrace" (p. 78). Social workers emulate Jesus when they serve the poor and oppressed, when they put the needs of others before their own, and when they value the worth and dignity of every individual. The core principles of CST reflect a commitment to advocate and serve those who are poor and oppressed, which is very similar to the mission of social workers reflected in the Code of Ethics (NASW, 2008). Conway (2005) finds "there is a natural relationship between spirituality and social work. The tradition of the Church strongly teaches that we are clearly called to care for one another" (p. 71). Further, CST argues, "social health is a society's basic structure in a condition of flourishing, gauged by the well-being of the most vulnerable, marginalized, and poor" (Hughson, 2010, p. 5).

The use of three of the CST themes, respect for life and human dignity of the person, the call to family, community, and participation, and solidarity offer insight into how to improve social work practice. The CST-informed practitioner could use the themes to modify how she or he engages in individual, family, community, and policy practice. ❖

References

- Adams, Z. W., & Boyd, S. E. (2010). Ethical challenges in the treatment of individuals with intellectual disabilities. *Ethics & Behavior, 20*, 407-418. doi: 10.1080/10508422.2010.521439
- Beaulaurier, R. L., & Taylor, S. H. (2001). Social work practice with people with disabilities in the era of disability rights. *Social Work in Health Care, 32*(4), 67-91.
- Brandsen, C., & Hugen, B. (2007). Social work through the lens of Christian faith: Working toward integration. *Social Work & Christianity, 34*, 349-355.
- Brault, M. (2008). *Disability status and the characteristics of people in group quarters: A brief analysis of disability prevalence among the civilian noninstitutionalized and total populations in the American Community Survey*. Retrieved from the U.S. Census Bureau website: http://www.census.gov/acs/www/Downloads/methodology/content_test/P4_Disability.pdf.
- Brenden, M. A. (2006, October). *Social work for social justice: Strengthening social work practice through the integration of Catholic social teaching*. Paper presented at the NACSW Convention, Philadelphia, PA.
- Brown, C.W., & Celeste, M. (2006). Answering the call to prepare special education teachers at institutions of Catholic higher education. *Catholic Education, 9*, 473-498.
- Burch, S., & Sutherland, I. (2006). Who's not yet here? American disability history. *Radical History Review, 94*, 127-147.
- Burke, P., & Fell, B. (2007). Childhood disabilities and disadvantage: Family experiences. In P. Burke & J. Parker (Eds.), *Social work and disadvantage: Addressing the roots of stigma through association* (pp. 45-62). Philadelphia, PA: Jessica Kingsley Publishers.
- Camilleri, P., & Winkworth, G. (2005). Catholic social services in Australia: A short history. *Australian Social Work, 58*(1), 76-85.
- Cavanaugh, W.T. (2008). *Being consumed: Economics and Christian desire*. Grand Rapids, MI: William B. Eerdmans Publishing Company.187
- Cloutier, D. (2009). Modern politics and Catholic social teaching. In D.M. McCarthy (Ed.), *The heart of Catholic social teaching: Its origins and contemporary significance* (pp.95-110). Grand Rapids, MI: Brazos Press.
- Coleman, J.A. (1999). Compassion, solidarity and empowerment: The ethical contribution of religion to society. *Journal of Religion & Spirituality in Social Work: Social Thought, 19*(2), 7-20.
- Committee on Disability in America. (2007). *The future of disability in America*. Washington, D.C.: The National Academies Press.
- Constable, R. (2007). Catholic social thought and the caring professions. *Journal of Religion & Spirituality in Social Work: Social Thought, 26*(3), 81-100.
- Conway, E. M. (2005). Collaborative responses to the demands of emerging human needs. *Journal of Religion & Spirituality in Social Work: Social Thought, 24*(1), 65-77.
- DeBerri, E.P., Hug, J.E., Henriot, P.J., & Schultheis, M.J. (2003). *Catholic social teaching: Our best kept secret* (4th ed.). Maryknoll, NY: Orbis Books.
- Epple, D. M. (2010). The experiences of St. Francis: Parallels for Christian social workers. *Social Work & Christianity, 37*(1), 78-92.
- Fawcett, B. (1998). Disability and social work: Applications from poststructuralism, postmodernism and feminism. *British Journal of Social Work, 28*, 263-277.
- Fleischer, D. Z., & Zames, F. (2001). *The disability rights movement: From charity to confrontation*. Philadelphia, PA: Temple University Press.
- Garland, D. R., Myers, D. R., & Wolfer, T. A. (2008). Social work with religious volunteers: Activating and sustaining community involvement. *Social Work, 53*, 255-265.
- Hahn, H. (2005). Academic debates and political advocacy: The U.S. disability movement. In G. E. May & M. B. Raske (Eds.), *Ending disability discrimination: Strategies for social workers* (pp. 1-24). Boston, MA: Pearson Education, Inc.
- Hayashi, R. (2005). The environment of disability today: A nursing home is not a home. In G. E. May & M. B. Raske (Eds.), *Ending disability discrimination: Strategies for social workers* (pp. 45-70). Boston, MA: Pearson Education, Inc.
- Himchak, M. V. (2005, October). *Social justice and social services within the Catholic church*. Paper presented at the NACSW Convention, Grand Rapids, Michigan.
- Hiranandani, V. (2005). Towards a critical theory of disability in social work. *Critical Social Work, 6*(1). Retrieved from <http://www.uwindsor.ca/criticalsocialwork>.
- Hughson, T. (2010). Social justice and common good: What are they for? In D. McDonald (Ed.), *Catholic social teaching in global perspective* (pp. 1-35). Maryknoll, NY: Orbis Books.
- John Paul II. (2000, December 3). *Homily for the jubilee of the disabled*. Retrieved from http://www.vatican.va/holy_father/john_paul_ii/homilies/documents/hf_jp-ii_hom_200012203_jubildisabled_en.html.

- Kaulemu, D. (2010). Building solidarity for social transformation through the church's social teaching. In D. McDonald (Ed.), *Catholic social teaching in global perspective* (pp. 36-80). Maryknoll, NY: Orbis Books.
- Lollar, D. J., & Crews, J. E. (2003). Redefining the role of public health in disability. *Annual Review of Public Health, 24*, 195-208.
- Long, T. J., & Schuttloffel, M. J. (2006). A rationale for special education in Catholic schools. *Catholic Education, 9*, 443-452.
- Mackelprang, R. W., & Salsgiver, R. O. (1996). People with disabilities and social work: Historical and contemporary issues. *Social Work, 41*, 7-14.
- May, G.E. (2005). The disability discrimination model in social policy practice. In G. E. May & M. B. Raske (Eds.), *Ending disability discrimination: Strategies for social workers* (pp. 113-126). Boston, MA: Pearson Education, Inc.
- Mendes, P. (2009). Teaching community development to social work students: A critical reflection. *Community Development Journal, 44*, 248-262.
- Miller, K. E. (2009). The gift and mission of love: The theological dimension of Catholic social teaching. In D. P. Sullins & A. J. Blasi (Eds.), *Catholic social thought: American reflections on the Compendium* (pp. 3-14). Lanham, MD: Lexington Books.
- National Association of Social Workers. (2008). *Code of Ethics*. Retrieved from <http://www.socialworkers.org/pubs/code/code.asp>.
- O'Brien, D. J. & Shannon, T. A. (Eds.). (2010). *Catholic social thought: The documentary heritage expanded edition*. Maryknoll, NY: Orbis Books.
- Pfeiffer, D. (2005). The conceptualization of disability. In G. E. May & M. B. Raske (Eds.), *Ending disability discrimination: Strategies for social workers* (pp. 25-44). Boston, MA: Pearson Education, Inc.
- Pontifical Council for Justice and Peace. (2005). *Compendium of the social doctrine of the church*. Washington, D.C.: United States Conference of Catholic Bishops.
- Raske, M. (2005). The disability discrimination model in social work practice. In G. E. May & M. B. Raske (Eds.), *Ending disability discrimination: Strategies for social workers* (pp. 99-112). Boston, MA: Pearson Education, Inc.
- Rothman, J. C. (2003). *Social work practice across disability*. Boston, MA: Pearson Education, Inc.
- Saint-Jacques, M.C., Turcotte, D., & Pouliot, E. (2009). Adopting a strengths perspective in social work practice with families in difficulty: From theory to practice. *Families in Society, 90*, 454-461. doi: 10.1606/1044-3894.3926
- Seligman, M., & Darling, R. B. (2007). *Ordinary families, special children: A systems approach to childhood disability* (3rd ed.). New York, NY: The Guilford Press.
- Shank, B. (2007, March). *The call to justice: Social work in Catholic higher education*. Paper presented at the NACSW Convention, Dallas, TX.
- Sullins, D.P., & Blasi, A.J. (2009). *Catholic social thought: American reflections on the Compendium*. Lanham, MD: Lexington Books.
- United States Conference of Catholic Bishops. (1978/1989). *Pastoral statement of U.S. Catholic Bishops on People with Disabilities*. Retrieved from <http://www.ncpd.org/views-news-policy/policy/church/bishops/pastoral>.
- United States Conference of Catholic Bishops. (2005). *Seven themes of Catholic social teaching*. Retrieved from <http://www.usccb.org/beliefs-and-teachings/what-we-believe/catholic-social-teaching-challenges-and-directions.cfm>.
- Vanderwoerd, J. (2007). Who cares? Social welfare in a diverse society. *Social Work & Christianity, 34*(4), 376-399.

Using Catholic Social Teaching to Build Social Capital for Agency Mission and Workforce Development in Faith-Based Social Services and Beyond

Stephen Edward McMillin

This article examines methods and advantages to incorporating spiritually-informed values systems in staff training and professional development in social services, specifically elucidating a rationale for how Catholic Social Teaching (CST) can help gain staff buy-in for organizational missions, even for non-Roman Catholic and nonsectarian social services agencies. First, training mechanisms and processes are examined as to how staff acceptance and understanding of values systems such as CST may develop. Second, this article provides specific examples of how core principles of CST, such as the principles of subsidiarity, solidarity, and preferential option for the poor, have been and can be used in health and social service systems that seem likely to appeal to many practicing social workers. Specific practice examples including providing health and social services in rural areas, overcoming insurance problems, and providing uncompensated care are presented, and implications for relational social work practice and social worker self-determination are discussed.

Catholic Social Teaching (CST) is a rich tradition of scriptural, religious, natural law, political, and social principles

concerning social organization and human dignity. Modern CST since the papacy of John XXIII (1958-1963) has especially affirmed the importance of welfare rights for human dignity (Lustig, 1991) and seems especially important for contemporary social welfare. Frameworks of organizational mission, vision, values, and philosophy are already common in nonprofit health and social services and have been in continuous use for almost forty years now as well (Tourish & Pinnington, 2002). These conceptual developments since the second half of the 20th century point to the potential importance of CST for social work, even for non-Roman Catholic and nonsectarian social services agencies. There is considerable interest in incorporating spiritual value systems into social work practice and staff training, and this article will reflect on ways CST can be valuable to this endeavor.

Educating social workers to practice in spiritually sensitive ways is challenging, in part because of the underdevelopment and poor dissemination of unified theory frameworks that tie spiritual concepts to practice realities (Rothman, 2009). Currently popular frameworks for incorporating spirituality into social work practice and education have been critiqued as poor on theoretical, theological, and conceptual grounds (Dessel, Bolen, & Shepardson, 2011). Given the interest and openness many social workers have toward spiritually-informed values systems, the long history and coherent development of CST principles, and the general similarity of many CST and social work values and principles, CST has the potential to be a good fit that will resonate with many social workers and social service agencies.

An external set of principles or values can be helpful if individual organizations are able to use it in staff training and professional development to augment their own specific mission, vision, values, and operating philosophies. Even large social service organizations where enormous resources are devoted to training do not generally see themselves as providing training merely for the utilitarian purpose of skill acquisition. In addition they seek to provide training and staff development opportunities to help employees gain a better understanding of the organization's unique value system, operating philosophy, and mission so that staff can feel united with these values and internalize them in their work.

This article has four goals. First, informed by a health marketing conceptual framework, it will explore how training may consist of exchange or interpersonal sharing as well as simple education. Second, informed by the social capital and spiritual capital literature, it will consider how spiritually-informed training may also consist of social and spiritual capital exchanges or new opportunities for interpersonal sharing. Third, it will examine three core principles of Catholic Social Teaching that seem likely to enjoy wide acceptability among many social workers, whether or not they work in faith-based agencies. Finally, it will explore real-life practice applications of these three principles to garner ideas for potential training in other social work contexts.

Training as Sharing

When appealing to a values system as an aid to training, the relevance of the values must become apparent to the learner in some way. Whether or not the learner has true freedom to respond to what is taught or feels compulsion is important (Briggs & McMillin, 2012). Rothschild (1999) offers a conceptual framework for how public and social service managers use education, marketing, and legal mandates as ways to influence targeted behavior that seems widely applicable to social workers. Rothschild's conceptualizations of education, marketing, and law refer back to Charles Lindblom's (1977) categorizations of persuasion, exchange, and authority.

Rothschild (1999) suggests that education seeks voluntary acceptance of what is taught, with the knowledge gained as its own (and often only) explicit reward, teaching about the potential benefits of what is learned without directly offering additional benefits. Marketing/exchange seeks voluntary acceptance of what is taught, with the reward including not only the knowledge gained but also some form of persuasion that positive reinforcement or personal benefit has been attained. Social marketing in particular focuses on social objectives and "core beliefs and values" (Kotler & Zaltmann, 1971, p. 11) that are not tied to commercial reward. Law/authority uses coercion and the threat of consequences to achieve desired behavior, especially when education or social marketing has been unable to encourage voluntary change or acceptance of what has been taught or presented.

Rothschild (1999) expresses concern that social marketing exchanges are frequently misidentified or mislabeled as mere education, and he uses the metaphor of an insurance risk premium to suggest that people who are given training that is expected to change them in some way will engage in change resistance behavior depending on how risky the desired behavioral change seems to them. Persons targeted for behavioral change will be willing to pay a higher and higher "risk premium" in the form of resisting or obstructing change when the change the training is supposed to create seems threatening. Rothschild (1999) suggests education efforts alone are likely to be successful only when fear of change is low or even nearly absent, while moderate fear of change may be dissipated by efforts that focus on marketing, so that even somewhat threatening change can be internalized by the learner as personally valuable. Relatively high fear of change may respond only to the imposition of a mandate or law that seeks even involuntary compliance, but while this may compel action, it will never win hearts or minds. As one of the earliest media psychologists suggested over sixty years ago, one cannot expect to sell broad social objectives "like soap," but one can motivate people's social values and make new values accessible to them (Wiebe, 1951, p. 679).

Rothschild's (1999) conceptual framework highlights the importance of personal acceptance and gain from training, as well as the danger posed by training messages that are perceived as threatening and worth resisting. If training in CST principles is perceived by staff as something that adds to their work without benefiting them personally, Rothschild's framework suggests they will be prepared to pay a high "risk premium" of resisting CST. Training messages that have self-evident value will possibly be accepted simply through education, but rich, complex principles such as those found in CST seem likely to benefit from a training presentation that goes beyond mere education to include a sharing or exchange component.

Spiritually-Informed Training as Social and Spiritual Sharing

Capital theory offers a useful way to conceptualize the exchange dimension of training resources. Many social workers are familiar with concepts such as human capital—individual-level resources and potential resources (Becker, 1993)—and social capital—individual and group-level resources that inhere in social relationships (Coleman, 1988; Portes, 1998; Putnam, 2000; Lin, 2001). Capital in this sense is either an active resource or a potential resource that can be invested in and developed over time (Bourdieu, 1983). Social capital has also been distinguished as bonding—strengthening relationships between individuals or in-groups—or bridging—strengthening social relationships across groups and new networks (Putnam, 2000).

Expanded Understandings of Capital

Hyden (2002) offered an expanded understanding of social capital which adds what he terms *blinding and binding* social capital to Putnam's (2000) discussion of bonding and bridging capital, suggesting that a binary conceptualization of social capital is inadequate when the exchange of social capital can have unexpected and even negative consequences. Blinding social capital is an over-reliance on bonding in-group relationships that creates adversarial relationships with out-group members (Hyden, 2002). Members become so wedded to a cause that they are blinded to the consequences of their social capital exchanges.

As examples of blinding social capital, Hyden (2002) cites the pro-life activist who alienates others with tirades on abortion and therefore can unite only with other anti-abortion activists, or the environmentalist who becomes so focused on green living that his or her social circle constricts to others committed to these values. Hyden suggests that binding social capital is somewhere in between bridging and bonding capital, "ad hoc and short term in nature" (Hyden, 2002, p. 8), pragmatic alliances or networks that are not legally enforceable or associated with specific rights and obligations but help out-group participants reach objectives which overlap or are similar to the goals or objectives of in-group members.

Religious social capital has also been characterized as spiritual capital, especially when values of more than one religion are present or when values seem to allude to the sacred or the ultimate without specifying a religious heritage or tradition (Iannacone & Kick, 2003). Religious institutions have also used the term *spiritual capital* to refer to a form of social capital that contains an individual spiritual component (Unruh & Sider, 2005) or as a specific reference to getting staff “buy-in” for the institutional mission and charisma (Lydon, 2009; Grace, 2010). Spiritual capital exchanges as a method to develop and increase staff “buy-in” for organizational mission in social services is a likely starting point for many agencies as they orient new staff and seek to retain existing staff, and is discussed in greater detail below.

Capital Exchanges and Catholic Social Teaching

One mechanism by which incorporating CST into staff training and professional development can be successful is to motivate positive exchanges of social and spiritual capital. Catholic Social Teaching can be a means to explore how spiritual capital can be positively exchanged and deployed to increase staff commitment and understanding of organizational mission and values in ways that allow employees’ values to coalesce with those of their employers. This framework also recognizes that negative, “blinding” religious social capital and spiritual capital exchanges can result in harm and in decreased staff commitment to organizational mission.

However, such a framework also suggests that intermediate and divergent social and spiritual capital exchanges emerging from an improved understanding of CST can form diverse values coalitions that can include even social workers with very dissimilar views and ideologies not otherwise usually oriented to spiritual mission. Recent research suggests that large numbers of individual social workers acknowledge valuing religion and spiritual concepts (Canda and Furman, 1999; Sheridan, 2004; Larsen, 2011), and smaller but still large numbers of social workers report active religious affiliation and regular religious practice or attendance at worship (Larsen, 2011). In-depth qualitative interviews with devout Christian social workers suggest that they are a sometimes surprisingly diverse and independent group, often critical of both the U. S. social work establishment and their own churches and faith traditions (Thaller, 2011). Smith-Osborne and Rosenwald (2009) found that a majority of religious social workers in their sample still tended to vote Democratic, with a majority of Protestant respondents self-identifying as politically conservative and a majority of Roman Catholic, Jewish, and “other” religion respondents self-identifying as politically liberal. Research suggests that social workers who are religious themselves are more likely to incorporate religious dimensions into their practice (Mattison, Jayaratne, & Croxton, 2000; Sheridan, 2004; Stewart, Koeske, & Koeske, 2006). While leveraging Catholic Social Teaching to promote spiritual capital exchanges is promising, Rothschild’s (1999) risk premium of change resistance seems likely among such a diverse group.

Binding social capital may be present when secular employees hired by a religious organization remain somewhat suspicious of the mission, but are able to recognize values that they share in specific principles of CST values. Indeed, over time the homogeneity of shared values may result in true bonding capital, as staff members of the organization recognize one another as members of a strongly committed in-group rooted in values of CST. This development of a new in-group, dependent not on formal church denomination membership, but on shared values lived out every day in working together side by side, could bring to the social service agency the kind of camaraderie often seen in religiously and politically diverse Catholic Worker Houses (Troester, 1993; McKanan, 2008) and secular settlement houses (Koerin, 2003; Yan, 2004).

Given the fear of change and blinding spiritual capital exchanges possible when sensitive spiritual issues arise in diverse groups, there seems little point in introducing staff to CST as either self-evident education or fearfully mandated requirements. The goal is to convince, not condescend or compel. Staff in social service agencies will believe in CST when powerful examples of the principles of CST touch their hearts, minds, and existing values.

Catholic Social Teaching: Spiritual Principles Worth Sharing

Catholic Social Teaching has been termed a “best kept secret” (Deberri, Hug, Henriot, & Schultheis, 2003) that is not widely known or understood. It is often defined by core principles associated with a recognized canon of magisterial teaching ranging from documents of the Second Vatican Council, papal encyclicals stretching over the past century, and teaching documents of the World Synod of Roman Catholic bishops and national episcopal conferences. Jesuit priest and former president of Catholic Charities USA Fred Kammer (2004, p. 19) offers a pithy summary of CST with the formulation “doing faithjustice,” the compound term suggesting the indivisibility of living out a life of faith from doing acts of justice. Kammer further elaborates three foundational principles for doing faithjustice from the Hebrew Scriptures: 1) creation/human goodness, 2) stewardship, and 3) interdependence. This section will highlight three core principles of Catholic Social Teaching that seem especially promising for emphasis in training content: the principles of subsidiarity, solidarity, and the preferential option for the poor.

Subsidiarity

In CST, the principle of subsidiarity was first elucidated in 1931 in *Quadregesimo Anno* (“In the Fortieth Year”), the encyclical letter of Pope Pius XI on the fortieth anniversary of *Rerum Novarum* (“Of New Things”), the

1891 encyclical of Pope Leo XII that helped first establish CST. Pius XI faced unprecedented pressure to respond to the political developments of the first third of the twentieth century, in which industrialized western democracies were committed to capitalism that continued to redistribute wealth upward and create massive inequality (Piketty & Saez, 2003), while Europe was wracked by totalitarian movements including Communism, Nazism, and Fascism which claimed to redistribute wealth more justly but sharply restricted freedom (Landé, 1973).

The principle of subsidiarity held that neither the capitalist extreme of radical individualism nor the communist extreme of state control of almost all wealth were desirable. Rather, a middle ground should be maintained where individuals and groups have the freedom to organize society and respond to social needs, while the role of government is to provide what cannot be provided at lower levels and to create the conditions that empower individuals, families, and local communities and respects their dignity (Kammer, 2004). The individual is not subsumed into the state, but neither is the state absolved from responsibility to create and regulate social conditions in ways that allow individuals, families, and communities to prosper. In this sense, the principle of subsidiarity is truly a principle of interdependence as referenced by Kammer (2004).

Solidarity

This idea has been developed further into the principle of solidarity. In his 1967 encyclical letter, *Populorum Progressio* (“On the Progressive Development of Peoples”), Pope Paul VI used some fiery language to warn wealthy nations that if they did not share their excess wealth with poorer nations, they would face both the wrath of God and the unrest of the poor (*Populorum Progressio* 49).¹ The United States Conference of Catholic Bishops (USCCB) helped popularize similar ideas in the “peace pastoral,” their 1983 pastoral letter, *The Challenge of Peace* that reflected on the just war tradition while emphasizing unjust inequality as a source of much violence in the world (Kammer, 2004). Pope John Paul II, so often associated with the Solidarity movement in Poland, used the term “solidarity” explicitly in *Sollicitudo Rei Socialis* (“The Social Concern”), the encyclical letter he issued in 1987 on the twentieth anniversary of *Populorum Progressio*, stating “interdependence must be transformed into solidarity based upon the principle that the goods of creation are meant for all. That which human industry produces...must serve equally for the good of all” (*Sollicitudo Rei Socialis* 39). Note that here Pope John Paul II also explicitly references the interdependence noted by Kammer (2004), suggesting that such interdependence must be made sustainable through the elimination of “the ‘structures of sin’ and the sins which they produce” (*Sollicitudo Rei Socialis* 39).

Preferential Option for the Poor

The concept of the preferential option for the poor has been so popularized that its non-canonical forms may be more familiar to many, especially non-Roman Catholics. Pope Leo XIII in *Rerum Novarum* explicitly states that:

... when there is question of defending the rights of individuals, the poor and badly off have a claim to especial consideration. The richer class have many ways of shielding themselves, and stand less in need of help from the State; whereas the mass of the poor have no resources of their own to fall back upon, and must clearly depend upon the assistance of the State. And it is for this reason that wage-earners, since they mostly belong in the mass of the needy, should be specially cared for and protected by the government (*Rerum Novarum* 37).

Leo XIII refers not simply to the poor as an abstraction, but explicitly to wage-earners, what today is commonly referred to as the low wage labor market or the working poor. The concept of the preferential option for the poor was further popularized with theologian Gustavo Gutiérrez’s book, *A Theology of Liberation*, which has gone through several editions (1988, 1973). As with the principle of solidarity, the preferential option for the poor would be further emphasized by the USCCB in their 1986 pastoral letter *Economic Justice for All*, a clever play on the words of the Pledge of Allegiance which seemed in part to be a response to Ronald Reagan’s cutbacks to social programs (Gannon, 1987). Pope John Paul II also references “love for others, and in the first place love for the poor,” in *Centesimus Annus* (“The Hundredth Year”) marking the hundredth anniversary of *Rerum Novarum* (*Centesimus Annus* 58).

This review of canonical sources for these CST principles still seems well summarized by Kammer’s neologism, doing “faithjustice”—putting faith into practice through pursuit of social justice and social service. Roman Catholic social workers and agency staff may be especially motivated by the historic tradition and religious authority of different popes endorsing and expanding these principles. However, for many professionals simply doing “faithjustice” in their daily work, in an agency that shares this commitment and explicitly links its work to a set of coherent principles, seems likely to create buy-in for staff, especially if they are offered appropriate training and professional development opportunities. Connecting these principles to doing faithjustice, giving workers tangible evidence that their agency is living its values, is the best lesson any kind of training or staff development could teach regarding mission.

Putting Catholic Social Teaching Principles into Practice

Detailing the rich history and theology behind specific principles of Catholic Social Teaching is complemented by real-life examples of how organizations and individuals have attempted to live out these principles in practice. This section will connect the three core principles of Catholic Social Teaching discussed above to actions and practice decisions made in health and social service agencies that offer powerful examples of how these principles have been put into action.

The practice examples below, and the principles of subsidiarity, solidarity, and preference for the poor which sustain them, are likely to be powerful training messages to many social service professionals today. A challenge lies in doing the training work of connecting the principles to the real-life work of the agency, the real-life decisions made based on these principles, and the people that were saved or helped as a result. Many faith-based health and social service organizations are already doing faithjustice, but could benefit in doing a better job of making sure their lived mission is consistently passed on to all staff in the form of ongoing training and professional development. There is perhaps a natural modesty that inhibits those who live out these principles from recording their “good deeds” for fear of being seen as bragging.

Staff training managers for CST-motivated organizations may benefit from keeping an organizational “résumé” or curriculum vitae that records specific aspects of how, in daily practice, the organization made a principled decision at significant organizational cost. The employees of the agency may be eager to hear these stories and reflect on them in accordance with these principles. They need the organizational opportunities that make this possible.

Health and Social Service Agencies in Rural Areas

The principle of subsidiarity has special resonance in the aftereffects of the current economic climate, often dubbed the Great Recession, when nonprofit health and social services face unprecedented challenges at the local level. Roman Catholic health and social service agencies in rural areas have responded to these pressures in ways focused on embracing CST (Thomson, 2010). Social capital in health and social services is especially important in rural communities, where “even the wealthy are interdependent” (Belanger, 2005, p. 84) and those with the most resources still face a more direct and personal exposure to those who have fewer resources (or none at all).

Roman Catholic health networks that extend across rural areas have taken the principles of subsidiarity and solidarity to heart in several specific ways, some of which have involved compromise for the greater good. Some rural hospitals have opted to become critical access hospitals, investing in 24-hour readiness for emergency care and concentrating on short hospitalization while building partnerships with other health centers to provide longer-term addiction, psychiatric, and hospice care (Thomson, 2010). These rural agencies have shown solidarity with their neighbors, taking on the financial burden of 24-hour operation despite financial pressures which often call out for cutbacks and reduction of existing services rather than expansion. In a different sense, rural patients and clients might be framed as a variation of the poor; although they may or may not be personally impoverished, their rural location means they face a unique poverty of resources that local health and social service organizations have intentionally attempted to address at considerable organizational and financial cost.

Larger Health and Social Service Systems in Urban Areas

Larger health and social service systems located in urban and suburban areas have also faced dilemmas in serving the uninsured which call for consideration of higher-order principles, and they have been able to use their size in ways that won crucial victories for the poor. When many state Medicaid programs turned to managed care in the 1990s, requiring that all Medicaid participants enter a Medicaid HMO, many health providers were reluctant to extend state contracts that could mandate a minimum proportion of Medicaid participants in the HMO plan (Pallarito, 1997). When in the mid-1990s for-profit providers fled New York’s HMO plan, which was about to begin requiring three Medicaid participants for every one private-pay client, church-sponsored Fidelis Care bought out its for-profit rivals, protecting the health care access for 22,000 Medicaid participants and providing a jump start on enrolling more Medicaid participants as other for-profit providers prepared to leave the market (Pallarito, 1997).

Maintaining a preferential option for the poor can require work on the micro-level as well, putting the principle of subsidiarity in action through staff training and expansive evaluation. As health and social service organizations count up the burgeoning totals of the uncompensated care they deliver to those who have no insurance and no independent means to pay, some organizations make it a teachable moment, explicitly referencing their uncompensated care provision as a necessary part of the social safety net explicitly motivated by a belief in the preferential option for the poor (Doderer, 2011). Other faith-based organizations make a point of specifically evaluating themselves on how well their outreach draws in those without insurance, citizenship, or support (Romero, Kwan, Swearingen, Nestler, & Cohen, 2011). One Midwestern hospital system, founded and sponsored by Roman Catholic sisters, proudly points to the original handwritten patient ledgers kept by the sisters which noted the funding source for indigent patients as “our dear Lord’s;” today this system turns away physicians who decline to

take Medicaid-covered patients (Sack, 2011, p. A12). Stories such as these not only increase staff buy-in for mission, but connect staff to community and heritage that helps reinforces the principles in interpersonal ways.

Discussion

Catholic Social Teaching could be an ideal values system to inform staff training and professional development in social work, because social work values align with the historic principles of CST. Both social work and CST largely grew up together in the past 120 years, and they will likely interact and inform one another for centuries longer.

The dilemma in staff training is often in knowing how to balance what is meant to be learned with the receptivity of the learner to learn it. Professional education for social workers already contains significant emphasis on mastering technical competencies and passing licensure exams, but offering social workers a values system they will accept as their own is a more challenging matter. Only the most basic values are accepted as matters of mere education, while other values simply cannot be mandated effectively. In more complex language, this means sharing social or spiritual capital.

While CST may promote bonding social or spiritual capital over time, it is more likely to attract staff attention by demonstrating that what is presented as organizational or institutional values may speak to their own values in a meaningful way. The CST principles of subsidiarity, solidarity, and preference for the poor can encourage the formation of new communities of practice, as teammates engage in new forms of sharing with one another and new understandings of what they do in their practice of social work together every day. In many cases this means making sure that CST is no longer hidden or a “best-kept secret” but rather that all employees of a social service agency can easily see and identify with how their organization lives out its commitment to core principles such as the three principles of CST highlighted here.

There are many potential obstacles on this path. Social services have become more motivated by individualistic values in recent decades (McMillin, 2011) which are in stark contrast to the communitarian values of CST. Some social work organizations may be reticent to adopt a robust philosophical and humanistic framework because it is also rooted in explicit spiritual and theological principles. Conversely, executives of faith-based health and social services also note the danger of over-emphasizing mission such that it shuts out accountability and the “hard skills” for fear of seeming to lack compassion (Giganti, 2004, p. 9).

However, both CST and the social work profession have proven durable and robust for over the past century. Just as social work has emphasized respecting the self-determination of the client, CST holds tremendous promise as a values system that allows both self-determination for workers and agencies, as well as an invitation to be part of something that goes beyond individualism, an invitation to communitarian values with a rich spiritual and conceptual history. For many social workers and social work agencies, they only need to receive the invitation in order to say yes. ❖

References

- Becker, G. S. (1993). *Human capital: A theoretical and empirical analysis, with special reference to education* (3rd ed.). Chicago, IL; London, UK: The University of Chicago Press.
- Belanger, K. (2005). In search of a theory to guide rural practice: The case for social capital. In L. H. Ginsberg (Ed.), *Social work in rural communities* (4th ed., pp. 75-93). Alexandria, VA: Council on Social Work Education.
- Bourdieu, P. (1983). Forms of capital. In J. G. Richardson (Ed.), *Handbook of theory and research for the sociology of education* (pp. 241-258). New York, NY: Greenwood Press.
- Briggs, H. E., & McMillin, S.E. (2012). Implementing evidence-based management and evidence-based practice in community agencies: Practice principles and lessons from a case study. In T. L. Rzepnicki, S. G. McCracken & H. E. Briggs (Eds.), *The task-centered approach to evidence-based and integrative practice: Reflections on history and implementation*. Chicago, IL: Lyceum.
- Canda, E. R., & Furman, L. D. (1999). *Spiritual diversity in social work practice: The heart of helping*. New York: Free Press.
- Coleman, J. S. (1988). Social capital in the creation of human capital. *The American Journal of Sociology*, 94(Supplement: Organizations and Institutions: Sociological and Economic Approaches to the Analysis of Social Structure), S95-S120.
- Deberri, E. P., Hug, J. E., Henriot, P. J., & Schultheis, M. J. (2003). *Catholic Social Teaching: Our best kept secret* (4th ed.). Maryknoll, NY: Orbis.
- Dessel, A., Bolen, R., & Shepardson, C. (2011). Can religious expression and sexual orientation affirmation coexist in social work? A critique of Hodge's theoretical, theological, and conceptual frameworks. *Journal of Social Work Education*, 47(2), 213-234. doi:10.5175/JSWE.2011.200900074
- Doderer, M. (2011). Catholic hospitals and the safety net. *American Medical Association Journal of Ethics*, 13(8), 569-570.
- Gannon, T. M. (1987). *The Catholic challenge to the American economy: Reflections on the US bishops' pastoral letter on Catholic Social Teaching and the U.S. economy*. New York: Macmillan.
- Giganti, E. (2004). Ministry leadership: "Pathways of Leadership" formation at Mercy. *Health Progress*, 85(4), 7-9.
- Grace, G. (2010). Renewing spiritual capital: An urgent priority for the future of Catholic education internationally. *International Studies in Catholic Education*, 2(2), 117-128.
- Gutiérrez, G. (1988, 1973). *A theology of liberation: History, politics, and salvation*. Maryknoll, N.Y.: Orbis Books.
- Hyden, G. (2002). Divergent social capital and the problems of building social capital: Evidence from Tanzania. Paper presented at the annual meeting of the American Political Science Association, Boston Marriott Copley Place, Sheraton Boston & Hynes Convention Center, Boston, MA. Retrieved from: [Http://www.allacademic.com/meta/p66378_index.html](http://www.allacademic.com/meta/p66378_index.html). Unpublished manuscript.
- Iannaccone, L. R., & Klick, J. (2003). capital: An introduction and literature review. Retrieved from http://www.spiritualcapitalresearchprogram.com/research_review.asp. Unpublished manuscript.
- Kammer, F. (2004). *Doing faithjustice: An introduction to Catholic social thought* (Rev ed.). New York: Paulist Press.
- Koerin, B. (2003). The settlement house tradition: Current trends and future concerns. *Journal of Sociology & Social Welfare*, 30(2), 53-68.
- Kotler, P., & Zaltman, G. (1971). Social marketing: An approach to planned social change. *Journal of Marketing*, 35(3), 3-12.
- Landé, C. H. (1973). Networks and groups in Southeast Asia: Some observations on the group theory of politics. *The American Political Science Review*, 67(1), 103-127.
- Larsen, K. M. (2011). How spiritual are social workers? An exploration of social work practitioners' personal spiritual beliefs, attitudes, and practices. *Journal of Religion & Spirituality in Social Work: Social Thought*, 30(1), 17-33. doi:10.1080/15426432.2011.542713
- Lin, N. (2001). *Social capital: A theory of social structure and action*. Cambridge; New York, NY: Cambridge University Press.
- Lindblom, C. E. (1977). *Politics and markets: The world's political-economic systems*. New York, NY: Basic Books.
- Lustig, B. A. (1991). Natural law, property, and justice: The general justification of property in John Locke. *Journal of Religious Ethics*, 19(1), 119.
- Lydon, J. (2009). Transmission of the charism: A major challenge for Catholic education. *International Studies in Catholic Education*, 1(1), 42-58. doi:10.1080/19422530802605481
- Mattison, D., Jayaratne, S., & Croxton, T. (2000). Social workers' religiosity and its impact on religious practice behaviors. *Advances in Social Work*, 1(1), 43-59.
- McKanan, D. (2008). *The Catholic Worker after Dorothy: Practicing the works of mercy in a new generation*. Collegeville, Minn.: Liturgical Press.
- McMillin, S.E. (2011). Faith-based social services: From communitarian to individualistic values. *Zygon: Journal of Religion and Science*, 46(2), 482-490. doi:10.1111/j.1467-9744.2010.01189.
- Pallarito, K. (1997). Unafraid of Medicaid: Catholic-sponsored HMO buys for-profit rival, expanding New York network. *Modern Healthcare*, 27(35), 33.

- Piketty, T., & Saez, E. (2003). Income inequality in the United States, 1913-1998. *Quarterly Journal of Economics*, 118(1), 1-39.
- Pope John Paul II. (1987). *Sollicitudo rei socialis*. Encyclical letter of Pope John Paul II on the twentieth anniversary of Populorum Progressio. Retrieved from: http://www.vatican.va/holy_father/john_paul_ii/encyclicals/documents/hf_jp-ii_enc_30121987_sollicitudo-rei-socialis_en.html
- Pope John Paul II. (1991). *Centesimus annus*: Encyclical letter of Pope John Paul II on the hundredth anniversary of *Rerum Novarum*. Retrieved from: http://www.vatican.va/holy_father/john_paul_ii/encyclicals/documents/hf_jp-ii_enc_01051991_centesimus-annus_en.html
- Pope Leo XIII. (1891). *Rerum novarum*. Encyclical letter of Pope Leo XIII on capital and labor. Retrieved from: http://www.vatican.va/holy_father/leo_xiii/encyclicals/documents/hf_l-xiii_enc_15051891_rerum-novarum_en.html
- Pope Paul VI. (1967). *Populorum progressio*. Encyclical letter of Pope Paul VI on the development of peoples. Retrieved from: http://www.vatican.va/holy_father/paul_vi/encyclicals/documents/hf_p-vi_enc_26031967_populorum_en.html
- Pope Pius XI. (1931). *Quadregseimo anno*. Encyclical letter of Pope Pius XI on the reconstruction of the social order. Retrieved from: http://www.vatican.va/holy_father/pius_xi/encyclicals/documents/hf_p-xi_enc_19310515_quadregseimo-anno_en.html
- Portes, A. (1998). Social capital: Its origins and applications in modern sociology. *Annual Review of Sociology*, 24, 1-24.
- Putnam, R. D. (2000). *Bowling alone: The collapse and revival of American community*. New York, NY: Simon & Schuster.
- Romero, D., Kwan, A., Swearingen, J., Nestler, S., & Cohen, N. (2011). St. Vincent's Catholic Medical Center: Community health assessment qualitative data collection report. www.cidny.org
- Rothman, J. (2009). Spirituality: What we can teach and how we can teach it. *Journal of Religion & Spirituality in Social Work: Social Thought*, 28(1-2), 161-184. doi:10.1080/15426430802644198
- Rothschild, M. L. (1999). Carrots, sticks, and promises: A conceptual framework for the management of public health and social issue behaviors. *The Journal of Marketing*, 63(4), 24-37. doi:10.1080/15245004.2000.9961146
- Sack, K. (2011, August 21). Nuns, a 'dying breed,' fade from leadership roles at Catholic hospitals. *New York Times*, pp. A12.
- Sheridan, M. J. (2004). Predicting the use of spiritually-derived interventions in social work practice. *Journal of Religion & Spirituality in Social Work: Social Thought*, 23(4), 5-25. doi:10.1300/J377v23n04_02
- Smith-Osborne, A., & Rosenwald, M. (2009). Exploring the relationship between religiosity and political ideology among social workers. *Journal of Religion & Spirituality in Social Work: Social Thought*, 28(4), 393-404. doi:10.1080/15426430903263153
- Stewart, C., Koeske, G. F., & Koeske, R. D. (2006). Personal religiosity and spirituality associated with social work practitioners' use of religious-based intervention practices. *Journal of Religion & Spirituality in Social Work: Social Thought*, 25(1), 69-85. doi:10.1300/J377v25n01_05
- Thaller, J. (2011). Resilience and resistance in professional identity making: Gleanings from the classroom experiences of devout Christian social workers. *Journal of Religion & Spirituality in Social Work: Social Thought*, 30(2), 144-163. doi:10.1080/15426432.2011.567115
- Thomson, S. C. (2010). Critical access hospitals: Catholic social teaching in action. *Health Progress*, 91(5), 26-32. www.chausa.org
- Tourish, D., & Pinnington, A. (2002). Transformational leadership, corporate cultism and the spirituality paradigm: An unholy trinity in the workplace? *Human Relations*, 55(2), 147-172. doi:10.1177/0018726702055002181
- Troester, R. R. (1993). *Voices from the Catholic Worker*. Philadelphia: Temple University Press.
- United States Conference of Catholic Bishops. (1983). The challenge of peace: God's promise and our response. A pastoral letter on war and peace by the National Conference of Catholic Bishops. Retrieved from: http://www.usccb.org/_cs_upload/7846_1.pdf
- United States Conference of Catholic Bishops. (1986). Economic justice for all: Pastoral letter on Catholic social teaching and the U.S. economy. Retrieved from: http://www.usccb.org/upload/economic_justice_for_all.pdf
- Unruh, H. R., & Sider, R. J. (2005). *Saving souls, serving society: Understanding the faith factor in church-based social ministry*. Oxford, UK; New York, NY: Oxford University Press.
- Weithman, P. J. (1993). Natural law, property, and redistribution. *Journal of Religious Ethics*, 21(1), 165.
- Wiebe, G. D. (1951). Merchandising commodities and citizenship on television. *The Public Opinion Quarterly*, 15(4), 679-691.
- Yan, M. C. (2004). Bridging the fragmented community: Revitalizing settlement houses in the global era. *Journal of Community Practice*, 12(1-2), 51-69. doi:10.1300/J125v12n01_05

“To All People of Good Will”: Catholic Social Teaching, Natural Law, and Racial Disproportionality in Social Work

Kathleen Belanger & Owen M. Smith

Catholic Social Teaching was developed not only from religious roots, but from natural law ethical theory, which provides an objective philosophical foundation. Thus, it is directed to all persons of good will, not just Catholics or Christians. This collection of doctrine addresses social issues of pressing importance in society, issues important to social workers as they work with systems of all sizes. In addition, the teachings challenge all of us, particularly social workers, to work toward a just society. This article demonstrates the challenge through application to one of the most serious injustices in American society today: racial disproportionality.

The term “Catholic Social Teaching” refers to a collection of doctrines formally developed over the past hundred and thirty years with its ultimate origin in the life and teachings of Jesus Christ as revealed in sacred Scripture and Church tradition. The core principles of this teaching, however, are accessible not only to those who belong to the Catholic Church or even to Christians or spiritual persons in general. Rather, these teachings are accessible to and can be recognized by “all people of good will” (Pope John XXIII, *Pacem in Terris* (1963) §1) through the use of reason to reflect on human nature and the role of humans in society. Our purpose in this paper is to articulate the basic principles of Catholic Social Teaching, discuss their independent justification by an objective philosophical theory (natural law ethics), and to demonstrate their relevance to social issues in general and social work in particular by applying them to several codes of ethics in social work and to racial disproportionality in child welfare, an issue of striking injustice that permeates throughout social work.

I: Catholic Social Teaching

Overview of Catholic Social Teaching

Catholic Social Teaching is a body of thought and writings that refer to “a comprehensive tradition of social ethics derived from multiple sources within the Catholic Church tradition, including scripture, papal encyclicals, episcopal statements, and writings of theologians” (Brenden, 2007 p. 472). Massaro (2012) lists 13 documents of the Catholic Church written between 1891 and 2009, most of which are encyclicals, or letters written by the pope that particularly relate to social issues at the time, not only to “the faithful” but to the whole world. The documents reflect the social issues of the times, including political changes (capitalism vs. socialism), changes in the nature of work, and changes in the global economy. It is important to note that Catholic Social Teaching is not a specific set of laws, standards, codes, or even documents, but a body of wisdom that continues to develop, with interpretations offered at a variety of levels, including public homilies on the parish level and political statements on the state and national levels. However, the general agreement of the teachings is collected in the Compendium of the Social Doctrine of the Catholic Church (the Compendium), developed by the Pontifical Council for Justice and Peace (Pontifical Council, 2004). The Compendium contains “the most relevant theological, philosophical, moral, and cultural considerations of this teaching” and presents “in a complete and systematic manner...the Church’s social teaching, which is the fruit of careful magisterial reflection” (Pontifical Council, 2004, Introduction, §8). The U.S. Council of Catholic Bishops (USCCB) outlines seven themes (2005) while a particularly concrete variation with ten themes is found at the Office for Social Justice, Archdiocese of St. Paul and Minneapolis site (Office for Social Justice, 2006).

Table 1: Themes of Catholic Social Teaching

The Compendium of the Social Doctrine of the Church (The Pontifical Council for Justice & Peace)	Seven Themes of Catholic Social Teaching (The United States Conference of Catholic Bishops)	Key Principles of Catholic Social Teaching (Office for Social Justice, Archdiocese of St. Paul and Minneapolis)

Human Dignity	Life and Dignity of the Human Person	Human Dignity
The Common Good	Family, Community, and Participation in Society	Community and the Common Good
Subsidiarity	Protection of Human Rights and Fulfillment of Social Responsibilities	Protection of Human Rights and Fulfillment of Social Responsibilities
The Compendium of the Social Doctrine of the Church (The Pontifical Council for Justice & Peace)	Seven Themes of Catholic Social Teaching (The United States Conference of Catholic Bishops)	Key Principles of Catholic Social Teaching (Office for Social Justice, Archdiocese of St. Paul and Minneapolis)
Solidarity	Solidarity among Members of the Human Family	Global Solidarity
The Dignity of Work and the Rights of Workers	The Dignity of Work and the Rights of Workers	The Dignity of Work and the Rights of Workers
Preferential Option for the Poor and Vulnerable	Preferential Option for the Poor and Vulnerable	Preferential Option for the Poor and Vulnerable
Stewardship of God's Creation	Stewardship of God's Creation	Stewardship of God's Creation
Participation in the Economic, Political, and Cultural Life of Society	Participation in the Economic, Political, and Cultural Life of Society	Participation in the Economic, Political, and Cultural Life of Society
	Constructive Role for Government	
	The Promotion of Peace	

This table contains more than a simple enumeration of social concerns; it contains a hierarchical expression of the principles guiding Catholic Social Teaching. These principles, however enumerated or organized, address the five systems prominent in social work practice: the individual, the family, societal groups, organizations, and communities. In addition, the principles address the interdependence of these systems and the nature of social justice, particularly noting populations that have been disadvantaged by and/or within current structures (Shank, 2007).

Four Principles (Themes) and Their Relationship with Systems for Practice

In its most simple organization, the most basic principle of Catholic Social Teaching focuses on the individual, while three further principles focus on the larger society. Each of these principles, however, addresses the reciprocal rights and responsibilities between individuals and societies.

The first of these principles, *human dignity*, recognizes the foundational importance of the individual person, the micro-level of social work practice. The USCCB states that human dignity is “the foundation of a moral vision for society” as well as “the foundation of all the principles of our social teaching” (2005). While human dignity is a fundamental concern in Catholic Social Teaching, it is important to realize that both in divine revelation and in natural law ethical theory, “a person must seek to realize and respect human goods not merely in himself and for his own sake but also in common, in community” (Finnis, 1980, p. 161). A person makes moral judgments not in isolation from other individuals, but within the context of the various communities to which that person belongs. In fact, the good of the community is essential to the good of the self because the community is “a ‘means’ indispensable to the realizing of most aspects of human well-being” (Finnis, 1980, p. 380). As a result, Finnis observes, “very many, even most, of our concrete moral responsibilities, obligations, and duties have their basis in the requirement to foster the common good of one’s communities” (p. 125).

Three fundamental principles of Catholic Social Teaching address the social nature of human beings, or people in families, groups, organizations and communities:

The common good is defined as “the sum total of social conditions which allow people, either as groups or as individuals, to reach their fulfillment more fully and more easily” (Second Vatican Ecumenical Council, *Gaudium et Spes*, 26: AAS 58, 1046, cited in Pontifical Council, 2004, 164). The principle of

the common good recognizes the increasing levels of human associations proceeding from the mezzo-level of families and groups through the macro-level of organizations and communities. This principle is a direct extension of concern for human dignity since “how we organize our society...directly affects human dignity” (USCCB, 2005).

Subsidiarity is the principle that “nothing should be done by a higher and larger institution that cannot be done as well by a smaller and lower one” (Hehir, 2010, 92). The principle reflects that individual freedom and responsibility are best preserved when decisions and actions are made by social entities, including “intermediate groups” and organizations that are closer to individuals. “Just as it is gravely wrong to take from individuals what they can accomplish by their own initiative and industry and give it to the community, so also it is an injustice and at the same time a grave evil and disturbance of right order to assign to a greater and higher association what lesser and subordinate organizations can do” (Pontifical Council, 2004, 186). “The principle of subsidiarity protects people from abuses by higher-level social authority and calls on these same authorities to help individuals and intermediate groups to fulfill their duties. This principle is imperative because every person, family, and intermediate group has something original to offer to the community” (Pontifical Council, 2004, 187). In addition, when persons, families, and intermediate groups are not able to provide for and protect themselves, the role of “the State to step in to supply certain functions” particularly when there is great “social imbalance or injustice where only” their intervention could “create conditions of greater equality, justice, and peace.” (Pontifical Council, 2004, 188).

Solidarity “highlights in a particular way the intrinsic social nature of the human person, the equality of all in dignity and rights and the common path of individuals and peoples towards an ever more committed unity. Never before has there been such a widespread awareness of the bond of interdependence between individuals and peoples, which is found at every level” (Pontifical Council, 2004, 192). It is through solidarity, working together, recognizing our communion that we can express Christian love; in fact, “Solidarity is the life and message of Jesus Christ” (Pontifical Council, 2004, 196). Based on the “intrinsic social nature” of human beings and highlighting “the equality of all in dignity and rights,” solidarity is well grounded in the fundamental principle of human dignity as it promotes “the common path of individuals and peoples towards an ever more committed unity” (Pontifical Council, 2004, 192). In fact, the basis of solidarity is community.

The remaining principles of Catholic Social Teaching described in the chart flow naturally from the fundamental importance of human dignity, detailing specific concerns that must be addressed by human associations on the mezzo- and macro-levels to ensure that “human dignity can be protected and a healthy community can be achieved” (USCCB, 2005).

II: The Necessity for Natural Law Ethics in Catholic Social Teaching: Engaging All People of Good Will

In composing the *Compendium of the Social Doctrine of the Church*, the Pontifical Council for Justice and Peace made the decision to address the document not only to Catholics, but to the members of “other Churches and Ecclesial Communities, to followers of other religions, as well as to all people of good will who are committed to serving the common good” (Pontifical Council, 2004, p. 12). This address demonstrates the recognition that the Catholic Church cannot singlehandedly bring about worldwide social justice; it is the responsibility of all people of good will, including those who do not accept divine revelation or who interpret it differently than the Roman Catholic Church. This being the case, social teaching cannot be based solely on theology or religion.

The Church therefore provides an independent, secular foundation for its social teachings. In his address at Fordham University School of Law on January 24, 2012, Cardinal-designate Timothy M. Dolan of New York said, “Natural law is a concept of objective truth, not religious preference...natural law theory is not uniquely Catholic, it’s human. Some of the greatest exponents of the natural law, like Aristotle and Cicero, had never heard of the Catholic Church. These things we teach are not true because they happen to be taught by the church. We teach them because they happen to be true.” Later in the speech he added, “It’s not a Catholic thing. It’s a natural thing. It’s a human thing.” (Catholic News Service, 2012).

Since philosophy, in particular natural law ethical theory, can provide a common ground for all to understand and accept the key principles of Catholic Social Teaching, Catholic authorities were careful to include in their documents a philosophical foundation, in particular natural law ethical theory for their teachings, and to demonstrate the harmony between the conclusions of natural law ethical theory and Catholic theology in Catholic Social Teaching.

Natural Law Ethical Theory

Natural law ethical theory traces its roots to the works of the Greek philosophers Plato and Aristotle. The classical formulation of this theory is found in the works of Thomas Aquinas (1225-1274), in particular his *Summa*

Theologiae, and natural law ethical theory continues to be a dynamic ethical theory expounded and defended by contemporary philosophers, such as the distinguished philosopher of law, John Finnis (1980).

Natural law ethical theory is based on reflection on human nature and the role of humans in society.² Its first component is a set of basic values, or within this terminology, fundamental ways in which humans flourish and reach their potential (see Finnis, 1980, pp. 23 and 33).

The basic values within natural law ethical theory are identified by reflecting on our own experience as human beings. In *Natural Law and Natural Rights* (1980), widely regarded as the definitive contemporary work on natural law ethical and political theory, Finnis explains that according to Aquinas, “practical reasoning begins not by understanding [human nature] from the outside, as it were, by the way of psychological, anthropological, or metaphysical observations and judgments defining human nature, but by experiencing one’s nature, so to speak, from the inside” (p. 34). Natural law ethicists contend that these values, both individually and as a set, are acknowledged, at least implicitly, by everyone and “are in one way or another used by everyone who considers what to do” (Finnis, 1980, p. 23). More importantly, they “can be participated in by an inexhaustible number of persons in an inexhaustible variety of ways or on an inexhaustible variety of occasions” (p. 155).³

The second component of natural law ethical theory is a set of basic principles to guide moral decision-making so that people can distinguish between morally right actions and morally wrong actions (see Finnis, pp. 23 and 100ff). In natural law ethical theory, the basis for moral obligation is the necessity of making reasonable (prudent) decisions about pursuing the basic values. The principles that guide this pursuit require discretion, maturity and wisdom to apply appropriately. For this reason, since the time of Plato (*Republic* IX.582a-e) and Aristotle (*Nicomachean Ethics* I,4:1095b5-13; see also X,9:1179b27-30), natural law ethical theorists have explained the moral decision-making process by referring to the notion of an ideal human being, that is, a mature, experienced, and well-disciplined person of good character, who can serve as the model for practical wisdom.

The Philosophical Character of Natural Law Ethical Theory

Finally, natural law ethical theory must be distinguished from divine command ethical theories, in which ethical principles are revealed by and take their moral force from a divine being. Since the foundation of natural law ethics is the experience of one’s own human nature, the ultimate origin of that nature, whether by an act of divine creation or some other mechanism, is not a relevant consideration for natural law ethicists. It is rational reflection on the human nature we already possess that enables us to recognize both components of natural law ethical theory, namely, the basic forms of human values as well as the requirements of practical reasonableness³ (Finnis, 1980). Natural law is therefore a philosophical ethical theory, and not a religious or theological theory. It can provide a justification for Catholic Social Teaching that is accessible not only to Catholics, but also to non-Catholic Christians, people of other religious faiths, and all people of good will.

Natural Law Ethical Theory and Catholic Doctrine

If we look at human nature from a religious perspective, we can see that natural law ethical theory is compatible with, and in fact, an extension of the moral law established eternally by God. As F. C. Copleston, S.J. (1972), the eminent historian of philosophy and authority on the philosophy and theology of Thomas Aquinas, observes, “To speak anthropomorphically, God sees eternally in human nature the activities which constitute its objective development or unfolding and the acts which are incompatible with this development” (p. 90). God’s awareness of what is good and bad for humanity forms the basis of the eternal moral law established by God and revealed to humanity first through the prophets and finally by Jesus himself. “When the human reason promulgates to itself the natural law, it participates in God’s eternal law, in the divine plan for human beings” (pp. 190-191). Natural law, according to Aquinas, is “a participation of the eternal law in a rational creature” (*ST* Ia IIae q.91 a.2).⁴ In this way, natural law ethical theory and Catholic theological ethics proceed by parallel paths to a consistent and harmonious understanding of morality. As a result, Catholic Social Teaching has two independent and complementary foundations, one philosophical and one theological.

Natural Law Ethical Theory in *Rerum Novarum*: Foundation for Modern Catholic Social Teaching

In 1891, Pope Leo XIII laid the foundation for modern Catholic Social Teaching in his encyclical *Rerum Novarum* (“Of New Things”). Like all papal encyclicals, which contain authoritative Church teaching emanating from the pope’s role as leader of the Church, *Rerum Novarum* addressed a controversial topic, in this case, the oppression of the working poor as a result of unbridled capitalism following the Industrial Revolution. During the course of this encyclical, Leo XIII discussed the proper relationship between employers and employees, as well as the appropriate roles of the government and public associations, such as unions, in protecting workers and their families from exploitation.⁵

Leo XIII was a strong advocate of Thomistic philosophy and theology,⁶ and embraced Aquinas’s view that reason and revelation are two independent paths to a common truth, so that neither reason nor revelation, when rightly interpreted, can contradict the other (*Summa Contra Gentiles* I.7). Leo XIII applied this Thomistic viewpoint

throughout *Rerum Novarum*, interweaving natural law ethics and Christian theology throughout his discussion of the rights and duties of capital and labor.

While natural law ethical theory is explicitly cited by Leo XIII to justify private property, the need for a living wage, and the right of free association,⁷ *Rerum Novarum* articulates the principle of human dignity as the fundamental principle of Catholic Social Teaching and is careful to provide justifications for this principle arising from both natural law ethical theory and Christian theology.

Natural law and Christian theology justification for human dignity in *Rerum Novarum*

Rerum Novarum locates the source of human dignity in reason: “It is the mind, or reason, which is the predominant element in us who are human creatures; it is this which renders a human being human” (*Leo XIII, 1891, §6*). Reason, the distinguishing characteristic of humans, enables them to flourish in unique ways that are not available to animals, and provides human beings with an inherent dignity that must always be respected (cf. Finnis, 194-195). Thus, *Rerum Novarum* asserts “[T]o misuse men as though they were things in the pursuit of gain, or to value them solely for their physical powers—that is truly shameful and inhuman,” and charges employers “to respect in every man his dignity as a person” (*Leo XIII, 1891, §20; §§36 and 42*).

In order to show the harmony between the natural law justification for human dignity and Christian theology, Leo XIII harkens back to the creation of humanity with a rational soul: “It is the soul which is made after the image and likeness of God; it is in the soul that the sovereignty resides in virtue whereof man is commanded to rule the creatures below him and to use all the earth and the ocean for his profit and advantage” (§40). It is this rational faculty that enables a human to fathom “matters without number, linking the future with the present,” so that “being master of his own acts, [he] guides his ways under the eternal law and the power of God, whose providence governs all things” (§7). Thus, Christian theology, like natural law, asserts the fundamental importance of human dignity so that “no man may with impunity outrage that human dignity which God himself treats with great reverence” (§40).

Natural law and Christian theology justification for the common good, subsidiarity, and solidarity in *Rerum Novarum*

In accordance with natural law ethical theory, Leo XIII acknowledges the “natural tendency of men to dwell in society” (§51) and that living in society is beneficial for human beings, since the purpose of communities is to foster the common good (§§50, and 51, cf. §32), so that in a well-administered state, “the laws and institutions, the general character and administration of the commonwealth, shall be such as of themselves to realize public well-being and private prosperity” (§32). Moreover, in a well-administered state, the ruler will seek not his own personal gain, but “the benefit of those over whom he is placed” (§35). Fostering the good of the community also promotes individual wellbeing, as members of society share in the common good.

The harmony between natural law and Christian theology with regard to these key principles is also a central theme of *Rerum Novarum*. Leo XIII is careful to cite both secular and sacred justifications for his teachings on social issues, repeatedly linking “philosophy and the Gospel” (§35), “God’s laws and those of nature” (§36), “right reason and . . . the eternal law of God” (§52), and “the precepts of duty and the laws of the Gospel” (§55). Leo XIII directly references Aquinas: “Human law is law only by virtue of its accordance with right reason; and thus it is manifest that it flows from the eternal law. And in so far as it deviates from right reason it is called an unjust law; in such case it is no law at all, but rather a species of violence.” (§52, citing Thomas Aquinas, *Summa Theologiae*, Ia-IIae, q. xciii, art. 3, ad 2m).

Pacem in Terris

An especially influential use of natural law theory in Catholic Social Teaching is found in John XXIII’s encyclical *Pacem in Terris*, “Peace on Earth” (1963). Composed during the turmoil of the Cold War, shortly after the Cuban missile crisis, this encyclical presents a forceful statement of human rights and articulates the principles that should govern the relationships between individuals (§§8-45), between individuals and public authorities (§§46-79), relationships between states (§§80-129), and relationships between individuals or states and the worldwide community of nations (§§130-145). The heart of this encyclical “was a creative restatement of the Natural Law ethic that has been at the heart of the social teaching” (Hehir, 2010, p. 38). Indeed, in *Pacem in Terris*, John XXIII clearly asserts that natural law is the foundation for each type of human relationship addressed in the encyclical (§7), and explicitly identifies natural law as the source of the human rights and responsibilities described in the encyclical, stating, “These rights and duties derive their origin, their sustenance, and their indestructibility from the natural law” (§28).

Natural law and Christian theology justification for human dignity in *Pacem in Terris*

Like *Rerum Novarum*, *Pacem in Terris* locates the origin of human dignity in reason: “each individual man is truly a person. His is a nature, that is, endowed with intelligence and free will. As such he has rights and duties, which together flow as a direct consequence from his nature” (§9). Because human dignity originates in reason, all humans are “equal in natural dignity” (§§44, 89, and 132), explicitly condemning racial discrimination (§44). Even

when a person falls into moral or religious error, he does not stop possessing a rational nature, and so human dignity can never be forfeited (§158; cf. §9).

In *Pacem in Terris*, John XXIII also takes care to emphasize the harmony between natural law and divine teaching with regard to human dignity. Since God created beings with a particular human nature (§3), and in such a way that humans can discover natural law by reflecting on their own nature (§6), God is the source of natural law. Moreover, there are theological as well as natural law reasons to affirm human dignity: “When, furthermore, we consider man’s personal dignity from the standpoint of divine revelation, inevitably our estimate of it is incomparably increased. Men have been ransomed by the blood of Jesus Christ. Grace has made them sons and friends of God, and heirs to eternal glory” (§10).

Natural law and Christian theology justification for the common good, subsidiarity, and solidarity in *Pacem in Terris*

Pacem in Terris describes human beings as social by nature (§31), and affirms that the good of the community is necessary for the full development of human flourishing (§58). The common good is “intimately bound up with human nature;” the human person must be “taken into account at all times” in order for the common good to “exist fully and completely” (§55). People also have an obligation to make their own specific contributions to the general welfare (§53), and must “recognize and perform their respective rights and duties” within their communities (§31). Harmony between natural law and divine teaching with regard to these key principles is demonstrated by identifying God as the source of the order that prevails in human society. “[S]uch an order—universal, absolute and immutable in its principles—finds its source in the true, personal and transcendent God” (§38). Furthermore, it is God who has created human beings to be social by nature (§46), and so God is the author of the nature of human communities. The justification of civil authority is also clearly linked in natural law to God: “Hence every civilized community must have a ruling authority, and this authority, no less than society itself, *has its source in nature, and consequently has God for its author*” (§46). The moral order itself has God as its origin and end. (§47)

In *Pacem in Terris*, John XXIII especially emphasized the foundation of Catholic Social Teaching in natural law ethical theory. The Pope specifically addresses the letter to “all men of good will,” basing Catholic Social Teaching on principles of natural law ethics, which, as a philosophical ethical theory, could be recognized and accepted by everyone. In addition, the Church continues to deal with these issues, providing insight from both contemporary philosophical theories as well as biblical and theological scholarship, to instruct not only Catholics but also all people on these topics.

III: Catholic Social Teaching, Natural Law, and Ethical Social Work Practice: Application to Racial Disproportionality in Child Welfare

Application of Natural Law Theory to Codes of Ethics

While Shank (2007) and Brenden (2007) described the relationship between Catholic Social Teaching and social work ethics, in particular Catholic social work education, we have expanded this analysis by gauging the extent to which the precepts of natural law ethical theory and Catholic Social Teaching are consistent with social work ethics, surveying the ethical codes or statements of five professional associations of social workers: the National Association of Social Workers (NASW), the International Federation of Social Workers/International Association of Schools of Social Work (IFSW/IASSW), the North American Association of Christian Social Workers (NACSW), the Catholic Social Workers National Association (CSWNA), and the Clinical Social Work Association (CSWA). We first examined their content relative to human dignity, and then to the social principles described above in Catholic Social Teaching.

Human Dignity: Each of the codes examined articulates the value of human dignity.

- CSWNA charges its members to “respect the fundamental dignity and worth of all human persons from the moment of conception to natural death.” (CSWNA, I.a)
- CSWA cites “a commitment to the dignity, well-being, and self-determination of the individual” as a core value. (CSWA, Preamble)
- IFSW/IASSW states that “Social work is based on respect for the inherent worth and dignity of all people, and the rights that follow from this.” (IFSW/IASSW, IV.1)
- NACSW states that “Every individual is a person of worth, with basic human rights and essential human responsibilities.” (NACSW, 7)
- NASW states that “Social workers respect the inherent dignity and worth of the person.” (NASW, Value 3 “Dignity and worth of the person”)

Social Principles: In approaching issues that arise as a result of human association, social work codes of ethics address a variety of concerns. Certain concerns occur consistently throughout these different codes:

- Anti-discrimination: CSWA, VI.a; CSWNA, I.i, III.2; IFSW/IASSW, 4.2.1; NACSW, 16; and NASW, Value 2 (Social Justice).

- Equitable distribution of resources, especially for poor and oppressed persons: CSWA, VI.c; CSWNA, II.j; IFSW/IASSW, 4.2.3 and 4.2.4; NACSW, 14; and NASW, Value 2 (Social Justice).
- Greater sense of community: CSWNA, I.f; IFSW/IASSW, 4.2.5; NACSW, 6; NASW, Value 4 (Importance of human relationships).
- Recognition of diversity: CSWNA, III.d and III.e; IFSW/IASSW, 4.2.2; NACSW, 8; and NASW, Value 3 (Dignity and worth of the person).

These codes of ethics, therefore, stress the importance of the human community and incorporate many of the subsidiary principles cited by the Pontifical Council for Justice & Peace, the United States Conference of Catholic Bishops, and the Office for Social Justice as central themes of Catholic Social Teaching.

Application of Catholic Social Teaching to Racial Disproportionality in Child Welfare

Catholic Social Teaching, as described above, is based both on a philosophical foundation in natural law ethics and in its complementary theistic and Christian foundation, and holds all Catholics, not just social workers, to a standard that values human dignity and the good of the community, and requires Catholics to address injustice at several levels. Social Work codes of ethics are professionally chosen minimum standards set for social work practice. They recognize that social workers as professionals often help and/or represent society's most vulnerable. Catholic social workers, and indeed all social workers who hold similar values and world views, are challenged to fulfill the requirements of both. They must engage in protecting and fostering human dignity, promote positive communities, and secure common good for the least advantaged, not only in the United States, but also worldwide.

One of the primary injustices that nearly all social workers deal with, at least tangentially at some point in their career, is racial disproportionality: the overrepresentation of children and families of color in our least desirable systems, including child protection systems. While racism and oppression are mentioned numerous times in encyclicals and other papal discourses such as homilies, racial disproportionality provides a pressing and important application of Catholic Social Teaching to social work practice.

What is Racial Disproportionality?

Racial disproportionality describes an overrepresentation of a specific group relative to its representation in the entire population. Racial disproportionality in child welfare, then, is calculated by "dividing the percentage of children in a racial/ethnic group at a specific decision-making stage (i.e., investigation, substantiation, foster care placement) in the child welfare system by the percentage of children in that same racial/ethnic group in the census population" (Hill, 2007, p. 8). For example, the U.S. Census Bureau's 2008 American Community Survey indicates that there were 10,229,000 Black children under the age of 18 in the general population, totaling 13.8% of the child population, while there were 41,379,000 White children representing 44.7% of the population (U.S. Census, 2010). The most recent preliminary statistics from the Adoption and Foster Care Analysis and Reporting System for children in foster care between October 1, 2009 through September 30, 2010 (USDHHS, 2011) show that African American children represent 27% of children entering foster care, 29% of those in foster care, and 29% of those waiting to be adopted, or twice their representation in the population. In addition to disproportionality, African Americans receive disparate treatment once in the child welfare system, leading to longer stays in foster care (U.S. GAO, 2007).

Racial disproportionality, particularly the overrepresentation of African Americans and at times Hispanic/Latinos, is not limited to the child welfare system. A six-year longitudinal study of all seventh grades enrolled in public Texas schools in 2000–2002 found that not only were African American students disproportionately likely to be removed from the classroom for disciplinary reasons for discretionary violations, but 83% of all African American males had at least one discretionary violation, compared with 59% for White males (Fabelo, Thompson, Plotkin, Carmichael, Marchbanks, & Booth, 2011). In addition, students suspended or expelled were more likely to be held back a grade, and then become involved in the juvenile justice system the subsequent year. The Children's Defense Fund (2007) highlighted disparities in numerous systems, including education, mental health, health, child welfare, juvenile justice and criminal justice systems. Disproportionate representation and disparities of outcomes have been reported extensively for a number of years (McRoy, 2004, 2011; Lu, Landsverk, Ellis-MacLeod, Newton, Ganger, & Johnson, 2004; Needell, Brookhart, & Lee, 2003; Hill, 2007). A more complete review of the topic can be found in *Challenging Racial Disproportionality in Child Welfare: Research, Policy and Practice* (Green, Belanger, McRoy & Bullard, 2011).

Racial Disproportionality and Catholic Social Teachings: Human Dignity

Catholic Social Teaching requires us to recognize that human life is sacred and each human being, globally, is entitled to dignity and the necessary goods and tools of life (including labor with dignity, freedom, housing, food), to recognize that God shows no partiality (Acts 10:34, as quoted in Pontifical Council, 2004, §144) and that all people have an equal right to dignity (Pontifical Council, 2004, §144).

At the heart of racial disproportionality is the injustice suffered by individuals. Children of color who enter the child welfare system may be or may not be saved from abuse and/or neglect, but are most certainly denied dignity of their birth families and freedom within their own families to grow. In addition, children who enter foster care experience poorer life outcomes than other children, including higher poverty and homelessness, lower educational achievement, and other negative outcomes (Pecora, Kessler, O'Brien, White, Williams, Hiripi, English, White & Herrick, 2006). While there debate about the causes of racial disproportionality (see Bartholet, 2009; McRoy, 2011; Derezotes, 2011), racial disproportionality is an affront to human dignity and requires a just response.

Call to Family

Catholic Social Teaching emphasizes that families are the primary unit of community, sacred, “in the Creator’s plan ‘the *primary place of ‘humanization’* for the person and society’ and the ‘cradle of life and love’ (Pontifical Council, 2004, §209), the “sanctuary of life” (Pontifical Council, 2004, §231), and of central importance for the person and society (Pontifical Council, 2004 §212, 213).

While research often focuses on measurement of disproportionality, causation, and interventions, one of the key elements in understanding entry into the child welfare system, particularly into foster care, is the disruption of the family system. A child’s removal from the home, even temporarily, shatters the family system, in effect punishing struggling families (Roberts, 2002) instead of providing the support and goods essential for human dignity. Catholic Social Teaching requires us to assess the needs of struggling families, to secure “equal dignity of all people” (Pontifical Council, 2004 §144) and to protect the family, the “cradle of life and love” and “sanctuary of life” (see above). A number of family-centered approaches to reducing disproportionality in child welfare have been reported to have achieved success, strengthened families, and recognized extended family partnerships (Marts, Lee, McRoy & McCroskey, 2011; Richardson, 2011; Schwartz, 2011). In addition, Catholic Social Teaching requires us to engage in preventative efforts to support the most vulnerable families prior to entry into the child welfare system, and to challenge systems that destroy the family.

Groups and Organizations

Catholic Social Teaching also recognizes the role of groups and organizations through its principle of subsidiarity.

It is impossible to promote the dignity of the person without showing concern for the family, groups, associations, local territorial realities; in short, for that aggregate of economic, social, cultural, sports-oriented, recreational, professional and political expressions to which people spontaneously give life and which make it possible for them to achieve effective social growth. This is the realm of *civil society*, understood as the sum of the relationships between individuals and intermediate social groupings (Pontifical Council, 2004, § 185).

Groups and organizations are critical in efforts to address disproportionality. In 2005, Casey Family Programs recognized the importance of engaging public child welfare organizations to reevaluate their roles related to racial disproportionality (Miller & Ward, 2011). They invited 13 public child welfare organizations to participate in their “Breakthrough Series Collaborative” in which they developed teams engaged in creating new strategies to address disproportionality. Texas public child welfare also engaged in organizational efforts to assess its role in disproportionality, to reverse the removal of African American children from their families, and to support at-risk families through family group decision-making processes (James, Green, Rodriguez, & Fong, 2011). In addition, they provided Undoing Racism training to teams of leaders throughout the state to change the organizational culture. While other organizations have been created and engaged to address disproportionality, Catholic Social Teaching challenges us to be part of the process: to assess our own organizations for racial bias and for systems that punish vulnerable families rather than supporting them, and to determine whether there are intermediary groups that could be created or engaged to address disproportionality.

Communities

Catholic Social Teaching is based on a deep understanding of community, not only primarily in the family, but also in groups formed in solidarity. As depicted earlier, the principle of solidarity is itself one of the four basic tenets of Catholic Social Teaching.

Racial disproportionality is a distortion of community, with negative consequences and poor outcomes shared unequally. A number of studies have pointed to indicators that could be considered community as well as family level issues, including poverty, education, employment, and housing (Eamon & Kopels, 2004; Lin & Harris, 2008; Lu, Landsverk, Ellis-Macleod, Newton, Ganger, & Johnson, 2004; Stevens, 2006; Turner & Ross, 2002; Zárate, 2009). Racial disproportionality in child welfare is often engaged with individual and family systems, sometimes at the organizational level, but not as frequently at the community level. However there are many efforts to assess the community’s disproportionality, to recognize the community impact of racial disproportionality, the community

assets that can be harnessed, and the community interventions possible to challenge racial disproportionality. Harvard scholar Dorothy Roberts (2011) described the complex interactions of child welfare within an inner city Chicago neighborhood in her exploration of *The Racial Geography of Child Welfare* and Dettlaff and Rycraft (2011) conducted focus groups to determine community perceptions of disproportionality in Texas. Texas public child welfare created community disproportionality specialist positions throughout the state to work collaboratively with community stakeholders to successfully reduce disproportionality and improve other outcomes in child welfare (James, Green, Rodriguez & Fong, 2011). Numerous other states have also engaged communities to address disproportionality, including Indiana (Busch, Wall, Koch & Anderson, 2011) and Washington (Clark, Buchanan, & Letgers, 2011).

Communities of faith have been engaged in increasing foster and adoptive homes for children of color, beginning with the One Church One Child movement in Chicago founded by Catholic priest Father George H. Clements in 1980, encouraging churches to become engaged in finding homes for the huge number of waiting children. A number of faith communities, Catholic and otherwise, have helped their members adopt since that time (Belanger, Copeland, & Cheung, 2008).

Catholic School Teaching and the Call to Address Racial Disproportionality

Catholic Social Teaching requires us to address racial disproportionality at all systems levels—the individual, the family, groups, organizations, and communities—and to engage civically in reshaping our laws and particularly our policies to create just communities in which each life, each family is recognized as sacred, and all have the resources they need to support their families and thrive. Catholic Social Teaching inspires us to act collectively, or in solidarity, to achieve an equal and just society in this country. The following are examples of specific ways in which this call to action can be followed:

1. We can investigate our own biases, and the biases of the systems in which we live, learn and work.

Do we make decisions based on universalization or well-founded moral principles such as those articulated in Catholic Social Teaching (Smith, 2011)? Or do we make them on the basis of our subjective perceptions or even prejudices? Do we interpret studies based on data or bias? Do we question research and use critical thinking? What basic assumptions are used in the policies and procedures of the systems, social work and otherwise, in which we live and work? Do we understand the ties of these kinds of biases to racial disproportionality? Have we taken steps to understand and recognize white privilege?

2. We can investigate the many causes of racial disproportionality, and the many disproportionate actions that occur outside of the child welfare system.

Do we understand how the criminal justice system works in our own communities, regions and states? Are we aware of disproportionate sentencing, of linkages between criminal justice and literacy? Have we investigated disproportionate negative consequences in our own school systems? Have we investigated disproportionate positive actions in our school systems (students in advanced courses, gifted/talented programs, students encouraged to apply to colleges)? How are the health systems in our own communities, regions and states working to advantage or disadvantage certain populations? How is housing arranged in our own communities? Is it racially segregated? What safety issues might there be related to housing that impact disproportionate entry into the child welfare system, in spite of quality parenting?

3. We can examine how faith communities can help address racial disproportionality.

How might bias, prejudice, and racism be evident in our faith communities? How racially segregated or integrated is your own faith community? What actions has your faith community taken to address injustices based on race? How is the common good addressed in solidarity between communities of faith? Is your faith community specifically involved in helping children waiting to be fostered or adopted?

4. We can make a conscious decision to address racial disproportionality in our own life and practice.

When we recognize or are called to recognize bias in our own lives, how do we react—with humility and determination or with anger and defensiveness? Do we speak up when we encounter bias, prejudice, racism, and distortions in our systems? What are we called to do?

As we are informed in the Compendium (Pontifical Council, 2004 §167), “*The common good therefore involves all members of society, no one is exempt from cooperating, according to each one’s possibilities, in attaining it and developing it...* The common good corresponds to the highest of human instincts, but it is a good that is very difficult to attain because it requires the constant ability and effort to seek the good of others as though it were one’s own good.” As social workers, those on the front line of social helping and justice, we can do better—individually, through our associations and groups, in our communities, and in our organizations. We can act like Christ. ❖

References

- Aristotle. (1985). *Nicomachean Ethics*. Trans. Irwin, T. Indianapolis, IN: Hackett Publishing Company.
- Bartholet, E. (2009). The racial disproportionality movement in child welfare: False facts and dangerous directions. *Arizona Law Review*, 51, 873-932.
- Belanger, K., Copeland, S., & Cheung, M. (2008). The role of faith in adoption: Achieving positive adoption outcomes for African American children. *Child Welfare*, 87(2), 99-123.
- Brenden, M. (2007). Social work for social justice: Strengthening social work practice through the integration of Catholic social teaching. *Social Work & Christianity*, 34(4), 471-493.
- Busch, M., Wall, J., Koch, S. & Anderson, C. (2011). Addressing disproportionate representation: A collaborative community approach. In D. Green, K. Belanger, R. McRoy & L. Bullard. *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 233-248). Arlington, VA: CWLA Press.
- Catholic News Service (2012). Dolan: Natural law, not religious preference, dictates all life sacred. Retrieved from <http://www.catholicnews.com/data/stories/cns/1200332.htm>. Accessed February 6, 2012.
- Children's Defense Fund. (2007). *America's cradle to prison pipeline*. Washington, DC: Author. Available from www.childrensdefense.org/child-research-data-publications/data/cradle-prison-pipeline-report-2007-full-highres.pdf.
- Clark, P., Buchanan, J. & Letgers, L. (2011). Taking action on racial disproportionality in King County. In D. Green, K. Belanger, R. McRoy & L. Bullard. *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 309-318). Arlington, VA: CWLA Press.
- Copleston, F. C. (1972). *A History of Medieval Philosophy*. New York: Harper & Row.
- Derezotes, D. (2011). Reflections on racial disproportionality: Dangerous directions or timely interventions? In D. Green, K. Belanger, R. McRoy & L. Bullard. *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 73-82). Arlington, VA: CWLA Press.
- Dettlaff, A. & Rycraft, J. (2011). Community and stakeholder perceptions of disproportionality. In D. Green, K. Belanger, R. McRoy & L. Bullard. *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 23-34). Arlington, VA: CWLA Press.
- Eamon, M. K., & Kopels, S. (2004). For reasons of poverty: court challenges to child welfare practices and mandated programs. *Children and Youth Services Review*, 26, 821-836. (DOI:10.1016/j.childyouth.2004.02.023)
- Fabelo, T., Thompson, M., Plotkin, M., Carmichael, D., Marchbanks, M.P. III, & Booth, E. (2011). Breaking schools' rules: A statewide study of how school discipline relates to students' success and juvenile justice involvement. Retrieved from Council of State Governments, Justice Center website: http://justicecenter.csg.org/files/Breaking_Schools_Rules_Report_Final.pdf
- Finnis, John. (1980). *Natural law and natural rights*. Oxford: Oxford University Press.
- Green, D., Belanger, K., McRoy, R. & Bullard, L. (Eds.) (2011). *Challenging racial disproportionality in child welfare: Research, policy and practice*. Arlington, VA: CWLA Press.
- Hehir, J. Bryan. (2010). Theology, Social Teaching, and Catholic Charities: Three Moments in a History. In J. Bryan Hehir (Ed.), *Catholic Charities USA: One hundred years at the intersection of charity and justice* (29-45). Collegeville, MN: Liturgical Press.
- Hill, R. B. (2007). *An analysis of racial/ethnic disproportionality and disparity at the national, state, and county levels*. Casey-CSSP Alliance for Racial Equity in Child Welfare. Retrieved February 8, 2012, from: <http://www.aecf.org/~media/Pubs/Topics/Child%20Welfare%20Permanence/Other/AnAnalysisofRacialEthnicDisproportionalityandBob%20Hill%20report%20natl%20state%20racial%20disparity%202007.pdf>.
- James, J., Green, D., Rodriguez, C. & Fong, R. (2011). Innovations in Texas: Undoing racism, developing leaders, and engaging communities. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 285-296). Arlington, VA: CWLA Press.
- John XXIII. (1963) *Pacem in Terris*. http://www.vatican.va/holy_father/john_xxiii/encyclicals/documents/hf_j-xxiii_enc_11041963_pacem_en.html. Accessed January 7, 2012.223
- Leo XIII. (1891) *Rerum Novarum*. http://www.vatican.va/holy_father/leo_xiii/encyclicals/documents/hf_l-xiii_enc_15051891_rerum-novarum_en.html. Accessed January 7, 2012.
- Lin, A., & Harris, D. (2008). *The colors of poverty: why racial and ethnic disparities persist*. New York, NY: Russell Sage Foundation.
- Lu, Y. E., Landsverk, J., Ellis-MacLeod, E., Newton, R., Ganger, W., & Johnson, I. (2004). Race, ethnicity, and case outcomes in child protective services. *Children and Youth Services Review*, 26(5), 447– 461.

- Marts, E., Lee, E., McRoy, R., & McCroskey, J. (2011). Point of engagement: Reducing disproportionality and improving outcomes. In D. Green, K. Belanger, R. McRoy, & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 167-178). Arlington, VA: CWLA Press.
- Massaro, T. (2012). *Living justice: Catholic social teaching in action* (2nd ed.). Lanham, MD: Rowman & Littlefield.
- McRoy, R. (2004). The color of child welfare. In K. Davis & T. Bent-Goodley (Eds.), *The color of social policy* (pp. 37–63). Alexandria, VA: Council on Social Work Education.
- McRoy, R. (2011). Contextualizing disproportionality. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 67-70). Arlington, VA: CWLA Press.
- Miller, O. & Ward, K. (2011). Emerging strategies for reducing disproportionality: The results of a breakthrough series collaborative. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 271–284). Arlington, VA: CWLA Press.
- Needell, B., Brookhart, A., & Lee, S. (2003). Black children and foster care placement in California. *Children and Youth Services Review*, 25(5/6), 393–408.
- Office for Social Justice, Archdiocese of St. Paul and Minneapolis. (2006). “Key Principles of Catholic Social Teaching.” St. Paul, MN: Archdiocese of St. Paul and Minneapolis.
- Plato. (1992). *Republic*. Trans. Grube, G.M.A. & Reeve, C.D.C. Indianapolis, IN: Hackett Publishing Company.
- Pecora, P., Kessler, R., O'Brien, K., White, C. R., Williams, J., Hiripi, E., English, D., White, J., & Herrick, M. (2006). Educational and employment outcomes of adults formerly placed in foster care: Results from the Northwest Foster Care Alumni Study. *Children and Youth Services Review*, 28(12), 1459–1481.
- Pontifical Council for Justice and Peace. (2004). The Compendium of the Social Doctrine of the Church. http://www.vatican.va/roman_curia/pontifical_councils/justpeace/documents/rc_pc_justpeace_doc_20060526_compendio-dott-soc_en.html. Accessed January 9, 2012.
- Richardson, B. (2011). Working with youth and families to impact disproportionality. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 187-198). Arlington, VA: CWLA Press.
- Riveaux, S., James, J., Wittenstrom, K., Baumann, D., Sheets, J., Henry, J. & Jeffries, V. (2011). Race, poverty, and risk: Understanding the decision to provide services and remove children. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 91-100). Arlington, VA: CWLA Press.
- Roberts, D. (2002). *Shattered bonds: The color of child welfare*. New York, NY: Civitas Books.
- Roberts, D. (2011). The racial geography of child welfare: Toward a new research paradigm. In D. Green, K. Belanger, R. McRoy & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 13-22). Arlington, VA: CWLA Press.
- Schwartz, A. (2011). Connective complexity: African American adolescents and the relational context of kinship foster care. In D. Green, K. Belanger, R. McRoy, & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 199-210). Arlington, VA: CWLA Press.
- Sedlak, A., Mettenburg, J., Basena, M., Petta, I., McPherson, K., Greene, A., & Li, S. (2010). Fourth national incidence study of child abuse and neglect (NIS-4): Report to Congress, executive summary. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families. Available from www.acf.hhs.gov/programs/opre/abuse_neglect/natl_incid/nis4_report_exec_summ_pdf_jan2010.pdf.
- Shank, B. (2007). The call to justice: Social work in Catholic higher education. *Social Work & Christianity*, 34(1), 1-17.
- Smith, O. (2011). Critical thinking, social work ethics, and racial disproportionality: The importance of the universalization principle. In D. Green, K. Belanger, R. McRoy, & L. Bullard, *Challenging racial disproportionality in child welfare: Research, policy and practice* (pp. 83-90). Arlington, VA: CWLA Press.
- Stevens, G. D. (2006). Gradients in health status and developmental risks of young children: The combined influences of multiple social risk factors. *Maternal and Child Health Journal*, 10(2), 187-199. (DOI: 10.1007/s10995-005-0062-y)
- Turner, M. A. & Ross, S. L. (2002). Discrimination in metropolitan housing markets. Phase 1. Washington, DC: U.S. Department of Housing and Urban Development, Office of Policy Development and Research. Available from www.huduser.org/portal/publications/hsgfin/hds_phase1.html.
- U.S. Census Bureau. (2010). 2008 American community survey 1-year estimates: Total population; selected population pro- files. Available from http://factfinder.census.gov/servlet/DatasetMainPageServlet?_program=ACS.
- U.S. Council of Catholic Bishops. (2005). Seven Key Themes of Catholic Social Teaching. Retrieved from <http://www.usccb.org/beliefs-and-teachings/what-we-believe/catholic-social-teaching/seven-themes-of-catholic-social-teaching.cfm>. Accessed January 7, 2012.
- U. S. Department of Health and Human Services. (2011). The AFCARS report: *Preliminary FY 2010 Estimates as of June 2011 (18)*. Washington, DC: Author. Available from http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm.
- U.S. Government Accountability Office. (2007). African American children in foster care: Additional HHS assistance needed to help states reduce the proportion in care. Available from www.gao.gov/new.items/d07816.pdf.

Zárate, M. A. (2009). Racism in the 21st century. In T. D. Nelson, (Ed.), *Handbook of prejudice, stereotyping and discrimination*. New York, NY: Psychology Press, Taylor & Francis Group.