

THE ETHICS OF SPIRITUALLY SENSITIVE PRACTICE

A wise person is good to people who are good. She is also good to people who are not good. This is true goodness.

(Lao Tsu, in Walsh, 1999)

Whatever you do, you do to yourself.

(Buddha, in Walsh, 1999)

Ethics and Spirituality

Spirituality is defined in chapter 1 as a very general construct with many subareas that give it specificity and meaning. Unpacking the term “spirituality” can help us illuminate what it means and what it offers to practice. Two specific subareas of spirituality speak to the focus of this chapter. One of these subareas is morality and ethics. Our moral and ethical code, while not often as developed and clear to us as we would like, speaks to who we are spiritually. Most people develop a deeper sense of what they feel is right and wrong, fair and unfair, just and unjust as they mature and grow older. A commitment to social justice for the downtrodden, rejected, poor, sick, disabled, senile, and others who are disadvantaged is a fundamental belief of social workers and the NASW Code of Ethics. The moral and ethical qualities of being human are clearly viewed as elements of our spirituality. Our spirituality often conveys to us a sense of what is right and wrong. When we are faced with a choice, what is fair, peaceful, or egalitarian within an organization, community, or society?

The second subarea of spirituality central to this chapter is similar and involves our personal beliefs, especially our beliefs that form our positions on moral and ethical issues. These beliefs help to define our spirituality and often originate with our religious group, or perhaps a cultural, political, business, or other social group to which we belong. Religious and spiritual groups are major sources for our ethics and morality in today’s world. The Golden Rule of Christianity is a good example. According to this rule, “We are to do unto others as we would have them do unto us.” All of the major religions of the world have a version of the Golden Rule. Muhammad (Walsh, 1999, p. 143) said, for example, “Wish for others whatever you wish for yourself.” The major religions have given focused attention to what they view as the most important ethics to live by (Smith, 1991; 2001; Walsh, 1999).

Confucius, the founder of Confucianism in China, who shaped the ethical code of the Chinese people over 2,500 years ago, proclaimed that a person's moral code determined, more than anything else, what living with wisdom was like (Smith, 1991; Walsh, 1999). Muhammad claimed that all actions are judged by their motives and the most important motives are to help and not harm others. Jesus taught that the last will be first and the first last in his kingdom, so we are to put others before ourselves. Even your enemy is to be loved and treated fairly. Mahatma Gandhi, a leading Hindu religious leader who led the liberation of India from colonization, and Dr. Martin Luther King Jr., a Baptist pastor in the South who led efforts to obtain basic rights to voting, housing, education, and employment for African Americans, succeeded by using an ethical strategy. Both practiced non-violent civil disobedience even when faced with violence from their adversaries. They believed that such an action brought integrity to themselves and respect and dignity for their adversaries, all of which had the greatest chance of bringing about reconciliation of their differences, their ultimate goal.

These are great moral principles to follow, but what are the benefits of doing this? What would motivate someone to follow such a code? It is widely believed that by living unethically and doing things that neglect and hurt others, we are likely to suffer as well. This could also happen in the reverse if others neglect or hurt us. The perpetrator likely ends up with unsettled, defensive, and guilty feelings and a feeling of dejection about themselves (McCullough, Pargament, & Thorensen, 2001; Walsh, 1999). For example, if we talk about someone behind their back in an unfair and negative way, we are likely left with similar feelings for ourselves; we may also be exposing another person to these ill thoughts who can end up thinking, what would he say about me behind my back? In other words, as the Buddha put it, "Whatever we do, we do to ourselves."

What are your ethics? Which ones are most important to you? How difficult is it to live by your ethics? Walsh (1999) identifies several ethical principles to strengthen our resolve as ethical people. These are personal ethics that have implications not only for people but organizations as well. At least three of these ethical principles are directly pertinent to our professional work. They include:

- Do no harm.
- Communicate to heal.
- Right a wrong.

Do No Harm

Do no harm is an important reminder of what we are in business for—helping others. It's important to keep this principle in our consciousness as we take steps on behalf of our clients, the agency that employs us, and all of the other people who may be affected by our actions (NASW, 2008). Doing no harm to our clients

is usually straightforward, but not always. For example, we may suggest a resource that we think can help a client, and it turns out that it backfires. So the effects of some of our actions do not become apparent until later, or maybe even after a client is no longer receiving services. That alone would be a good reason to have follow-ups with clients after termination.

Also, thinking about the ethic of helping others, we are sometimes caught between what is best for the agency and what is best for the clients. The agency tells us to do one thing and the client's welfare suggests another action. This can easily happen if the agency with whom we are employed does not always put the client's needs before its own. Some for-profit agencies, for example, that limit the frequency of visits and the particular services the social worker offers are often dictated by financial circumstances—what services will get reimbursed and which ones will not.

Our help also goes beyond the client and agency and affects others affiliated in some way with our client (NASW, 2008). They could be other family members, neighbors, and sometimes adversaries such as a former spouse. When we think about how our actions taken for a client may affect others in the environment we come to realize these actions are not always positive for them either. For example, helping a client may be detrimental to that client's partner or another family member. So it's important to always keep in mind that our actions in helping and not hurting clients may involve other people as well.

Communicate to Heal

What we say to clients, employers, and others each day is often a reflection of our ethics and an expression of our spirituality. Many of the world religions refer to the importance of right speech as well as right action as morals and ethics (Walsh, 1999). No matter who we are talking to, our speech is a reflection of our morals. So one of our ethical challenges as social workers is to be conscious and sensitive about what we say to and about others. We can ask ourselves, from time to time, if we are communicating healing or something else that is counterproductive. Not only what we say but also how we say it is key to communicating healing. Verbal and non-verbal communication are both involved. "I" messages are always better than expressions that begin with "you," so that we openly share our own needs or position for the other person to consider and avoid using "you" statements, which may appear to be attacking or criticizing the other person, or at least putting them on the defensive. We want to express our thoughts and feelings in such a way that our counterpart can freely understand what is going on with us; we do not want to say something that is offensive to them. These behaviors are so much easier to talk about than to practice, as we are often emotional and have a tendency to speak with some impulsivity in our everyday conversations.

Healing words are easier to express to people with whom we are in good standing, especially when things are going well in our relationships. The challenges emerge when we are in conflict or conflict is covertly swarming beneath the surface. We are also challenged when we are communicating with an adversary, someone in a position of authority over us, or a stranger. In these cases, we may have little or no idea of whether our words are healing, partially because we do not know the person very well or at all. In all of these cases, communicating healing becomes our challenge. We need to be thinking about how we can be empathic and in touch with their thoughts and feelings. We need to be as conscious of the other person(s) and how they may be receiving the message as well. We need to work toward what Martin Buber, the Jewish theologian, calls an “I–Thou” relationship, in which we are focusing on what they need, not on ourselves (Buber & Kaufmann, 1970). We are trying to communicate in a loving manner and in a way that will inform the receiver of our message, its intent, and our concern for their well-being.

Right a Wrong

A third ethical expression that also reflects our spirituality is righting our wrongs by facing our mistakes or our part in any difficulties or conflicts, particularly in our work (Walsh, 1999). The wrong could be something like taking office supplies for our own personal use, lying about something when we were too embarrassed to admit fault, or misrepresenting a client when making a referral or doing advocacy. Sometimes it is even more serious, like passing on misinformation to others about a difficult colleague to hurt them, or taking time off from the job and notifying your employer that you were working. Righting a wrong can also be relevant to the wrongs expressed in our society and its institutions. For example, we need to be careful to not be reinforcing racist, sexist or other such disparaging remarks about someone from a minority group by agreeing with these remarks or remaining silent in response to them in our personal lives.

It’s difficult but courageous to be open to the thought that we may be wrong, have said something insensitive, or sound self-serving. But we do these things and we usually know we did them when they happen, or later when we look back on our day. Denial that we did anything wrong is one handy defense, as is rationalizing that it was not anything important. Yet, the ethical thing to do is to face up to it, attempt to resolve and undo what we have done, and learn from it. Otherwise, it may just fester within us, nag our consciousness, and interfere with work with others that follows. Perhaps the hardest part of facing it is admitting we were in the wrong. That admission alone is often received unexpectedly and in a healing way by the relevant parties and will likely bring appreciation and disarm others of their own defensiveness. Reconciliation is much more likely to follow with the other parties as well; it brings relief and a resolve to try harder next time.

Controversies about Inclusion of Religion in Social Work

Religion is among the most controversial and challenging topics of discussion in American society. Many people have strong feelings about religion—either in favor of or against it. Further, if they are in favor of it they are usually in favor of their particular religious beliefs and practices, not religious beliefs generally. The United States was founded on the principle of religious freedom because of the denial of that right to those who lived in the European motherland in the 15th and 16th centuries and later. Those European countries demanded allegiance to a national religion, whether it was Catholicism, Anglicanism, Lutheranism, or another group.

Religious freedom and the freedom to choose one's own religious group are still cherished by many Americans today. Yet, in significant contrast, growing numbers are expressing the view that our nation is a Christian nation. This seems to be largely because it is the dominant religion, and perhaps there are perceptions of growing challenges from non-Christian religious groups for rights equal to those given Christians. For example, some religious groups want more recognition given to their religious holidays in the public schools and the workplace. We have a growing number of religious groups in the United States and many of them are increasing (Pew Research Center's Religion and Public Life Project, 2015). Some, such as Hinduism, Islam, and Buddhism, are also viewed as being very different from Christianity. In this regard, Christian privilege is a concept that is receiving greater attention as the number of religions is diversifying in the United States. Christian privilege is similar to white and male privilege and implies that one group has privileges over others, sometimes formal and other times informal (Riswold, 2015). Christian privilege refers to privileges Christians experience in the media, consumerism, schools, workplace, paid religious holidays, favoritism in government, and in many other ways that are in vogue for this group and not others.

Most Christians in this case are largely unaware of this sense of privilege because it is so ingrained in our societal fabric and they are the beneficiaries, while non-Christians may experience it as perceived rejection, neglect, or lower value because of their religious or non-religious affiliations.

The Ethics of Using Spiritual and Religious Interventions

Several studies have been conducted on the views and experiences of three groups in social work in terms of using spiritual and religious interventions—faculty, practitioners, and students in the United States and United Kingdom (U.K.). Sheridan (2009) prepared an extensive summary of such studies. This review also looked for evidence of adherence to specific ethical guidelines in using spiritual interventions. She found ten studies of practitioners revealing that the majority of them reported high or moderate use of most of the interventions. These practitioners represented professional organizations, state licensing boards, and practice-specific registries.

Two student studies found that students used many of these interventions as well but less often. In addition, Sheridan (2009) reviewed 18 studies that included the views of social work faculty, practitioners, and students on inclusion of spirituality in the social work curriculum. However, one limitation was that only three of these studies reported having full-time faculty in their sample. Overall, the findings were mixed, with some favoring inclusion while others reported being more hesitant or opposed. An elective course on spirituality tended to be the most frequently recommended option by faculty of how to include spirituality.

Faculty Views

In several social work programs across the country a significant amount of faculty debate is evident about whether to include spirituality and religion in the social work curriculum (Dudley & Helfgott, 1990; Sheridan, Wilmer, & Atcheson, 1994). Conservative Christian faculty and students, for example, often may want more recognition for their point of view, which may include greater consideration of the

Other Examples of Christian Privilege

(Medlin, 2013; Riswold, 2015)

- No need to worry about being accepted or welcomed in most social situations.
- Your beliefs are widely represented on TV and in other pop culture.
- Children engage in Christian activities at school (e.g. Christmas programs).
- Not being told you are going to hell.
- Can easily find counseling services catering to your beliefs.
- Can easily find information about how people of your faith have contributed to society.
- Talking about Islam or Judaism or Buddhism means we are talking about “the other.”
- The majority of my classmates have been in a place of worship, and one relatively similar to my own.
- When I talk about God, I can safely assume that others know generally what I am talking about.
- When I say what I think about God’s existence, no one will assume I am immoral.

role of faith and religious commitment to social work. They also sometimes feel disrespected and penalized by some faculty and students for their views (Thyer & Myers, 2009). Also, many of this group may want more attention given to a Christian approach to social work under certain circumstances, such as in faith-based agencies with Christian clients. These positions seem to be supported by a growing number of faith-based agencies existing across the country. In terms of the larger picture, this trend is likely to grow as more and more non-Christian religious groups choose social work as a profession. If for example, increasing numbers of Muslims choose to enroll in social work programs, perhaps they will be likely to discuss their religious beliefs and other preferences as practitioners as strongly as conservative Christians. Perhaps, class discussions about the role of religion in practice approaches should be supported in part to help students and faculty realize the ethical problems inherent in some of their wishes.

Another issue is that conservative religious faculty and students tend to assume some religious positions that are controversial in the professional arena of social work. They include such issues as abortion and LGBT rights. In these instances their positions are in conflict with the majority of social work faculty and are also viewed as being in conflict with the NASW Code of Ethics (NASW, 2008). Specific areas of the Code that may be sometimes in conflict with these controversial beliefs are client self-determination, dignity and respect, being non-judgmental, and some areas of social justice.

A counter-position of some social work educators is that the profession must remain neutral with regards to religious issues for a range of important reasons (Dudley & Helfgott, 1990; Sheridan, Wilmer, & Atcheson, 1994). The separation of church and state principle in the First Amendment of the U. S. Constitution is a point of contention for many social work educators, especially those employed in state universities. They believe this constitutional amendment precludes their ability to offer course material of a religious nature. This may be because they sense this material will have a leaning or bias toward one religious group such as Christianity and partake in proselytizing students. Many faculty are also concerned that including spiritual content in the curriculum will conflict with the mission of social work and the Code of Ethics.

The growing number of religions represented by students and faculty at universities and colleges is another reason given for remaining neutral; most social work faculty do not perceive themselves as knowledgeable about the variety of religions that exist; further, they feel they are unprepared to teach religious material. Many educators with these views may also not be religious themselves, which likely influences their desire to remain neutral (Canda & Furman, 2010; Sheridan, 2009). Other educators may be spiritual or religious but choose to be secularists in their work in social work education and practice (Hodge, 2009). The author of this book largely took this position during his first 25 years as a social work educator. Gradually, he came to terms with how important spirituality and religion are to

clients and the helping process and he became more convinced that these topics can be taught without imposing particular religious beliefs on anyone.

Other related concerns or reservations about including spirituality in the social work curriculum are many. They include rigidity and dogmatism perceived to be embedded in religion, the blurring of professional boundaries, infringement of client self-determination, the tendency of religion to support the status quo and impede social justice; vague conceptualizations of spirituality; lack of preparation of social workers to address religion and spirituality; and the overcrowded state of the social work curriculum (Sheridan, 2009). When we examine how these ethical responsibilities are to be implemented in spiritually sensitive practice, we discover several ethical challenges.

Practitioners' Views

Practitioners are also at odds with each other on the ethics of introducing these topics in the helping process. Research indicates that social work practitioners are mostly open to a spiritually sensitive approach and may be more favorable to it in general than social work educators (Sheridan, 2009; Sheridan, Bullis, Adcock, Berlin, & Miller, 1992). Studies conducted by Canda and Furman (2010) found that a vast majority of their national sample of NASW members did not believe that integrating religion and spirituality in social work practice conflicts with the Code of Ethics, social work's mission, or the separation of church and state ruling. Other findings of Canda and Furman (1999; 2010) are reported in chapter 5 and many are pertinent to ethics. They found that one subgroup of practitioners in their study apparently was not in favor of a social work role in the clients' spiritual issues and presumably would be unlikely to view spirituality as an appropriate practice topic. Ethical problems are inherent in this subgroup's position, the most obvious one being that these practitioners would be unresponsive to both the spiritual concerns and spiritual resources of their clients. Additionally, they may have more difficulty developing their relationships with the clients who are more spiritual or religious if these issues are important to them.

Finally, Oxhandler, Parrish, Torres, and Achenbaum, (2015) reported on a national study of the views and behaviors of 442 licensed clinical social workers (LCSWs) on how they integrated spirituality and religion into their practice. The vast majority of these practitioners reported having positive views and attitudes about integrating spirituality and religion into their practice but lower levels of actual behavior supporting this integration. As an example, only 57 percent reported actually conducting a holistic assessment that included spiritual issues with each of their clients even though 81 percent reported knowing how to skillfully gather a history from their clients about their religious and spiritual beliefs and practices. Two variables emerged that may offer explanations for these discrepancies: the practitioners' reported degree of intrinsic religiosity (35 percent reported being moderately or

very religious) and whether they had prior course work or continuing education on spirituality. Only 53 percent indicated that they had been adequately trained to integrate their clients' religion and spirituality into therapy.

Students' Views

Less is known about the views of social work students on these issues (Sheridan, 2009; Williams & Smolak, 2007). Two studies, one in the U.S. and the other in the U.K., reported on students' use of several spiritual interventions. While they were less likely to use these interventions than practitioners, this seems logical since they likely had less practice experience. The U.K. students tended to have lower favorable responses than the U.S. students on items like "Use religious or spiritual language or concepts," and "Share your own religious or spiritual values." This may be because citizens in the U.K. are thought to be significantly less religious than Americans. Another study conducted in the Southeast region of the country found that most of the students had positive attitudes about religion and spirituality personally but were unsure about how to introduce these topics in their practice (Kaplan & Dziegielewski, 1999). Another study of 208 students at two universities found that the students felt positively about these issues personally and had a tendency to support the use of religious interventions. (Sheridan & Amato-Von Hemert, 1999). Finally, a study by Stewart and Koeske (2006) of students in three universities found that students tended to be favorable to using spiritual and religious interventions in practice. These researchers also examined the predictors of positive views about inclusion of spirituality and religion in practice and found that students who were more religious and spiritual were more likely to be in favor of these interventions in practice. Students who were not affiliated with a religious group tended to be more unfavorable.

Ethical Issues in Using Sacred Readings in Practice

A special section on using sacred materials in social work is inserted here because it raises some important issues related to expressing spirituality and ethics. Sacred material such as passages in the Bible or Quran is often viewed by the respective religious group as the source of ultimate truth about our existence and how we are to live our lives. In other instances, these sacred passages offer important guidance and assistance alongside other non-religious sources.

When members of these religious groups are social workers, they tend to depend upon these sacred books and sometimes draw from them in their practice. The uses vary in purpose and in emphasis. Some examples of the ways that sacred readings can be used are covered next to help the reader reflect on how sacred readings can be both helpful and at times problematic if they are in conflict with the NASW Code of Ethics (NASW, 2008). Three examples are cited. First, sacred readings can

be identified as a motivating force, or inspiration, by some social workers. Second, sacred readings can be an important component of some spiritual interventions. Finally, some social workers organize their entire practice approach around sacred readings.

As Inspiration for Some Social Workers

As discussed earlier in the book, many Christians, Jews, and Muslims have been raised in religious homes or have been exposed in other ways to sacred teachings during their childhood. These teachings often become powerful contributors to their worldviews and their choice of a career in social work. Many of the teachings of Jesus found in the New Testament offer examples. For instance, Jesus taught that those who were at the fringes of Palestinian society, such as the blind, lepers, the disabled, orphans, and widows, were to be treated with special care and dignity while those in powerful positions such as the religious leaders were to be confronted and reminded of their hypocrisy and undeserved privileges. “So the last will be first and the first last” (Matthew 20:16) was a frequent message Jesus taught his disciples. This sacred passage still has obvious implications for our times and is often held up as a highly important perspective by some social workers as to how we should respond to the powerless and oppressed in our own day. Muhammad also strongly advocated for helping vulnerable groups among the diverse communities in his life. Many people become social workers because they want to take this responsibility on in their own lives and it seems that using sacred readings in this way can be a very positive influence in one’s practice. Possibly an exception to this would be if these sacred passages were used to discriminate against other groups such as the middle and upper classes, who need help as well but do not fit in these categories.

Sacred Readings and Spiritual Interventions

Several spiritual interventions are described in chapter 9. Some of them draw on sacred readings. For example, a client may be asked to select a mantra for meditation that comes from their favorite religious passages. Examples include “Lord have mercy,” or “Allahu Akbar” (Arabic for “God is the greatest”), or shorter versions of these popular phrases. *Lectio Divina* (Latin for “Divine reading”) is another example. This intervention, described more fully in chapter 9, can help a client reflect on sacred readings in a heartfelt way by involving the client in reading a short sacred passage over and over; the intention is to help them go more deeply, in a heartfelt way, to hear their Higher Power speak to them. *Lectio Divina* is a prayer form popular with some groups of Christians in their daily meditation or when they feel a need to face an important decision or circumstance. These efforts to incorporate sacred readings into the help that they are offered by social workers also seems

ethically acceptable if the clients are voluntarily seeking this kind of help and if the sacred passages they use are of their own choosing.

Scriptural-Based Counseling

Religious sponsored counseling for individuals and families varies widely and usually is sponsored by faith-based agencies, other religious groups, or private practice settings. Often this type of counseling is designed to be relevant to particular sects of a religious group. Some popular religious counseling approaches are referred to as Christian counseling (for Christians) or Islamic counseling (for Muslims). It is noted that even this type of counseling varies widely among social workers, as illustrated in Scales and Kelly (2012). However, such counseling can be based on a belief in the absolute authority of the respective sacred scriptures.

Christian counseling is widespread in the U.S. and is usually popular with more conservative Christians such as Evangelicals. While most religious counseling approaches rely on sacred scriptures such as the Bible, approaches believing in Biblical authority seem to stand out as somewhat unique. In this case Biblical passages are usually viewed as the main or ultimate source of resolution or the answer to many of the client's problems. While such a counseling approach can be compatible with the Social Work Code of Ethics, there are instances when interpretations of scripture and social work ethics can come in conflict. Examples of such conflicts include LGBT relationships and husband/wife relationships in which wives are to submit to their husbands.

Ethics of Inclusion of Spirituality and Religion

Throughout the book, the concepts of spirituality and religion are presented so that they can be understood as important topics pertinent to the clients and communities that social workers serve. In chapters 2 and 13 emphasis is also given to how these concepts can be important to the professionals serving clients. The viewpoint held by the author is that spirituality and religion are personally important to most people and in many cases they can be empowering to clients. Further, the more social workers view spirituality as important to themselves, the more likely they will be to believe it is important to clients and their communities.

The controversies and challenges of teaching and practicing with these content areas (e.g. separation of church and state, social work mission, Code of Ethics, and others) will likely always be present to some degree and may even become more complicated in the future. Nevertheless, one way to help resolve these controversies and accelerate the incorporation of this material in the curriculum is to take a strong position on a major point emphasized throughout the book: **It's not about us, it's about our clients.** Whatever stake we may have in our own religious affiliation or spiritual perspective, it is not something to present to our clients. We are

there for them. We must remember to be where the client is. If our clients are spiritual and/or religious and these topics are perceived by them as relevant to how we can help them, then we have an obligation to invite them into the helping process.

It's not about Us, It's about Our Clients

We should also recognize that our profession is made up of people of all spiritual and religious persuasions—Catholics and Protestants, Evangelical and Mainline Protestants, Christians and Jews, believers and atheists, Muslims, Hindus, Buddhists, and many others. The diverse background of social workers based on religion and spirituality is extensive. Inevitably, it involves a multitude of beliefs pertinent to ethics and spirituality. The self-determination of clients is a basic ethic that we all must support (unless self-determination is harmful to self, others, or society) (NASW, 2008). We should always encourage open and honest discussions among students, between students and faculty, among faculty, between practitioners and faculty, and among practitioners (Reamer, 2003). Such discussions do not seem to happen very often in most programs or localities so we must work harder to insure that they do. That will be a step forward for our profession. While the conflicts among social work groups are real and important, efforts should always be made to keep the dialogue open and respectful for all the different positions that social work faculty, practitioners, and students hold (Hodge, 2003; Reamer, 2003). While there are many differences evident among members of the profession, we must always choose dialogue and mutual understanding over judgment, rejection, withdrawal, silence, and isolation.

Perhaps, because these discussions can be difficult and end up being more unproductive than productive, strategic planning should precede them. Guidelines such as the following can be helpful:

- Initially identify reasonable objectives for a discussion such as to learn more about each other's religious beliefs and practices, to develop an appreciation for the diversity of beliefs and practices among participants, or to find common ground among the various religious beliefs of participants.
- Consider dividing a larger group into smaller subgroups of two to eight so that participants can feel more comfortable sharing their beliefs on a personal level; the smaller number also maximizes everyone's chance of sharing.
- Set up helpful ground rules such as: confidentiality, use "I" messages, respect what each participant shares about their beliefs and practices, and ask questions rather than make statements about what each person shares.
- Encourage participants to give feedback to each other, especially when strengths are evident in what other participants share.
- Avoid using these sessions for participants to promote one religious group over another or for aiming excessive criticism at any group or individual participant.

NASW Code of Ethics as a Resource

The NASW (National Association of Social Workers) Code of Ethics is a foundational resource of ethical guidance for all social workers (NASW, 2008). It speaks in general terms, and leaves considerable flexibility for social workers to interpret whether their practice is ethical (Horner & Kelly, 2007). The entire Code is relevant to spirituality services and is organized around responsibilities to different groups including clients, colleagues, practice settings, professionals, and the profession. Several ethical sections of this Code that are considered most important to spiritually sensitive practice are highlighted below.

Ethical Responsibilities to Clients

The major ethical responsibilities especially relevant to *clients* (with emphasis added by the author) are (NASW, 2008):

- **Commitment to clients** (section 1.01) including “to promote the well-being of clients.” “In general, clients’ interests are primary” except when society or a specific legal obligation supersede them. (A client’s well-being includes their spiritual and religious well-being.)
- **Self-determination** (section 1.02) including “to promote the clients’ right to self-determination and assist clients in their efforts to identify and clarify their goals” (including any spiritual goals).
- **Informed consent** (section 1.03) about the range of services available and the areas of interest that can be explored (including spirituality).
- **Competence of the social worker** (section 1.04) is important “within the boundaries of their education, training, license, certification, consultation received, supervised experiences or other relevant experiences.” “When generally recognized standards do not exist with respect to emerging areas of

Ethics Scenario 1

You are assigned to a Muslim family that has been referred to you in a family agency. Their teenage daughter was being harassed at school for wearing a hijab or religious headscarf, an important religious custom to this family. She has also been frequently absent from school during the last several weeks, and it was during the time of Ramadan. You meet the family and find out that the father is the spokesperson for the family. You want to find out how both parents and the teenage daughter view these reported problems and how they can be resolved. What spiritual questions would you ask to help this family?

Ethics Scenario 2

You are the social worker (SW) meeting with Maria, a Caucasian client who lives in a rural area and belongs to a small Southern Baptist church. Maria has AIDS and has two children who are HIV-positive. As the SW, you ask, “How do you do it [keep going as a single mother with these overwhelming circumstances]?” Maria’s response is “The good Lord will give me only as much as I can handle.” As the SW, what are your thoughts about this comment and how would you explore it as a potential spiritual strength based on Maria’s religious background?

practice, social workers should exercise careful judgment and take responsible steps, including appropriate education, research, training consultation and supervision, to ensure the competence of their work and to protect clients from harm.” This is important in the area of spiritually sensitive practice and can be accomplished by taking spirituality courses in social work programs, participating in staff training and continuing education workshops, consulting others who are knowledgeable about the topic, and taking advantage of other opportunities to learn more about this practice area.

- **Cultural competence and social diversity** (section 1.05) are important in many areas, including spirituality and religion, especially in light of the wide range of ways that spirituality and religion are represented and expressed among different cultural groups. Social workers should have knowledge of the clients’ cultures and be able to demonstrate competence in the provision of services that are sensitive to clients’ cultures, including the spiritual and religious aspects.
- **Conflicts of interest** (section 1.07) are important to address in many areas (including not allowing a social worker’s spiritual biases to interfere in the helping process).

Ethical Responsibilities to Colleagues

Among the major ethical responsibilities to *colleagues* including *peers, supervisees, supervisors, and others*, are other sets of ethical responsibilities (NASW, 2008). While all of them are relevant to spiritually sensitive practice as well, two seem to have the greatest relevance. They are:

- **Respect** (section 2.01) for colleagues and their views on a range of areas (including their spiritual and religious positions).
- **Unethical Conduct of Colleagues** (section 2.11) should be addressed if the social worker is either disrespectful to others (in several areas including

the spiritual area) or the social worker is being disrespected or discriminated against by colleagues (in several areas including the spiritual area).

CSWE Accreditation Standards as a Resource

The accreditation standards of CSWE (the Council on Social Work Education) also support efforts to assist clients with spiritual and religious issues (CSWE, 2015). A summary of many of these issues is provided in chapter 5. Because some of these standards are pertinent to ethical issues, it is important to highlight them. The accreditation standards have a section on competencies that students are expected to demonstrate in practice. Nine competencies are identified in the 2015 report, along with competency-based behaviors that give more specificity to these competencies. Some of the competency-based standards and behaviors pertinent to ethics and spiritually sensitive practice are identified next (CSWE, 2015).

Understand Ethical and Professional Behavior (Competency 1)

- Make ethical decisions by applying the standards of the NASW Code of Ethics, relevant laws and regulations, models for ethical decision-making, ethical conduct of research, and additional codes of ethics as appropriate to context (including a code of ethics for spiritual practice).
- Use reflection and self-regulation to manage personal values and maintain professionalism in practice situations.
- Demonstrate professional demeanor in behavior; appearance; and oral, written, and electronic communication.
- Use supervision and consultation to guide professional judgment and behavior (including consulting experts on spiritually sensitive practice).

Engage Diversity and Difference in Practice (Competency 2)

- Apply and communicate understanding of the importance of diversity and difference in shaping life experiences in practice at the micro, mezzo, and macro levels (including spirituality/religion).
- Present oneself as a learner and engage clients and constituencies as experts of their own experiences (including their understanding of their spirituality).
- Apply self-awareness and self-regulation to manage the influence of personal biases and values in working with diverse clients and constituencies.

Advance Human Rights and Social, Economic, and Environmental Justice (Competency 3)

- Engage in practices that advance social, economic, and environmental justice (including practices that are spiritually based).

Engage in Policy Practice (Competency 5)

- Assess how social welfare and economic policies impact the delivery of and access to social services (spiritual policies too).
- Apply critical thinking to analyze, formulate, and advocate for policies that advance human rights and social, economic, and environmental justice (spiritual policies too).

Engage, Assess, Intervene, and Evaluate in Practice with Individuals, Families, Groups, Organizations, and Communities (Competencies 6–9)

- Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage, assess, intervene, and evaluate clients and constituencies. (Infuse these frameworks with spiritually sensitive practices.)
- Use empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies.
- Develop mutually agreed-on intervention goals and objectives based on the critical assessment of strengths, needs, and challenges within clients and constituencies (including spiritual interventions).
- Select appropriate intervention strategies based on the assessment, research knowledge, and values and preferences of clients and constituencies (including spiritual interventions).
- Select and use appropriate methods for evaluation of outcomes (including spiritual outcomes).
- Apply evaluation findings to improve practice effectiveness at the micro, mezzo, and macro levels (including spiritual findings).

Specific Ethical Issues in Spiritually Sensitive Practice

When working in these ethical areas, Gardner (2011) recommends that social workers look for common ground between their views and those of their clients as a way of maintaining a creative tension. Also she suggests that practitioners be aware of how their own spirituality could lead them to reflect critically on their clients' spirituality. Introspective questions could be asked, such as, "Why am I struggling to hear and accept that this is this person's experience?" and "How am I making sure that I am not assuming my spirituality is what the person needs?"

While the NASW Code of Ethics and the CSWE Accreditation standards speak to ethical principles related to spiritual interventions in general, there is no widely agreed upon specific code of ethics or guidelines for such interventions (Sheridan, 2009). When we examine more closely ethical problems inherent in

spiritually sensitive practice, we can detect numerous potential challenges needing attention. Canda, Nakashima, and Furman (2004), analyzing qualitative responses of their national study in 1997, identified several challenges identified by practitioners:

- not imposing the social worker's perspective;
- the necessity of worker competence;
- fitting spirituality to the timing and goals of clients' developmental processes;
- establishing a relationship including mutual understanding about spirituality prior to engagement on this topic;
- focusing only on a client-centered engagement of this topic (not worker-centered).

Beginning efforts have been made to develop such guidelines and some of these efforts are described next.

Canda and Furman Framework

A central question to ask is, when is it ethically acceptable to discuss spiritual and religious issues with clients? Canda and Furman (2010, p.292) created a helpful framework for determining under what circumstances a specific intervention would be ethical. They begin with a list of four different conditions. They are: A) The client has *not* expressed interest in the topic; B) The client has expressed interest in spirituality; C) A spiritually sensitive relationship is well established; D) The worker has relevant qualifications for particular spiritually based interventions. Obviously, the first condition is the least likely one to prepare a worker to proceed to discuss spiritual issues, while a combination of all of the last three conditions are the most ideal set of conditions for discussing spiritual issues. Of course, if condition A is where a practitioner is with a client and there seem to be no cues that spiritual or religious concerns are relevant to this client, the appropriate way to respond would be to not bring up these issues. However, if condition A is present early in a relationship with a client and spirituality has not yet been explored, the engagement phase, covered in chapter 7, can be an important place to explore whether spiritual issues are relevant to helping a particular client.

Possibly, one way to respond to this spectrum of conditions is to explore how to move from condition A to conditions B, C, and D although they do not make up a logical continuum. In this case it would be best to start with condition D. If the worker is not qualified to practice in a spiritually sensitive way, then the best response would be to prepare for such practice. Some of the ways that training can be accomplished are discussed in chapter 5. Next, condition C is something that is to be developed with clients; training how to practice in a spiritually sensitive way will help prepare a practitioner to do this. Then, once conditions C and D are met,

a practitioner can respond appropriately with clients who express an interest in discussing spiritual issues.

The Canda and Furman framework also identifies seven fairly typical scenarios that are possible options for offering spiritual activities. One example is direct use of spiritual activities upon the client's request and a second one is direct use of spiritual activities by the worker's invitation. This framework then asks and answers which of the four conditions are needed to implement each of these seven scenarios. For example, a private spiritually based activity by the worker before a session, such as meditation, would be ethically appropriate under any of these conditions, while direct use of spiritual activities by a worker's invitation would require conditions B, C, and D. This framework can be expanded to include several other scenarios, especially those most likely to occur in your agency as a way to further reflect on what is ethically sound practice. It is important to add that the authors always state that caution should be pursued with any of these scenarios.

Expansion of Canda and Furman Framework

By adding additional dimensions to this framework, further opportunities can be offered for reflecting on ethically sound practice. Among other things, other expectations, including issues surrounding the context of a particular agency, can be added to the analysis. The author proposes that five expectations be addressed in a timely fashion, the last three are not included in the Canda and Furman framework. These five expectations are:

- Expectation 1:** The worker is trained or otherwise prepared to practice in a spiritually sensitive way.
- Expectation 2:** The clients want to discuss spiritual issues whether they bring them up or not.
- Expectation 3:** Spirituality or religion are relevant to the problem that the clients are working on.
- Expectation 4:** The clients' issues are consistent with the agency sponsor's overall purpose and any positions they formally take on spiritual matters.
- Expectation 5:** There are no obvious biases evident in the worker's practice with a client, whether revealed explicitly or implicitly. If their religious background is similar to their clients', social workers may need to scrutinize their practice even more than normal because practitioner biases can be more easily expressed in these situations.

The first expectation, being prepared to practice in a spiritually sensitive way, necessarily precedes all of the other expectations. This has already been discussed and is a most important starting point. Next, a process of time is likely needed to be able to come to the conclusion that the other expectations are met as well. However,

they all should be addressed in a timely fashion and resolved before a contract with a client is worked out. Expectation 2 usually takes time, skillful practice, and some important exchanges between the worker and client. The engagement phase covered in chapter 7 discusses several techniques that can be used to help determine whether or not the client wants to discuss their spiritual issues. While spirituality issues could be raised in later phases of help, they are most likely to be raised in the initial engagement.

While expectation 2 is being addressed, expectation 3, spirituality's relevance to the client's problem at hand, usually needs some time of exploration and assessment as well. The question here is whether spiritual issues are relevant to a case. These issues could be relevant in numerous ways, so all possibilities should be considered. For example, are there spiritual supports—people or organizations that can be enlisted to join to help a client? Are there spiritual or religious issues beneath the surface that have an influence on the problem at hand, positively or negatively? Does the client seem to have strengths that are spiritual in nature that are important to engage?

Expectation 4, consistency of clients' issues with the agency sponsor's policies, is actually an expectation, like the first one, that should be initially addressed in a proactive way. Suggestions for developing policies and procedures to address spiritual issues of clients are introduced in chapter 5 and discussed in more detail in chapter 10. Expectation 5, avoiding spiritual or religious biases of the practitioner, is addressed in several chapters and is a common thread throughout the book. Chapter 7 devotes attention to how workers can aid themselves in avoiding expressions of spiritual biases. As has been said before, biases can emerge either through commission or omission. A worker failing to encourage a client to discuss their spiritual issues when they are relevant can be as detrimental as the introduction of the worker's own beliefs and other biases in an attempt to help. Expectation 5 is the most complex and difficult one to address, is an ongoing challenge to work on, and requires continual vigilance.

Expanding Canda and Furman's framework even further, conditions necessary for ethically appropriate practice could be considered at each of the phases of practice—engagement, assessment, intervention, and evaluation—because circumstances are very different as one moves from emphasis on one phase to another phase. By examining conditions in this way we can help workers consider ethical practice at each phase. Conditions proposed for each phase or component are described in Table 6.1.

Faith-Based Programs and Ethical Challenges

Faith-based agencies are still controversial, particularly around ethical issues like introducing and in some cases imposing the agency's religious position on clients. Expectation 5, described above, may be particularly challenging for faith-based

Table 6.1 Conditions for Ethical Practice by Phases

1. Engagement — conditions for bringing up or responding to a spiritual issue with a client:	Conditions <ul style="list-style-type: none"> • Client initiates or brings up a spiritual concern. • Worker indicates that spiritual concerns or issues could be discussed if it helps the client and the client wants to consider it. • Worker picks up on indirect spiritual message of the client, such as carrying a Bible or expressing something like “I would not survive without the Lord.” In these cases, the worker’s response should be limited to exploring if it has relevance to the type of help the client needs.
2. Assessment — conditions for exploring a spiritual concern in more depth:	Conditions <ul style="list-style-type: none"> • Client identifies a spiritual topic relevant to the problem to explore more fully. • A question could possibly be asked about a spiritual topic that has been indirectly mentioned, such as a religious conflict about using birth control. In these instances, the client could be asked if this topic could be explored further because of its possible relevance.
3. Intervention — conditions for using a spiritual intervention:	Conditions <ul style="list-style-type: none"> • Client fully understands the intervention and chooses to use it. • Worker recommends a relevant spiritual intervention, explains it fully and how it can help, and suggests it for the client as a possible intervention. Then, the client chooses to use the intervention or not.
4. Evaluation — conditions for evaluating a client’s spiritual well-being or evaluating the effectiveness of a spiritual intervention:	Conditions <ul style="list-style-type: none"> • If the evaluation is about the client’s spiritual well-being, the intent of the evaluation can be explained, including some of the questions to be asked. The client chooses whether or not to participate in the evaluation and is given the option to decline it. • If it is an evaluation of an intervention the client has participated in, the worker explains the importance of the evaluation as a standard of practice and asks the client to participate. The results of the evaluation are shared with the client.

agencies to implement successfully. Expectation 5 refers to having no obvious biases evident in the worker’s practice with a client whether revealed explicitly or implicitly. Sherwood (1998), a social worker, shares his struggles with separating his own religious beliefs as an Evangelical Christian from his client’s beliefs when employed in both a Christian counseling setting and a secular work setting. In the former setting, for example, he believes he must be careful not to respond too quickly to a client’s request for prayer as being genuine on the client’s part; he realizes prayer could be used as a defensive position of spiritual denial. In a secular setting he realizes that he has an ethical responsibility to respect the integrity of his own values, his clients’ values, and the values of the agency setting. Yet he wants to be bold enough to bring up religious and spiritual issues when they are warranted. He believes that clients often need permission to share spiritual issues they need help with and he feels he has the responsibility to help them tell their story and identify all relevant issues and resources. He concludes that for spiritual and religious assessments and interventions to take place he needs to be open to them, attuned to them, comfortable talking about these issues, and skillful in the

way that he does it by being sensitive and appropriate to both the client's values as well as his own.

A closer look at faith-based organizations and how they handle Expectation 5 seems worthy of attention and may be helpful to *all* practitioners using a spiritually sensitive approach. Some studies have focused on the welfare reform legislation passed in the mid-1990s, with shifts in federal policy to Charitable Choice, which allows faith-based agencies to include a religious component in their human service approach (Bielefeld, 2006). This provision among other things eliminated regulatory and contracting obstacles to the participation of faith-based organizations in delivering social services. Some proponents of faith-based agencies suggested that these agencies may be able to offer more than secular agencies because they would be more holistic in their approach and thus have more influence in transforming their clients than secular groups. Proponents also believed that faith-based groups could establish more caring and enduring relationships with clients and they would likely have a more motivated staff with a greater capacity to instill a spirit of hope (Bielefeld, 2006; Netting, O'Connor, & Yancey, 2006).

Some articles have focused on the influence of faith in human service programs related to the Charitable Choice provision, including a study by Huguen and Venema (2009). In addition, Netting (2002) focuses on the use of religiously oriented language in social service programs, and Sherr, Singletery, and Rogers (2009) examined the issue of proselytizing within social work agencies. These articles are relevant to the ethical issues of a spiritually sensitive approach and raise at least two important questions. First, how can the religious orientation of such agencies enrich the services provided to clients? And second, how do these agencies avoid imposing their religious orientation and beliefs on clients with a different religious orientation?

Findings of Huguen and Venema (2009) in their study of 1,110 faith-based programs revealed that over half viewed spirituality as central in their programs. They also looked at how these agencies described the faith-based component. One-third of programs communicated faith implicitly, mostly through acts of caring toward clients, and another one-fourth communicated their faith explicitly and conveyed the view that the role of faith was critical to changes clients could make. Another focus of the study was on how much direct exposure clients had with faith-related elements of the programs. These findings indicated the agencies more frequently communicated faith implicitly rather than explicitly. However, the authors indicated that these agencies differed widely in terms of the intensity of their exposure of faith-related programmatic elements that included processes, values, and relationships.

The survey questions used in the Huguen and Venema (2009) study can serve as helpful guidelines in clarifying when a faith-based program and a spiritually based program in general may be overstepping its ethical boundaries. These different guidelines are important to assess, especially when a program is funded with public money. The programs in this study responded most frequently (33 percent)

that “Faith is revealed through acts of caring for participants rather than by any explicit mention of religious or spiritual matters in the program.” This seems positive and in keeping with social work ethics. However, another group of programs (26 percent) indicated “Faith is an explicit and critical part of our work with participants, but staff respect the right of participants not to participate in the religious or spiritual aspects of the program.” Programs agreeing to this position seemed to be implementing an ethically questionable effort because clients may not have felt comfortable asserting their disagreements with the agency’s position because of a power differential and a fear of being rejected from the program or of being relegated to a less valued status. These “explicit efforts” would need to be very cautiously offered to allow clients the complete freedom to say no, which may not be possible in the real world for the reasons noted above. Another smaller group of programs (14 percent) in the Hugen and Venema study indicated that “Faith is an explicit, critical, and mandatory part of our work with participants who choose to participate in the program.” In these cases, it would appear to be clearly crossing the ethical line in imposing faith elements, unless these faith elements were based on the clients’ faith and not the agency’s. Another even smaller number (8 percent) agreed that “Faith is explicitly mentioned to participants, and they are invited to inquire more fully about religious or spiritual matters outside of the program.” This position seems to be a reasonable way for these programs to offer their faith-based elements with clients, allowing them to openly choose or reject them.

While many of these 1,110 agencies offered faith-based elements in their programs, the nature of these elements was not shared in detail (Hugen & Venema, 2009). What was partially shared were ethical statements reflecting different points of view. Responses to such statements provide a glimpse of some of the ways faith-based elements were offered. Each statement was followed by a Likert scale for recording responses (0 = never, 1 = rarely, 2 = sometimes, 3 = quite often, 4 = very frequently). The mean or average score for the respondents is described after each statement in the box on p. 145.

Overall, all of the items in the box on p. 145 have scores of 2.05 or less, indicating that respondents were, on average, reporting that these practices were sometimes or rarely used. Because these are average scores, some individual scores are above and some below these averages. Some agencies were likely to implement these practices quite often and some rarely. Also, what is interesting about these statements is that the faith-based elements are always written in such a way that they refer to the agencies’ faith and beliefs, not the clients’.

Questions need to be raised about how these agencies and others like them respond to the faith and beliefs of the clients, especially when they are different from those of the agency. Spiritually sensitive practice is based on helping the clients focus on their own beliefs, not those of the agencies. Looking closely at these statements, it’s possible that there may be room in some of these practices for clients to express their own spiritual practices when they are distinct from the agency.

Client Exposure to Faith-Related Program Elements

(Hugen & Venema, 2009)

Program participants join in group prayer as an element of our program. (2.05)

Program participants are invited to worship services that are separate from the program. (1.88)

Program participants learn to discuss faith-related beliefs, values, or traditions as an element of our program. (1.80)

Program participants are encouraged to make personal changes in attitudes and behaviors that are based clearly and openly on the faith-related values of our organization. (1.82)

Program participants are encouraged to make personal faith-related commitments. (1.72)

Program participants are encouraged to make personal changes in attitudes and behaviors that are understood but unspoken as being based on faith-related values of our organization. (1.69)

Program participants pray or meditate as an element of our program. (1.60)

Program participants study faith-related texts as an element of our program. (1.50)

Program participants join in worship services as an element of our program. (1.39)

For our program to be successful, program participants must undergo a faith-related transformation. (1.06)

Program participants are required to participate in mandatory faith elements of our program. (0.78)

This is an important overall question to ask faith-based agencies. How much commitment do faith-based agencies have to helping clients work with or engage their own spiritual beliefs and practices when they are different from the agency's?

Sherr, Singletary, and Rogers (2009) investigated whether faith-based agencies cross the ethical line and actually openly proselytize to clients to adopt the agency's religious beliefs and practices against their will. They conducted a case study of a Christian nonprofit agency. They found that this agency was crossing the ethical boundaries and concluded by recommending the following ethical guidelines for

practices offered by religious organizations. These guidelines seem very appropriate for other agencies to consider.

- **Clarify worker roles up front:** At the outset of a professional relationship, social workers should negotiate exactly what they are doing and be aware that client self-determination, worker competence, and avoidance of dual relationships are important requirements in providing ethical practice.
- **Avoid opportunities for unethical practice:** Social workers should avoid putting themselves in positions in which clients may feel they are being covertly or overtly pressured to discuss religious beliefs.
- **Acknowledge the potential for unethical practice:** Social workers need to openly acknowledge the potential for unethical practice with each other and with clients. They should also create a milieu of open dialogue about the inherent difficulties of practicing ethically with religious organizations.
- **Create a mechanism for ongoing confidential review with clients:** Social workers should get regular feedback from clients about their experiences, positive and negative, working with social workers at religious organizations.

Sherr, Singletary, and Rogers (2009) offer an important recommendation for practitioners to consider. “Assume that ethical problems can easily emerge and proactively stress the importance of client self-determination, acknowledge the potential for unethical practice on religious issues, especially with faith-based organizations, encourage open dialogue with clients about this possibility, and build in opportunities for regular feedback from the clients on their experiences generally.”

Netting (2002) suggests that consumers of faith-based agencies consider asking some questions about faith-based agencies during their first contact. Such questions are likely to bring some balance in the power differential between the agency and client. She identifies several helpful questions for consumers to ask during their first contact or earlier. Some of them follow:

- What does it mean that you are a faith-based provider?
- What faith do you represent?
- What will you do differently than a secular provider of services?
- Will you be careful not to make assumptions about me, to assume that I should share your beliefs, your faith?
- Will you still provide services to me if I do not live up to your moral standards? If I do not profess your faith? If I am skeptical of your faith tradition?
- Will you listen to me even if I do not believe as you believe?
- Will you meet my needs even if they are different than yours?
- Will you be okay if I do not meet your needs?

It may not be easy or realistic for most clients to ask these rather direct and confronting questions even though they are excellent questions to ask. If that is the

case, it would be appropriate for faith-based agencies to anticipate that clients may be wondering about some of these questions; in response they could proactively address them in an initial orientation to the agency or during the initial contact, because these discussions can be helpful in clarifying many of these ethical issues.

Religious Beliefs with Ethical Challenges

When people take positions on some social and biological issues, a deep divide can become apparent, sometimes in the extremes. How people view these issues and their solutions can easily bring controversy. They reveal sometimes in uncanny ways what people believe is right or wrong. Strong religious views often can influence these varying and competing positions and they can be based on many things, including beliefs, membership with a religious group, and other forms of peer influence.

At times, social workers differ with each other on these issues and in even more instances we may differ with our clients particularly on the solutions to take. When these issues become pertinent and often central to helping our clients, ethical challenges become critical. In many instances, religion and spirituality are relevant influences. A few examples of clients' ethical challenges and possible religious relevance may help here.

- **Abortion:** Should the decision about an abortion be decided between a pregnant woman and her doctor entirely, should a restricted option be available only under certain circumstances, or should abortion not be an option at all? Existing American law provides the right to an abortion but this right is gradually becoming more restricted by state laws and the courts. Among many people, religious beliefs play a role in their position of favoring the moral right of the embryo to be protected. Among many others, religious beliefs support the mother's right to her own life and well-being as well as her right to choose for herself.
- **Birth Control:** Should birth control be banned for everyone but marital couples, or is it a right of all women and their partners to choose a birth control method? Again, religious views can inform these questions from both sides in a way that may be similar to the abortion issue.
- **Medical Interventions versus Religious Interventions:** Should a medical intervention recommended by licensed medical personnel always be the preferred or even mandated option for treating a person, or can it be replaced by prayer, a special diet, or another non-medical, religious intervention if that is what a client chooses? A patient's religious affiliation and beliefs often influence how they proceed in accepting or rejecting a medical intervention. This ethical issue particularly becomes important when the medical intervention may be necessary to save someone's life.

- **Euthanasia:** Euthanasia refers to a practice of ending one's life to relieve pain and suffering. Should life be continued against the will of a person who chooses to die because of unbearable chronic pain or severe brain damage? Or should the affected person have the right to choose to live or die? Some religious groups believe that life is sacred and to be preserved above all else. Others believe that a person has a moral right to choose what is best for them, including terminating their life.
- **LGBT Issues:** Should LGBT people be allowed to marry each other if they wish or should this be denied them because sacred scriptures, interpreted by some, view marriage only being between a woman and man? Some conservative religious groups interpret their sacred texts to condemn homosexual behaviors while other religious groups believe that every person is a child of God and must be respected and valued for who they are. The latter group also believes that the Bible and other sacred texts do not take a clear and convincing position on this issue.
- **Death Penalty:** Should a person who willfully kills someone be eligible for execution under some circumstances or should their lives always be spared? Religion can play a role in this decision on either side of the issue. Some religious groups believe that every life is sacred and thus should be spared in all cases, while another religious view follows the Biblical passage, Leviticus 24:20, known as the "an eye for an eye" passage in the Old Testament, in which "The one who has inflicted the injury must suffer the same injury."
- **Religious Practices in Public Places:** At a macro level, should students' religious practices such as saying prayers or wearing a head covering for religious reasons be permitted in the public schools? Or should prayers, head coverings, and other religious practices be disallowed because of the doctrine of separation of church and state?
- **Relations between Marital Partners:** Should the relationship between marital partners be egalitarian in that neither person has a power advantage over the other? Or, based on the religious traditions of some conservative Christians, Hindus, Jews, and Muslims, is the male considered the head of the household and the person through whom a social worker may be expected to speak directly, with the woman deferring to her husband's words in such conversations?
- **Women as Leaders in Religious Organizations:** Should women be denied a leadership role, especially a cleric position, because this is part of the culture of some religious organizations? Or should they be encouraged to find a religious organization that welcomes them to explore such a leadership role, where their talents can be fully expressed?

These and other ethical questions can be complex and bring incredibly different responses from different people and groups. For example, even the terminology

One Person's Viewpoint

The truth is that male religious leaders have had—and still have—an option to interpret holy teachings either to exalt or subjugate women. They have, for their own selfish ends, overwhelmingly chosen the latter. Their continuing choice provides the foundation or justification for much of the pervasive persecution and abuse of women throughout the world.

(President Jimmy Carter, 2009)

used to simply identify these issues alone can reveal some of the differences. Hodge (2003), for example, presented some of the ethical issues separating Evangelical Christians from other social workers. Here is how he identified some of the value conflicts that some social workers are likely to face:

- social workers who believe in egalitarian marriages interacting with couples who affirm complementary marriages;
- social workers who believe in a biological origin of homosexuality interacting with people who believe that homosexuality is socially constructed;
- social workers who are morally opposed to spankings interacting with clients who affirm the importance of spankings as a disciplinary method;
- social workers who believe that morality and law are socially constructed working with clients who believe in divine revelation.

How We Can Help with Ethical Challenges

Let's consider how a social worker can be effective when they are assigned to help clients with such ethical challenges. One basic and critical question for social workers to consider is, when does client self-determination end and either societal law or the Code of Ethics preempt it? In most cases, it is not up to the social worker to decide. We are expected to help the clients make their own decisions and help them realize when their positions are in conflict with social work values and societal laws. We are to assist clients in coming to terms with a range of issues before them, some being their basic morals and ethics and how they may be in conflict with others'

What Language Would You Use?

What are your reactions to Hodge's wording of these ethical differences? How would you identify them using your own words and understanding? In what ways do the words that you may use, in themselves, create problems in overcoming these ethical conflicts?

morals and ethics. Our role involves carefully hearing and clearly understanding the client's side, their moral code, and how it affects their decisions. We also have a responsibility to help them explore the other side(s) that conflicts with their position, whether it is a societal law or professional ethics. When we are assisting two clients, such as an estranged couple or a parent and child, we are also helping them understand each other's positions and instances in which their positions may be different.

A process of assistance to a client when a religious or spiritual issue is relevant could begin with encouraging them to openly and freely tell their story (Bein, 2008). What do they perceive the problem or their situation to be, and what are the various ways that they and their significant others view it from a spiritual and religious perspective? How specifically do their religious and spiritual beliefs play a part? How important are these beliefs to them and their significant others? How do these beliefs influence their perspective? Are there alternative spiritual or religious beliefs that could also be considered in this regard? A report in the box below of a social work student on a visit to a Seventh Day Adventist Church illustrates some of these issues if the client belonged to this church.

Two ethical areas, abortion and LGBT rights, are perhaps among the most controversial in social work education, and religion and spirituality usually play a role in both controversies. These ethical issues are among the most controversial among social worker faculty and students and they often become evident in classroom and hallway discussions in social work programs. The political positions of more liberal

Visit to a Seventh Day Adventist Church

(Patrick Swan)

After visiting a Seventh Day Adventist Church, a student journaled:

A belief that is apparently commonly held within this denomination is that people's lives and destinations are predetermined. "God has a plan for me" was a line in one of the songs, for instance. As I mentioned, the pastor spoke about how it was asinine to try to shorten or prolong life. I feel like this could create an issue with a social worker working with a client with these beliefs. If a person held this ideology, they may think taking action to better their situations or preventing avoidable hardship may be futile. Nevertheless, I think this could be an opportunity to reframe a situation with a client. A possible scenario may be a client who has been diagnosed with diabetes believing that changing his eating habits is pointless. A way of reframing this in reference to the client's relationship to their Higher Power could be to ask if they believe God would want them to suffer needlessly. This denomination seems to also prescribe to free will, so that strategy may be effective.

professionals, the vast majority, seem often to be at odds with those who are more religiously conservative, particularly Evangelical Christians (Hodge, 2002; Reamer, 2003).

While Reamer (2003) recognizes this reality among social workers, he makes an important distinction that is also made by the author earlier in the chapter. We must distinguish acknowledging differences among social workers about their ethical positions on abortion, LGBT issues, and other matters from how we help clients. We must always be prepared and willing to help clients decide for themselves where they stand on these issues as they address their problems and what their options for solutions are. For example, if a social worker is uncomfortable with the rights of LGBT people to marry, this position must not interfere with helping a LGBT couple decide for themselves whether they wish to get married. Similarly, a social worker could be in favor of LGBT rights and be working with parents of an LGBT individual who are unwilling to accept their adult child's sexual orientation; this worker also has an obligation to help these parents decide for themselves how they will view their adult child, including examining all of their options. As Reamer (2003, p.429) points out, "social workers should be as willing to serve and assist people whose values and lifestyles are different from their own—whether the clients are more or less liberal or conservative politically, or more or less religious in their beliefs and practices—as they are people whose values and lifestyles are similar." Reamer also reminds us, "In our professional capacity we do not have the right to interfere with clients whose views and actions differ from ours so long as the clients' views and actions do not violate social work's mission and ethics" (p. 430).

Conclusion

This chapter focuses on moral and ethical issues that can come into play in spiritually sensitive practice. Our moral and ethical code usually has a strong association with our spirituality and this code has been introduced in chapter 1 as one of the manifestations of spirituality. Our beliefs are also an important topic of the chapter, particularly our beliefs that form our positions on moral and ethical issues. Religious and spiritual groups are major sources for the ethics and morality of many people. Inclusion of religion and spirituality in social work education and professional practice brings controversies for some people and often such inclusion raises ethical issues, such as: Is this a violation of separation of church and state? And can religious beliefs interfere with our social work mission? Ethical concerns are also raised when social workers do not engage and respond to the spiritual issues of their clients. The NASW Code of Ethics and Accreditation standards are described as a helpful source of information and support for including spiritual issues in our practice. A helpful framework is included in the chapter that offers guidelines for determining if and when to engage spiritual and religious issues with individual clients. Faith-based agencies face some unique ethical challenges and some of the

ways to consider addressing them are also covered. Finally, several ethical challenges can be raised when working with some religious clients. Issues like abortion, birth control, euthanasia, and relationships between married couples are examples and need to be thoughtfully worked out.

Discussion Questions and Exercises

1. Three ethical principles that have relevance to the professional life of social workers are mentioned early in the chapter. They are: do no harm, communicate to heal, and right a wrong. Pick one of these principles and apply it to an ethical issue with which you are grappling. Describe this issue and how you have resolved or wish to resolve it using this ethical principle.
2. Many ethical challenges are evident in our work with clients. They often have a spiritual or religious element in them. Several of these issues are discussed in the chapter, including abortion, birth control, the death penalty, euthanasia, medical interventions and religious opposition, religious practices in public places, LGBT issues, relations between marital partners, and women in leadership roles in religious organizations. Select one of these ethically challenging issues and attempt to answer the specific question it raises in the chapter. Then imagine that you have a client with this issue. What would you consider doing to help them face this issue?
3. In the chapter, Hodge (2003) presented some of the value conflicts that he believes separate some social workers from their more conservative religious clients. Here is how he identified some of the value conflicts that social workers are likely to face with each other or with some clients:
 - social workers who believe in egalitarian marriages interacting with couples who affirm complementary marriages;
 - social workers who believe in a biological origin of homosexuality interacting with people who believe that homosexuality is socially constructed;
 - social workers who are morally opposed to spankings interacting with clients who affirm the importance of spanking as a disciplinary method;
 - social workers who believe that morality and law are socially constructed working with clients who believe in divine revelation.

What are your reactions to Hodge's wording of these ethical differences? How would you identify them using your own words and understanding? In what ways do the words that we use, in themselves, create problems in overcoming these ethical conflicts?

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