
Innovative Service or Proselytizing: Exploring When Services Delivery Becomes a Platform for Unwanted Religious Persuasion

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In this article, the authors explore the question: When does services delivery cross the line and become an opportunity for proselytizing? The authors posit that social workers have a justifiable concern for usurping their professional and privileged roles to influence such an important part of their clients' lives. A case study of one Christian nonprofit agency indicates that social workers need to be cautious as they seek to provide ethical practice in religious settings. The authors conclude by recommending guidelines for social work practice in religious organizations.

KEY WORDS: *ethics; religion; social work practice; spirituality*

Since passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193), including section 104 (also known as Charitable Choice), social work scholars have responded by increasing their attention to spirituality and religion as areas for research that are important for social work practice. As a case in point, in a search of the Social Work Abstracts database before 1996, only 56 articles or books were published that included the terms "spirituality" or "religion" in their titles, keywords, or abstracts. In the past 10 years, however, the number increased nearly 300 percent to 153 publications (<http://web.ebscohost.com/ehost/search?vid=1&hid=120&sid=51b75562-20f4-4bb2-b519-d577f55c20d8%40sessionmgr108>). Despite the increase, the literature is void of articles that specifically investigate when services delivery is consistent with ethical social work practice and when it becomes an opportunity for proselytizing.

This article uses an in-depth case study of a faith-based organization hoping to acquire federal funding to explore the question: When does services delivery cross the line and become an opportunity for proselytizing? For present purposes, *proselytizing* refers to efforts to induce someone to join or convert to a certain religious faith. In the context of social work practice, proselytizing refers to social workers using their professional roles and relationships with clients to create unwanted opportunities for discussion about converting to their religious beliefs. Although the case study is of a Christian nonprofit

agency, the findings warrant caution for social work practice in any religious setting.

LITERATURE REVIEW

There are three main categories of social work literature on spirituality and religion—emergence of spirituality as an important aspect of direct social work practice, role of religious organizations in developing and delivering services, and approaches of social work educators to prepare students. Here we review the first two as the most relevant for the current study.

Emerging Importance of Spirituality in Direct Social Work Practice

Spirituality has emerged from a marginalized subject to a prominent topic for social work practice. Spirituality and religion have a range of meanings in social work literature and are discussed in educational settings in a variety of ways (Bullis, 1996; Canda & Furman, 1999; Ellor, Netting, & Thibault, 1999). For our purposes, we understand religion to be a category for understanding the context of broad and diverse spiritual and sacerdotal practices engaged in by individuals and communities, and the organizations they form for these purposes (for example, congregations, denominations, religiously affiliated organizations). On the basis of the work of Sheridan and Bullis (1991), we define *spirituality* as a person's search for, as well as the expression or experience of, that which is ultimately meaningful.

We primarily discuss spirituality to include religion because so many spiritual practices traditionally developed within the context of a religion; yet because we also recognize that so many contemporary spiritualities are practiced outside the confines of a specific religion, we are attentive to the role of spirituality apart from religion.

A few articles in the 1980s set forth the possibility that social workers should at least recognize and appreciate spirituality as a component of client functioning with certain populations. Social work scholars did not even write the first few articles. Instead, Marty (1980), a professor of religious history, shared his concern that religious influences were becoming less recognizable in social work. Humphrey (1980), a professor of religion, highlighted the importance of religion for people living in Appalachia. He posited that social workers needed to respect how vital religion was to the identity and security of people living in that part of the country. A few years later, the same type of article set forth a similar thesis for social workers working with black families (Devore, 1983). Up to this point, however, client spirituality was not considered a vital component for social work assessment or intervention.

Then a few prominent scholars began drawing attention to spirituality as a dimension of life that all social workers needed to consider. Siporin (1985) suggested that a major discrepancy existed between the spiritual beliefs, practices, and memberships of clients and the neglect of this dimension in social work assessment and intervention. He urged the profession to include spirituality as a major factor of individual, family, and community functioning. A few other social work scholars agreed, adding that spirituality was the missing dimension of practice (Cox, 1985; Joseph, 1988).

Attention then shifted to how social workers could include spirituality in direct practice. Canda (1988) put forth the concept of spiritually sensitive practice that involved moving away from pathology and clinical diagnosis to exploring the meanings of life events for clients. A decade later, in his text with Leola Furman, they described a range of practice techniques that were specifically designed for spiritual growth with clients (Canda & Furman, 1999). Hodge (2005) focused on using spiritual life maps and spiritual ecograms as important components of assessment and intervention. He also advocated for the use of spiritually informed cognitive therapy (Hodge, 2006). Derezotes (2006) described

spiritually oriented practice as “spiritual activism” in which social workers assist clients to understand their interconnection with everything else in the world. Although the specifics of each strategy may differ, scholars agree that spirituality in practice begins with self-awareness of spiritual growth and transcendence (Derezotes, 2006; Hodge, 2005). As Canda (1988) first explained, “social workers should examine their beliefs, motivations, values, and activities and consider the impact of these factors upon the client’s spirituality” (p. 245).

Role of Religious Organizations in Developing and Delivering Services

Along with the emergence of spirituality in practice, social workers have increased their attention to the role of religious organizations as services providers. Religious organizations can encompass a wide range of sizes and organizational structures from small congregations with fewer than 50 people to international organizations with millions of people operating in many different countries (Cnaan, Wineburg, & Boddie, 1999).

Religious organizations have a long history of working with the government to provide social services. Coughlin (1965), in his seminal study, found that governmental resources were contributing to as much as 80 percent of the budgets of religious organizations providing services. He cautioned that some religious organizations were becoming increasingly dependent on public funds. During the 1980s, in the aftermath of the federal cuts for human services and President Reagan’s urging religious organizations to help compensate for cutbacks, Salamon and Teitelbaum (1984) offered another look into the involvement of religious organizations. In brief, in terms of compensating for cutbacks, they asserted that the large amounts of service activities were quite limited. Shortly thereafter, Wineburg and colleagues put forth a number of studies that focused on equipping and incorporating religious organizations to become partners to professional human services (Wineburg, 1994, 1996, 2001; Wineburg, Ahmed, & Sills, 1997; Wineburg & Wineburg, 1986).

More recently, a proliferation of books and articles have examined the role of religious organizations from a number of perspectives, including feminist theology (Tangenberg, 2003, 2005), working with HIV/AIDS (Chambre, 2001), substance abuse (Hodge & Pittman, 2003), the Salvation Army

(Lewis, 2003), and the specific role of congregations (Billingsley, 2001; Cnaan, 2002; Cnaan, Sinha, & McGrew, 2004). Moreover, although a few studies have attempted to identify challenges and effective practices in religious organizations (Rogers, Yancey, & Singletary, 2005; Tabbarah, Nowalk, Raymund, Jewell, & Zimmerman, 2005), none specifically examined when such practices became a method for unwanted proselytizing.

ACTIVE “NEW CLASS” OPPRESSION OR JUSTIFIED CONCERN FOR ETHICAL PRACTICE

In addition to advocating for the importance of spiritual assessment and intervention, Hodge (2002) also sought to explain social work’s “skittishness” with religion, especially Protestant Christianity. He posited that social workers are part of a new class of professionals. As members of this new class, social workers are able to use their licenses and credentials to apply symbols and labels to influence society and push forth a certain ideology—an ideology that promotes relativism, liberalism, and a heterodox of spiritual beliefs. Given this dominant ideology in the profession, specific religious beliefs and practices, often conveyed in organized religious settings, fall outside of the new class paradigm. Taking his explanation a step further, Hodge cautioned that because organized religion and people of faith remain as a last obstacle to advancing the interests of the profession, many social workers may actively oppress religious people who are at odds with the dominant views of the profession. In fact, Hodge (2003) labeled social work’s stance toward religion as *diaphobia*, which he defined “as animus towards a worldview in which a transcendent God rather than humankind serves as the ultimate point of reference” (p. 351).

Although appreciating his laudable efforts to explain and advocate for greater religious inclusion, we respectfully disagree with Hodge’s (2003) explanation. Our disagreement is not, however, with the possible validity of a new class paradigm. We disagree with this paradigm as the key component of the explanation. Instead, we posit that social workers are, first and foremost, justifiably concerned with providing ethical social work practice. In other words, we set forth that social workers are not primarily involved in a complex social agenda with notions of eliminating any influence of religious involvement in social services. Rather, social workers are primarily concerned with fulfilling their ethical responsibilities to clients.

Whereas Hodge isolated section 1.05c of the *Code of Ethics* (NASW, 2000)—which stipulates social workers’ responsibility to obtain education and understand social diversity and oppression with respect to religion as well as race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, and disabilities—as the center of his explanation, we assert that this section, as with any other section, needs to be understood within the context of the entire standard of ethical responsibility to clients. Social workers must be equally, if not more, concerned with their commitment to clients, self-determination, informed consent, competence, and conflicts of interest as they are with cultural competence and social diversity. In the helping relationship, social workers are responsible for applying ethical standards to set and maintain boundaries that are conducive to their clients’ well-being, regardless of their own religious beliefs. Therefore, we assert that social workers remain skittish with religion because of justifiable concerns with usurping their professional and privileged roles to influence such an important part of their clients’ lives.

As faculty at a large Baptist university, the present authors share a fervent commitment to educate students and practitioners to embrace the spiritual dimension of practice and to build partnerships with religious organizations. In fact, ethical integration of Christian faith and social work practice is a primary emphasis both of the curriculum and for faculty research and scholarship. Our experiences in the classroom and many research projects have taught us that ethical integration of faith and practice can be paradoxical. Students and practitioners must learn to appreciate the religious, faith, and spiritual dimensions of clients and client systems, from small groups to large organizations. They must also examine their own religious frameworks and assess how their personal beliefs inform their work as social work professionals. At the same time, students and practitioners are accountable for setting boundaries and maintaining the integrity of professional helping relationships, recognizing the power differentials involved in these relationships, and avoiding intentionally or unintentionally using their professional roles to exploit clients to further their religious interests (NASW, 2000). We posit that recognizing, acknowledging, and studying both sides of this paradox promote the ethical use of spirituality in practice. The current study is intended to contribute to the literature on spirituality and practice

by evaluating a religious organization through this integration paradox.

METHOD

The Program

Crossing the Journey (CTJ) is a stand-alone non-denominational organization that collaborates with congregations to establish spiritual families in a midsize city. The organization began nine years ago when a wealthy owner of a Fortune 500 company decided to retire, sell his company, and use his resources for full-time ministry work. He used his network connections to develop an affluent board that funded the start-up costs and still provides a substantial portion of their funding today. CTJ currently has an annual operating budget of roughly \$219,000 funded by board member contributions, grants from private foundations in the local community, and two annual fundraising campaigns. All of the people who participate in spiritual families are volunteers, and there are no fees for people coming to CTJ for help. The staff consists of the owner, serving as executive director, and two social workers on staff located in the CTJ office. Four other social workers are on staff and located in religious congregations. The six social workers all have their independent clinical licenses. There are approximately 38 spiritual families occurring in 18 different congregations.

The program uses an innovative triangle-of-care model to match clients with a support group of people in a Christian congregation. As the name implies, the model includes three elements—a spiritual family, a neighbor, and a Christian licensed professional (CLP). Spiritual families consist of eight to 12 people who are members of the same congregation who make a commitment to work with potential clients. Neighbors are individuals, couples, or families who go through a screening process and are placed with spiritual families. CTJ prefers the term neighbor rather than client to reinforce the reciprocal nature of the relationships within the spiritual families. As groups meet over time, neighbors are often seen simply as other members of the spiritual family. CLPs are licensed clinical social workers (LCSWs) who identify themselves as Christians.

The intervention process takes approximately a year and a half. Potential neighbors first go through an extensive screening process in which they meet every week with a CLP for two or three months. The screening process assesses the readiness of a

potential neighbor to begin working with a spiritual family. The CLP uses two main criteria to make this assessment. First, the CLP must determine that potential neighbors are at a point where they are ready to make a significant change in how they are living their lives. Evidence of readiness is determined by the use of a risk assessment tool and behavioral actions congruent with such a change. For instance, potential neighbors who are dealing with issues associated with alcohol or drug usage must demonstrate that they are not actively using and are attending recovery meetings.

Second, the CLP must determine that God (as understood in Christianity) is active in potential neighbors' lives—in fact, active in such a way as to lead neighbors to seek assistance with the CTJ. The CLP makes this determination through conversations in which neighbors are able to connect past and present circumstances and events as evidence of God being active in their lives. If both screening criteria are met, the CLP then places neighbors with a spiritual family at a local congregation that will meet once a week (in some cases every other week) for at least one year. During the spiritual family process, the CLP remains involved as a consultant. Specifically, the CLP assists with referrals for services from other agencies, educates spiritual families about group processes, and helps families stay focused on following the “unity exercise.”

The unity exercise is the practice method developed by the CTJ to guide the process of spiritual family meetings. The unity exercise assists spiritual families to arrive at “family unity” before taking any action. Family unity occurs when everyone in the spiritual family, including the neighbor, agrees on a course of action. The unity exercise involves several steps. Meetings begin with a specific prayer designed to invite God to be present and lead the group. With a trust in God and a belief that God will be present and will answer their prayers, the group prays. Next, the group reviews prayer requests from previous meetings to keep track of when and how God is answering their prayers. Then each member presents needs (described by CTJ as life burdens) for “healthy family discussion.” Healthy family discussions involve an honest sharing of thoughts and concerns. The premise is that healthy families do not keep secrets; instead, they provide safe environments in which people can be authentic, express feelings, and know that everyone is supported and not judged.

It is important to note that the spiritual family can discuss and pray about needs for anyone in the group. The only stipulation is that neighbors have an opportunity to present and discuss their issues first. Family discussions end in one of two ways. The discussions can end with spiritual families being in unity on how to proceed. In this instance, the spiritual family meetings end with a closing prayer as they prepare to carry out the solution. The belief is that the group can take confidence from knowing that if everyone is in agreement, the group can feel assured that God is leading them to a certain course of action.

The discussion also can end in disagreement. When spiritual families disagree, no action is taken. Rather, they continue to pray for God's guidance and unity. The belief is that disagreement is a good thing as long as all spiritual family members are searching for God's position. When there are prolonged disagreements, CLPs often facilitate discussion that helps spiritual families identify the root issues that neighbors need to address and remind them to put aside personal agendas and focus more on being attuned to what God wants for them so they can arrive at family unity before taking any action.

Data Collection and Analysis

Because of the university's Baptist affiliation, we are frequently involved in evaluation research with religious organizations. Similar to other religious organizations, the executive director of CTJ contracted with us to conduct a formative evaluation and collect initial summative data to document how the program was implemented, assess initial outcome measures, and provide recommendations for improvement. The evaluation consisted of a review and analysis of written materials, an initial pretest and posttest analyses of scores from the risk assessment surveys, and a series of focus group interviews with spiritual family members, neighbors, and key informants (that is, CTJ staff, members of the board of directors, and CLPs).

Over the course of the evaluation, we were torn by two conflicting observations. On the one hand, CTJ appeared to be an innovative method that, at least initially, seemed to yield promising results. In addition to the benefits for the neighbor, we were encouraged by apparent changes of attitudes of spiritual family members (often white middle- and upper-middle-class people) toward issues of social

and economic justice. On the other hand, we were confronted by a nagging concern about social workers carrying out their roles as CLPs. As an LCSW, the first author was especially concerned by whether practicing in the roles required of a CLP was ethical for someone with a state-sanctioned clinical license or credential. The present article reports findings from an analysis of three focus group interviews (one each with key informants, spiritual family members, and neighbors). In the analysis we explore our concerns.

To ensure trustworthiness in the findings, we spent over 150 hours analyzing the data in a three-stage process. First, we analyzed the focus group transcripts on our own, looking for data that specifically addressed the question: From the perspective of an LCSW, what aspects of the triangle-of-care model create concerns that social workers may be crossing the line and engaging in unwanted religious persuasion? Next, we reviewed each others' analyses and then reanalyzed the transcripts on our own. In stage three, we met for an all-day retreat and slowly went through each transcript, comparing our final analyses. If discrepancies existed, we discussed the differences in our analyses and came to a consensus on the main themes.

FINDINGS

We discovered three primary aspects of the model that warranted concern for unethical social work practice—the screening process, the initial spiritual family meetings after the screening process, and working with people who do not identify themselves as Christians.

Screening Process

There were formal and informal levels of the screening process for us to consider in our analysis. The formal screening procedures were explicit and upfront. Social workers used formal written and verbal communication to provide information about the CTJ program to allow potential neighbors to make informed decisions. In fact, the length of the screening process (two to three months) and the information provided were intended to screen people away from the program.

Potential neighbors were given a manual that described the triangle-of-care model. The manual described how spiritual families were formed, the year and a half commitment, and the unity exercise. Furthermore, social workers candidly explained to

potential neighbors that CTJ was not a program designed to provide direct and short-term assistance; instead, it was for people interested in core life changes from a decidedly Christian perspective. If potential neighbors were looking for money for a hotel room for the weekend or financial assistance to pay for a utility bill, they quickly learned that CTJ was not for them. As a key informant explained, "I think that what we are finding is that a lot of people come to us to take care of a short-term problem, and when they hear this story, they turn around and leave."

Social workers were also upfront about the religious nature of the program. They even specifically referred to God in the screening process. When describing the screening criteria, one key informant stated:

We've always said that we are looking for three things: Is God active in this person's life? Is the person embracing it? This is very much about the supernatural; it is very much about believing that God is real, that God answers prayer. And it needs to be on the table for prospective neighbors. And the third point: Is this neighbor ready to change and be healed?

Despite efforts to be as up front as possible, the screening process seemed to evoke unintentional pressure, convincing potential neighbors that they needed to frame their responses in a way that would ensure them entry into the program. Two converging factors appeared to create this unintentional pressure. First, a clear power differential existed between potential neighbors and social workers. No matter how explicit social workers were about the screening process, neighbors knew they were in a vulnerable position. They needed services and they knew social workers determined if and when they would gain access to a spiritual family. Second, neighbors did not have a clear understanding of what it meant for social workers to see God active in their lives. The two factors created a situation in which neighbors had to find ways to convince social workers that they were good candidates for this program when access was tied to their ambiguous understanding of what it meant for God to be active in their lives.

When we asked neighbors if they knew what was meant by God being active in their lives, they unanimously answered "no." Neighbors were also

unanimous in sharing how desperate they were and how their desperation led them to talk about God with the social workers. As one neighbor stated, "I frankly felt so much at my rock bottom that for a little while I just kind of went along with it." Another neighbor stated:

I was willing to say or do anything to change my life and that included talking with the social worker or anybody else at CTJ. I want whatever it is that these happy people have, and I'll say anything to get in there.

Though not knowing anything about Christianity or church, another neighbor described how she framed her responses to fit with the social worker's questions to assess whether God was active in her life:

I'll have to admit that I didn't understand what they meant by God sightings. I didn't grow up attending church. It was all rather foreign to me. For quite a while, when [the social worker] would use that expression, I kind of mentally substituted in my mind "coincidence" and I just thought it was a different title that he preferred to use.

Initial Spiritual Family Meetings

There was also disagreement about the procedures for the spiritual family meetings. Responses from two of the focus groups (key informants and spiritual family members) suggested that the unity exercise was adhered to at every meeting. That is, the only time neighbors or other spiritual family members took action was when the entire family was in unity.

Neighbors shared a different perspective about the initial meetings. Whereas the key informants and spiritual family members reported following the unity exercise for every meeting, neighbors described feeling as if they had to go along with the unanimous decisions of the other group members at the beginning. Describing her first few meetings, one neighbor said, "Mine was hell. I'm 44 years old and they're trying to tell me what I need to do and what I have to do." Moreover, spiritual family members used the unity exercise to require neighbors to attend church. If members decided that church was part of the solution, neighbors had to attend. One neighbor said,

I was required to belong to a church. I'd miss a Sunday and then it would get easier to miss the next Sunday and then before you know it I hadn't been to church in three weeks. I'd been to my spiritual family meetings but not to church and then they'd say, you know, you haven't been to church in three weeks, what's up? You need to be going. Why weren't you in church?

Eventually, however, neighbors experienced unity with the rest of the spiritual family. At the time of the focus group interviews, all of the neighbors indicated that they now look back on the initial meetings more positively. Looking back, one neighbor said, "I see now they held me accountable for everything I did, every goal I set." In fact, many of them described feeling as equals in the spiritual families. As one neighbor stated, "Most everybody has shared as much as I have, I mean it's been a pretty even deal. It's almost like you're not the neighbor."

Working with Non-Christian People

We also were concerned by responses from key informants and spiritual family members about working with people who did not identify themselves as Christians. Some key informants indicated that potential neighbors with different religious beliefs would not be treated differently from anyone else. "We will let them know how CTJ happens. We are decidedly Christian. We believe in our core values, and our organizing principles are all around the Christian worldview, but we will not put anything on them," said one key informant. A majority of key informants, however, shared a different view. As one key informant shared, "My experience is that without Christ active in their lives and their knowing it, I don't have anything in common with them." Another added, "If someone is decidedly against the Christian perspective or doesn't want anything to do with Christianity, that would make it very difficult for us to go anywhere with them." Still another key informant simply stated, "I think if they are not believers, it wouldn't work for me."

If a social worker were to refer a neighbor with different beliefs to a spiritual family, the spiritual family members we interviewed were clear about what would likely happen. The response of one spiritual family member was typical of the rest of the group, "I would shift into an evangelistic mode and that would be one of my first goals." Another spiritual family member added, "A person who is

totally unsaved who is seeking God, I would see that as a great opportunity." To be clear, the great opportunity described is for discipleship about developing a relationship with Jesus Christ. Moreover, the Christian emphasis is seen as such a central component of the CTJ program that if neighbors do not have a belief in Jesus Christ as the Messiah, the program cannot move forward. As one spiritual family member explained, "If you take Christ out, you've got therapy."

DISCUSSION

We recognize the limitations inherent in a case study of one religiously affiliated organization. Without a larger sample of organizations from different faith groups, we can say little about the roles of social workers in religious organizations beyond CTJ. The current study may also not be indicative of other religious organizations in which social workers practice. That said, the nature of studying the effect of religion or spirituality in social work practice is difficult to do with conventional research methods. Methods that normally enhance the generalization of findings (use of quantitative analysis, experimental designs, random assignment, and control groups) will not capture the personal interactions between practitioners and clients necessary to understand social work practice in religious settings. As we discovered in our analysis, reviewing written materials and analyzing pre- and postsurveys may not yield valid findings when assessing the parameters of ethical integration of social work practice in religious settings. In-depth interviews, participant observations, and other methods of natural inquiry are likely to be the most effective methods for replicating our study with other religious organizations. Nevertheless, we discuss the current findings with caution.

In the case of social workers practicing with CTJ, it appears that neighbors experienced unintentional pressure to talk about religion. Although the social workers were as explicit and up front as possible in an effort to ensure informed consent, the neighbors we interviewed were in such desperation for services that it did not matter. This finding is consistent with Fleet's (2000) position that, no matter how careful social workers are in negotiating the parameters of the helping relationship, the context of desperation and unequal power calls into question the degree of consent that is possible. If clients are in such a desperate position that they equate being selected for services as a part of their sustenance (that is, equal

to clothing, food, shelter) just to survive, whatever formal means are used to explain the nature of religious organization may not prevent unwanted religious discussions with social workers in a position to offer access to services.

The findings also confirm Cnaan and Boddie's (2002) call for more research to carefully follow the implementation process of social work practice with religious organizations. Religion and spirituality are important aspects of clients' lives. Moreover, religious organizations are an important part of the overall landscape of social services and enhance the well-being of communities, families, and individuals.

The appropriate roles for social workers, however, remain unclear. To what extent can social workers, sanctioned to practice by public licensure boards, practice within the ethical bounds of their licenses in religious or spiritual settings? The current findings indicate the possibility that there are areas of practice that can cross the line (intentionally or unintentionally) into proselytizing that need further study. Further study may look at a range of examples of ethical integration of faith and practice; it may go beyond this category of religious organizations to ethical practice in other settings—for-profit settings and health care settings that require insurance, for example. Consequently, the findings provide initial support for our claim that social work's skittishness with religion may have more to do with a justified concern about providing ethical practice and less to do with Hodge's (2002) claim that a complex social agenda exists in social work to eliminate any influence of religious involvement in social services.

RECOMMENDED GUIDELINES FOR PRACTICE IN RELIGIOUS ORGANIZATIONS

This study confirms the need for future research that examines various roles that social workers may occupy as they partner or practice with religious organizations. As the literature develops, we can develop more specific guidelines to help social workers distinguish between ethical and effective practices and ones that may be suspect. On the basis of our experiences with these issues in our teaching and research, we offer the same guidelines we shared with CTJ for ethical social work practice in religious organizations:

- Clarify roles up front—At the outset of a professional relationship with religious organizations, social workers need to negotiate

exactly what they are doing. Social workers need to make sure that colleagues are aware that self-determination, competence, and avoidance of dual relationships are important to providing ethical social work practice.

- Avoid opportunities for unethical practice—As we discovered in the current study, having explicit materials and being forthright with potential clients about the context and nature of services in a religious organization may not prevent opportunities for unethical practice. We suggest that social workers avoid putting themselves in positions in which clients may overtly or covertly feel pressure to discuss religious beliefs. For instance, social workers should refrain from dual relationships in which they conduct assessments and also make judgments about admission to religiously affiliated services. Instead, social workers can provide comprehensive assessment information and let others make the judgments about admission. Even for social workers who also have degrees in religion or theology, we recommend avoiding practice situations in which they are tempted to wear both hats at the same time.
- Acknowledge the potential for unethical practice—Social workers practicing with religious organizations need to openly acknowledge the potential for unethical practice. Creating a milieu that cultivates open dialogue about the inherent difficulties of practicing with religious organizations will keep the issue at the forefront instead of minimizing the possibilities.
- Create a mechanism for ongoing confidential review with clients—Part of acknowledging the potential for unethical practice is to get ongoing feedback from clients about their experiences working with social workers at religious organizations.

CONCLUSION

Social work should further embrace the role of spirituality in clients' lives. The profession should also further appreciate the efforts of religious organizations to address social problems and provide services. At the same time, social work should proceed cautiously to outline the parameters of ethical social work practice in religious organizations. The current findings support a cautious approach that calls for more research to define the specific

factors involved in implementing social work in religious settings. Social workers who are committed to ethically expanding the role of religion and practice must make sure they maintain the integrity of professional helping relationships, recognize the power differentials involved in these relationships, and avoid intentionally or unintentionally using their professional roles to exploit clients to further their religious interests. **SW**

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