<u>Spiritually Sensitive Social Work:</u>

<u>An Overview of American and International Trends</u>

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Abstract

This article presents an overview of the movement for spiritually sensitive social work practice that has recently emerged in the United States and several countries, including key concepts, values, evidence base, examples of practices, and international considerations. Spiritually sensitive social work addresses the spiritual goals and aspirations of clients and their communities in a holistic and culturally appropriate manner. It respects the full variety of religious and nonreligious expressions of spirituality.

Spirituality Sensitive Social Work:

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This article offers an overview of a framework for spiritually sensitive social work with an emphasis on the ways spirituality can be a resource for promoting wellbeing and harmony within oneself, in societies, and in the world. Spiritually sensitive social work addresses the ways that practitioners, clients, and their communities seek a sense of meaning, purpose, and connectedness as they strive to achieve their highest aspirations and as they work to overcome personal obstacles and environmental blocks and gaps in resources.

Although the focus is on social work, the framework draws on an extensive body of empirical evidence, theory, and practice guidelines from social work, psychology (especially transpersonal theory and positive psychology), resilience studies in health and mental health, and cross-cultural religious studies. It connects with parallel movements in counseling, medicine, psychology, nursing, and related helping professions (e.g. Koenig, 2007). Although these allied movements have been emerging for more than 2 decades, many social workers and other helping professionals and scholars remain little aware of it, especially outside of North America. Therefore, this article provides an introductory overview of spiritually sensitive social work, including definitions of spirituality and religion, guiding values, recent developments, and practice implications along with reflections on its cross-cultural and international relevance and its implications for wellbeing and harmony within oneself, in societies, and in the world. It focuses on the framework for spiritually sensitive social work developed by Canda and Furman (1999 & 2009).

Definitions

The definitions offered here draw on current scholarship in social work, related helping professions, and religious studies. They are intended to offer clarity of meaning for the purpose of this article while also acknowledging the qualities of spirituality that vary according to cultures and religions and those that transcend words and measurements.

It has become common to distinguish between spirituality and religion as related but distinct concepts. For the purpose of this article, the following definitions are used from Canda and Furman (2009).

Spirituality is:

A process of human life and development

- *focusing on the search for a sense of meaning, purpose, morality, and wellbeing*
    - *in relationship* with oneself, other people, other beings, the universe, and ultimate reality however understood (e.g. in animistic, atheistic, nontheistic, polytheistic, theistic, or other ways);
- *orienting around centrally significant priorities*; and
- *engaging a sense of transcendence* (experienced as deeply profound, sacred, or transpersonal).

Individuals may express spirituality in religious and nonreligious ways and in private and public venues. A religious or nonreligious *spiritual perspective* is an individual's or group's worldview or ideology rooted in spirituality. Transcendence refers to experiences and interpretations of events as profound, breaking through banality and limitedness by time and space. As a universal feature of persons and cultures, everyone has spirituality, though people vary in amount of focus on it.

Healthy spirituality encourages individuals and communities to develop a sense of meaningfulness, purposefulness, personal integrity, wholeness, joy, peace, contentment, coherence of worldview, and overall wellbeing. Healthy spirituality engenders individuals' virtues, such as compassion and justice, as well as relational webs of caring, respect, and support extending outward to other people and beings. It encourages groups to develop mutual support, philanthropic activity, appreciation of diversity, and actions for the common good of society and world. Unpleasant yet authentic feelings (such as existential despair, grief, or pangs of conscience), developmental crises or emergencies (such as disruptive transpersonal experiences), and difficult group dynamics (such as working toward mutual understanding and reconciliation during times of conflict) can be significant and valuable components of healthy spirituality. Unfortunately, spirituality – like any aspect of human behavior- does not always manifest in healthy ways (Moss, 2005 and see his paradigm at http://www.bernardmoss.org.uk/new%20_paradigm.htm, retrieved October 17, 2008). Spirituality can be distorted and misdirected into beliefs, attitudes, and behaviors that are harmful to self or others, such as feelings of inappropriate guilt, shame, and hopelessness and discrimination and oppression.

This definition of spirituality does not presume or exclude belief in an incorporeal, immaterial, or supernatural realm or entities; it takes into account the extremely wide range of worldviews related to spirituality. In contemporary English usage, people can be 'inspired' or have 'team spirit' without literally being possessed or controlled by a spirit. People can understand 'spirit' literally or metaphorically to refer to that which gives them vitality and drive for meaning and transcendence.

Religion is:

An institutionalized (i.e. systematic and organized) pattern of values, beliefs, symbols, behaviors, and experiences that involves

- *spirituality;*

- a *community* of adherents;

- transmission of *traditions* over time; and

- *community support functions* (e.g. organizational structure, material assistance, emotional support, or political advocacy) that are directly or indirectly related to spirituality.

Religion always involves some degree of both private and public community experience for individual members of a religious group and for the group as a whole. A religion may operate with or without centralized and bureaucratized organizational structures. Of course, not all individuals or societies are religious. Some countries, such as the United States, have very high levels of religious affiliation in the population; others, like Japan and mainland China, have low levels of formal religious affiliation.

Religiousness (or religiosity) refers to the degree and style of someone's religious involvement. *Healthy religiousness*, as an expression of spirituality, encourages a person's and a religious group's sense of wellbeing, coherent worldview, transpersonal development, virtues, and relational webs of caring, respect, and support that extend toward fellow adherents and toward community, society, and world. However, religiously related delusions, hallucinations, low self-esteem, abuse, oppression and violence are lamentable expressions of unhealthy religiousness.

Given these definitions, *spirituality is the source of religion, but it is not limited to religion. Spirituality includes and transcends religion.*

The Guiding Value of Compassion and Ethical Principles

Compassion is the primary guiding value of spiritually sensitive social work. *Compassion* literally means passion-with-others. It is commiseration in empathy with others. It is solidarity of response to suffering. Spiritually sensitive social work is a courageous (literally, from French, 'of the heart') commitment to a spiritual path of action to promote the well-being of all people and all beings.

The theme of compassionate heart to heart connection in service is well expressed in traditional Chinese philosophy. The primary virtue emphasized in Confucianism is *ren* (Chinese) which means benevolence or humaneness. This Chinese character is formed by adding two strokes, signifying connection, to the symbol for 'person.' This means that to be a genuine human being is to be connected (Canda 2002a & 2002b). As we grow in sense of connection and responsibility with other people, other beings, and the ground of being, we have a natural drive to search for ways to help and heal ourselves and the world. All spiritual traditions and all people struggle with experiences of suffering, injustice, mortality, and death. And all seek means of remedy and transcendence.

The Chinese Confucian sage, Mencius (lived 372-289 BCE) said that everyone has a heart that can't bear to see others suffer. "Suddenly seeing a baby about to fall into a well, anyone would be heart-stricken with pity… without a heart of compassion we aren't human (trans. Hinton, 1998, p. 55). In fact, the Chinese character for mind is shaped like a heart, indicating that human mind is a font of feeling, thought, and caring concern (Lee, Chan, Ng, & Leung, 2009).

In spiritually sensitive social work, this broad value expresses through ethical principles that reflect the ethical standards of the USA's National Association of Social

Workers (NASW) and Council on Social Work Education (CSWE) and International Association of Schools of Social Work and International Federation of Social Workers (IASSW/IFSW).

The principles are intended as encouragements and challenges for each of us to decide whether these are helpful for various professional settings and cultural and national contexts. In agreement with Kreitzer (2006) and Yip (2004), the principles incorporate appreciation for responsibility and rights, social stability and change, and empowerment and interrelationship through an attitude of dynamic exchange between the views of people with diverse spiritual perspectives and social-political locations.

Service. Spiritually sensitive social workers apply knowledge, values, and skills to help people attain their goals by attending to material, biological, psychological, relational, and spiritual needs, according to the priorities and aspirations of clients and communities. They support clients to utilize their personal strengths and environmental resources in a socially and ecologically responsible manner.

Social Justice. Spiritually sensitive social workers pursue positive social change and social justice, particularly with and on behalf of vulnerable and oppressed individuals and groups of people, including targets of negative spiritual discrimination. Therefore, they strive to overcome environmental racism, international social injustice, war between cultures and nations, and human activities that are destructive to local and planet-wide ecological systems. This concern extends to any place humans traverse, on this Earth or beyond.

Dignity and Worth of the Person. Spiritually sensitive social workers treat everyone with compassion and respect, mindful of individual and cultural differences,

including religious and spiritual diversity. They address clients as whole persons, applying professional roles, rules, and assessment labels in a flexible and collaborative way that is responsive to the values of the client and his or her community. They also strive to make respectful connections across differences and to find common ground for cooperation. They honor the common and universal human needs for a sense of meaning, purpose, morality, and fulfilling relationships. They promote individuals', cultures', and nations' self-determination in the context of social and global responsibility.

Relationships. Spiritually sensitive social workers understand that healthy relationships between and among people and other beings are important for growth. They engage people as partners in the helping process, including collaboration with religious and nonreligious spiritual support systems as relevant to clients. They seek to strengthen relationships among people and other beings in order to promote, restore, maintain, and enhance the well-being of individuals, families, social groups, organizations, communities, the global community, and all the ecosystems in which these are embedded. They identify and respect clients' various ways of construing social relations, such as individuality, family centered identity, or communality.

Competence. Spiritually sensitive social workers continually strive to increase their professional wisdom, knowledge, and skills for effective practice. Especially in regard to explicit use of religious or nonreligious spiritual beliefs, symbols, rituals, therapeutic practices, or community support systems, spiritually sensitive social workers obtain relevant knowledge and skills. Social work practice across different spiritual traditions, communities, and cultures is performed with respect for the values and preferences of clients and relevant members of those groups. Spiritually sensitive social

workers learn how to cooperate and collaborate with community based spiritual support systems, helpers, and healers in a culturally competent manner.

This ethical approach emphasizes consideration of what may or not be relevant to particular clients' situations, locales, and cultural contexts. Population-specific, locality-specific, and culturally specific approaches to social work need to be developed from the ground up; they also need to be connected with a variety of perspectives in mutual affirmation and scrutiny (Gray & Fook, 2004). Further, no inappropriate or incongruous religious or non-religious values and agendas should be imposed on clients or communities. The use of spiritually based concepts or helping activities depends on the goals, preferences, and worldviews of those whom we serve.

<div align="center">Historical Development</div>

Five broad overlapping historical phases characterize the development of connections between spirituality and social work in the United States (Canda & Furman, 2009): *Indigenous social welfare* (precolonial period); *sectarian origins* (colonial period through early 20th century); *professionalization and secularization* (1920s through 1970s); *resurgence of interest in spirituality* (1980s to mid 1990s); and *transcending boundaries* (mid 1990s to present).

The first phase, *Indigenous social welfare*, covers tens of thousands of years during which Indigenous cultures in North America (as everywhere else) had (and continue to have) distinctive holistic spiritually based patterns of helping, healing, and mutual support extending to social welfare and respect for the earth (e.g. Baskin, 2006; McKenzie and Morrisette, 2003). Help provided by community leaders, herbalists, spiritual healers, peacemakers, respected elders, and ritualists sought to maintain or

restore the web of harmonious relations within and among persons, communities, and cosmos. Unfortunately, these Indigenous helping systems were assaulted during the colonial period and they were largely ignored by the Euro-American founders of professional social work.

In the second phase, *sectarian origins*, voluntary social services and governmental social welfare related policies were largely influenced, directly or indirectly, by Christian and Jewish conceptions of charity and community responsibility (Boddie, 2008). These involved rival applications of theological ideas to social life, such as emphasizing individual moral blame or merit (e.g. distinction between worthy and unworthy poor) versus social justice and communal responsibility (e.g. Jewish communal service and the Christian social gospel). During this phase, Indigenous, African American, and French and Spanish Catholic spiritual perspectives also shaped social work, though these have not been acknowledged widely (e.g. Martin & Martin, 2002).

Other countries vary widely in the level of influence from religions on formation of social work and social welfare. For example, in South Korea, contemporary social welfare originated with strong influences from Christian missionaries and Western theories and models, especially after the Korean war. Korean culture has at least 4 thousand years history of influence from Indigenous shamanism and more than two thousand years of influence from Buddhism, Confucianism, and to a lesser extent, Daoism. However, there are relatively few publications or courses on spirituality and social work in South Korea and these rarely address Confucianism or shamanism (Canda & Canda, 1996; Park, S. H. & Kim, K. M., personal correspondence, 2009). It would

useful to study variatious national histories of social welfare to consider how these shape current understandings (or lack of attention to) spirituality.

During the third phase, *professionalization and secularization*, as social work professionalized, secular humanistic and scientific perspectives, such as socialism, social functionalism, Freudianism, and behaviorism became more influential than theology. It was hoped that these scientific views would provide a more reliable base for practice. Increased involvement of federal and state governments in social work and social welfare brought greater concerns about separation of church and state within the arena of social services. In general, many social workers grew wary of the tendency of some religious providers of services to engage in moralistic judgmentalism, blaming the victim, proselytization, and exclusivism. During this period, NASW and CSWE formed as inclusive, secular, professional organizations, in contrast to earlier sectarian social work organizations. However, some social work scholars continued to call attention to spirituality in publications (e.g. Spencer, 1956). Ideas from Asian religions began to enter social work literature (e.g. Brandon, 1976). Humanistic, Jungian, and other nonsectarian spiritual perspectives grew within social work, often without explicit mention of religion or spirituality (Robbins, Chatterjeee, & Canda, 2006).

This pattern of secularization of contemporary social welfare seems very common around the world to various degrees, e.g. USA less secular, UK and Norway more secular. If national professions identify spirituality with religion or proselytization and judgmentalism, the tendency is to ignore both spirituality and religion.

The fourth phase, *resurgence of interest in spirituality*, expanded on the ecumenical, interreligious, and nonsectarian spiritual undercurrents that existed in the

American profession from its beginning. During the 1980s, publications called for a return to our profession's historic commitment to spirituality. The significant innovation was addressing spirituality in a way that includes and respects the diverse range of religious and nonreligious spiritual perspectives among clients (e.g. Canda, 1988; Joseph, 1988; Loewenberg, 1988; Siporin, 1985).

Up to the mid-1990s, this trend continued to expand rapidly. Increasingly numerous articles and books appeared dealing with spirituality and social work, including a wider range of religious and nonsectarian approaches such as Buddhism, Confucianism, Hinduism, Shamanism, Daoism, and transpersonal theory (Canda, Nakashima, Burgess, Russel, & Barfield, 2003). The national Society for Spirituality and Social Work was founded in 1990 to bring together scholars and practitioners of diverse spiritual perspectives for the enhancement of the profession. Social work scholars in Canada, Norway, Aotorea New Zealand, Australia, the United Kingdom, South Africa, South Korea, Japan, Croatia, Hong Kong (China), began to create their own national networks with international connections.

In phase five (1995 to present), *transcending boundaries*, all of these trends have been accelerating. The distinguishing features of this period are the formal recognition of spirituality in US social work educational standards and the movement among scholars and practitioners to transcend spiritual, disciplinary, national, and other boundaries.

The 1995 version of CSWE's curriculum guidelines returned attention to belief systems, religion, and spirituality, especially with regard to client diversity (Russel, 2006). Social work texts published in the USA and UK during the next several years set out

frameworks for integrating spirituality into social work (e.g. Canda & Furman, 1999; Crompton, 1998; Nash & Stewart, 2002; Patel, Naik, & Humphries, 1997).

In the early 2000s, ecophilosophical spiritual views on social work entered our field, mainly through the work of Besthorn (e.g. 2001) and Coates (2003). The range and numbers of publications on spirituality in general and context-specific understandings have continued to increase more rapidly until the present (Graham & Shier, 2009). Postmodern perspectives (such as feminist, ecophilosophical, transpersonal, and post-colonial) are calling social work to extend its inclusive approach to spirituality to all peoples, nations, beings, and the whole earth.

Courses, conferences, and symposia on spirituality have been increasing in North America and in other countries. For example, Russel (2006) noted that spirituality electives in American MSW programs increased significantly in the past 10-12 years; she identified 57 such courses in the country in 2004. The first international conference of the Society for Spirituality and Social Work (SSSW) took place in 2000. In the past several years, international conferences hosted by IFSW and IASSW have featured many presentations and networking on spirituality. The Centre on Behavioral Health of the University of Hong Kong was established by Professor Cecilia Chan in 2002 "…to provide a holistic approach for the promotion and betterment of mental, emotional and behavioral welfare of the community, as well as aspiring towards achieving international recognition in the field" (http://web.hku.hk/~bhealth/index.html). The Canadian Society for Spirituality and Social Work was established in 2002. John Coates, the director, cooperates with Ann Weaver Nichols, the director of the US based SSSW to co-host annual North American conferences. International symposia on spirituality and social

work at the Inter-University Center of Dubrovnik, Croatia expanded under the inspiration of Dada Maglajlic. In 2005, Bernard Moss formed the Staffordshire University Centre for Spirituality and Health in England (see http://www.bernardmoss.org.uk/).

Another trend of this phase has been the increase of empirical research about spirituality in social work. Sheridan was the main forerunner of surveys on practitioners' and educators' attitudes about spirituality in social work and has continued to develop these (e.g. Sheridan, 2009). Qualitative and quantitative empirical studies on the impacts of religious participation as well as spiritually based social work and mental health practices have increased dramatically(e.g. Ai, 2006; Koenig, McCullough, & Larson, 2001). These often draw on interdisciplinary insights and research approaches especially from gerontology, health, and mental health fields.

This phase also includes a transcendence of Western historical biases that privilege secular, positivistic, scientific, and technocratic views that predominate in the global marketplace of ideas. Many of the insights that are most contemporary are also linked to the most ancient, including Indigenous spiritualities. For example, given the aboriginal status of Indigenous populations in any world region and the significance of their long established traditions of health and wellbeing, all social workers should hold Indigenous ways of helping with special esteem and appreciation. Contemporary social work is rediscovering many insights of Indigenous worldviews, such as holistic understanding of the person/environment, the interrelatedness of all things, and the sacredness of the Earth. For example, the Aotorea New Zealand (ANZ) professional social worker organization's recognition of Indigenous people's rights, treaty obligations,

and appreciation for Indigenous spiritual perspective is a good model for social work around the world (Nash & Stewart, 2002). Each nation based social work profession might benefit by re-examining local traditional wisdoms about human service in light of what may or may not be applicable to and transformative of contemporary spiritually sensitive social work.

These trends of spiritually sensitive social work are helping to draw the profession farther beyond egocentric, ethnocentric, humanocentric and other limiting, divisive views. They intersect with globalization in both its helpful forms (such as promotion of human rights) and its detrimental forms (such as militaristic expansionism and exploitive transnational economies). The challenge now is how spiritually sensitive social work can continue to further personal wellbeing and social and ecological justice for all people and all beings, as we extend connectedness around this planet and beyond. To paraphrase Graham and Shier (2009), social workers invested in spirituality need to develop a knowledge base that is both locally and globally compatible, by connecting North and South and East and West through collaborations that are nonhegemonic and mutually enriching.

<div align="center">Spiritual Assessment</div>

Strengths focused implicit spiritual assessment (Eichler, Deegan, Canda, & Wells, 2006) illustrates this approach. In strengths assessment, the client is not reduced to problems, pathologies, diagnostic labels, or pieces. If clients are dealing with specific problems or disabilities, these are addressed within the context of the whole person/environment, including spirituality. Clients are assisted to draw on their talents, abilities, hobbies, capacities, and community connections to meet their aspirations. Their spiritual strengths

and resources, whenever relevant, are brought to bear on ideals for growth or identified

problems to achieve growth, recovery, and resilience. Focus is on the present, but past

strengths are recalled and future hopes are invoked to catalyze growth.

The least intrusive approach to assessment is implicit. First of all, by cultivating a

caring and empathic relationship with the client, without talking explicitly about religion

or spirituality, we cue the client to our openness, receptivity, interest, and respect for

whatever is important to her or him. Implicit spiritual assessment can be facilitated by

open-ended questions that tap themes related to religion and spirituality through use of

everyday nonreligious language. Clients' responses will give cues about whether and how

to proceed into explicit spiritual assessment. Table 1 shows some sample questions for

implicit spiritual assessment, especially drawn from Eichler, Deegan, Canda, & Wells

(2006) and Pargament (2007). See Canda and Furman (2009) for several ways to conduct

detailed spiritually sensitive assessment.

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Spiritually Oriented Helping Activities

Given the ethical principles stated previously, social workers should apply

explicitly spiritually oriented practices with clients on two conditions: having significant

personal experience and sufficient formal training with them; and ensuring that the

practices are congruent with a client's interests, values, goals, and beliefs. Indeed, most

American social workers report that clients raise spiritual issues, that they sometimes

engage spiritually based helping practices, but they have had little or no educational

preparation about this, as indicated by the 2008 national survey of direct practice NASW

members (n=1,804), led by Leola Furman (Canda & Furman, 2009). For example, 50%

or more of respondents reported that they had recommended religious or spiritual writings, prayed or meditated privately for a client, used religious or spiritual language or concepts, recommended participation in a religious or spiritual support system or activity, included rituals, journaling, and referred to or collaborated with religious/spiritual helpers or leaders. They also assessed helpful and harmful aspects of spirituality and religion, clients' sense of meaning and purpose and views on life after death,

If a client has a serious physical or mental condition that involves fragile health or psychological instability, special precautions should be taken. In general, it is helpful to choose spiritual practices that build on clients' strengths and provide a balancing complement to their problematic extremes. For example, highly introspective clients would likely be comfortable with quiet sitting meditation, while the same activity might be frustrating to an extrovert. The extrovert might be more comfortable with body-focused therapies and meditative practices done during physical activity like hatha yoga, qigong, jogging, listening to music, or driving a car.

Current theories of spiritual development and hundreds of empirical studies of best practices show great promise for meditation related therapies that may or may not be related to religions (Dimeff & Koerner, 2007; Koenig, McCulloguh, & larson, 2001; Newberg & Newberg, 2005; Shapiro, Schwartz, & Santerre, 2005). *Meditation* refers to a wide range of practices that involve intentionally focusing attention, commonly joined with balanced well-poised posture (e.g. while sitting or walking), letting go of ordinary preoccupations, distractions, and ruminative thinking, and deepening one's insight or experience of consciousness. *Mindfulness* means paying attention to the present moment with a clear mind that acknowledges <u>what is</u> without judgment (Mace, 2008). There are a

variety of mindfulness related techniques that can be joined with specific therapeutic systems, such as cognitive behavioral therapy, that are tailored to particular health or mental health issues.

In general, therapeutic meditation is associated with decreased stress, anxiety, nonclinical depression, cardiovascular disease, pain; heightened capacity for sense of control, spiritual experiences, creativity, positive affects, empathy, and acceptance; and heightened perception, reaction time, and concentration. Certain types of meditation can induce significant changes and enhancements of consciousness which may be associated with changes in the neurochemical systems and brain functions. Mindfulness practices have been shown to be effective with regard to a wide range of issues, including personality disorders, mood disorders, severe mental disorders (psychosis), pain management, partner violence, and coping with serious illness.

Promoting Harmony Locally and Globally

Spiritually sensitive practice focuses on the strengths and resources available through incorporating spirituality and religion into social work practice. It also addresses the obstacles and pitfalls that spirituality and religion might involve for people. As with any aspect of human life, religion and spirituality (in religious and secular forms) can be used to support or impede individual fulfillment and social justice. Within every country there are religious and spiritual experiences, practices, and groups that provide great solace, strength, beauty, wisdom, and empowerment; there are also the harmful manifestations of religion and spirituality gone awry. Spiritually sensitive social work seeks to actualize the strengths and resources of people and communities, while striving to transform problems

and obstacles into challenges and opportunities for working through to ever greater levels of wellbeing and justice.

Many of the issues and examples of practice presented in this article are rooted in a distinctively American context. However, this approach to spiritually sensitive practice draws on spiritually and culturally diverse inspirations. Hopefully it can serve as one frame of reference for international dialogue and collaboration. Social workers around the world are encouraged to adapt what is of use and to discard what is not. A process of international and cross-cultural dialogue for mutual learning and collaborative research can generate innovations in spiritually sensitive social work that have local and global relevance.

An outstanding example of transnational research is Al Krenawi and Graham's (2009) in depth study of social work practice with Bedouin-Arab people of the Negev, Israel, that weaves together culture-specific understanding and practices that honor Bedouin Arab and Islamic traditions and guidance for culturally appropriate social work from various countries. Another outstanding example is the Integrative Mind-Body-Spirit approach to social work that draws on insights from Chinese traditional medicine and philosophy, an interdisciplinary international body of theory and knowledge, case examples, and empirical studies of effectiveness (Lee, Chan, Ng, & Leung, 2009). The 2008 National Survey by Canda and Furman (2009) is part of a larger transnational study that so far includes collaborative ventures between researchers in the US, Norway, Aotorea New Zealand (ANZ), and the United Kingdom (UK). See the website, International Study of Religion and Spirituality in Social Work Practice (http://spiritualityreligionsurvey.com/default.aspx) for executive summaries. For more

international resources on spirituality in social work, see the online Spiritual Diversity

and Social Work Resource Center via http://www.socwel.ku.edu/canda.

The vision of spiritually sensitive social work is to promote wellbeing for all

peoples and all beings. This requires that social workers develop values, knowledge,

skills, relationship qualities, and scope of consciousness that can connect with local,

immediate situations as well as global and cosmic contexts. Although this is a lofty and

long term goal, it is an important counter trend to the prevalence of distress, divisiveness,

and conflict in today's world.

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Table 1 (Excerpts from Table 8.4 in Canda & Furman, 2009)

Examples of Questions for Implicit Spiritual Assessment

- What currently brings a sense of meaning and purpose to your life?

- What helps you feel more aware and centered?

- Where do you go to find a sense of deep inspiration or peace?

- When do you feel times of great peace, joy, and satisfaction with life?

- What are the most important sources of strength and help for you in getting through times of difficulty or crisis?

- Who are your most important mentors and why?

- In what way is it important or meaningful for you to be in this world (or in this situation)?

- What are your most cherished ideals?

- What are the deepest questions your situation raises for you?

- What were your sources of deep meaning, peace, joy, and strength in time of past trouble that helped you get through and how can they be applied to this situation?

- How can you draw on any of the past or present strengths and resources you identified in order to respond better to this situation (or to achieve your goal)?