

Study: Why social workers aren't discussing religion and spirituality with clients

July 9 2015



Holly Oxhandler, Ph.D., is assistant professor in Baylor University's Diana R. Garland School of Social Work. Credit: Courtesy Photo

Don't expect your social worker to ask you about your religious beliefs.

New research by a Baylor University professor shows that licensed clinical social workers (LCSWs), who account for the largest number of clinically trained helping professionals, believe that discussions about their clients' religion and [spirituality](#) can often lead to improved health and mental health, but practitioners are not integrating these conversations into their counseling sessions.

"It's that big elephant in the room," said Holly Oxhandler, Ph.D., assistant professor in Baylor's Diana R. Garland School of Social Work. "If we ignore it, we're ignoring a huge component of their lives that may be tied to the clinical issue."

Oxhandler worked with a team of researchers from the University of Houston. They surveyed 442 LCSWs across the United States for the study - "[The Integration of Clients' Religion and Spirituality in Social Work Practice](#)" - which is published in the latest edition of the journal *Social Work*.

The survey revealed that the vast majority of LCSWs, with more than 80 percent responding favorably on most of the survey items, have positive attitudes regarding the integration of their clients' religion and spirituality into their discussions; are confident in their abilities to assess and discuss their clients' beliefs; and find it feasible to do so. But they're not doing it.

"I'm still boggled by the fact that they are so disconnected between their views and their behaviors," Oxhandler said. "The fact that they're so confident in their abilities to do this - and they have such [positive attitudes](#) about it, and they don't see many barriers - yet they're not integrating it into practice."

Oxhandler offered a few possibilities for the disconnect, based on the survey, her research and her experience:

1. Both the practitioner and the client are willing to talk about religion and spirituality, but neither addresses it.

"Clients want to talk about it, but feel it's taboo, so they wait on the practitioner to bring it up. Practitioners are willing to talk about it if the client brings it up," she said.

2. Social work students are not being trained adequately in the integration of religion and spirituality.

Oxhandler explained that from the 1920s to the 1970s, there was a push for what's called the "medical model" of practice, which she said had no mention of religion or spirituality because there was no research to support the discussion about clients' faith and practice during that time.

"It wasn't until the 1980s when some researchers were saying, 'Well, it's kind of an important area of their clients' culture that we need to be considering in [clinical practice](#),'" Oxhandler said.

Oxhandler said there also is some documentation of negativity around religion and spirituality in the classroom.

"Social work educators who maybe weren't trained in how to talk about clients' religion and spirituality, or have strong feelings against religion

and spirituality, may come into the classroom, and if a student brings it up, they will shoot it down very fast and say, 'No, we don't talk about that in here,'" Oxhandler said. "They're sending very strong messages to the students. Then the students go off into clinical practice, and if clients bring it up, many times the students don't know what to say and reply, 'We don't talk about that in here.'"

3. LCSWs fear that they might be seen as proselytizing, or don't know how to talk about their clients' beliefs.

"We always have to be mindful and aware of what our beliefs are, but we need to bracket them and focus on where the client is and what their beliefs are," Oxhandler said. "This isn't about me. This isn't about my beliefs. This isn't about my religion. This is about the client and where they're coming from, their journey and how I can best identify areas of strength they can tap into and help them cope with the presenting issue, or areas of struggle that are tied to their belief system."

Oxhandler said the survey showed that those practitioners who were most willing to assess for and engage in the discussion of religion and spirituality were those who showed higher levels of intrinsic religiosity - the degree to which their religious or spiritual beliefs carry into all dealings of their lives.

It's important for social workers to be trained to learn about religions other than their own, she said.

"If you're a Christian social worker working in a medical setting and you have a Muslim client who's in the hospital, how do you know that she needs to be positioned a certain way within her room when she prays five times a day?" Oxhandler said. "If the patient is Jehovah's Witness, what is his medical treatment going to look like, compared to someone who doesn't have that belief system? Similarly, in a mental health

setting, how can we tailor therapy to acknowledge the role, either positive or negative, that clients' religious or spiritual [beliefs](#) have in the presenting issue or life circumstance?"

Oxhandler said educators need to do a better job of training future [social workers](#) to engage in these conversations, ethically and effectively.

"It's important that we teach students how to do this from an evidence-based practice perspective, a perspective that really looks at what the research is saying about clients' [religion](#) and spirituality and what the research says about health and [mental health](#) outcomes," she said.

Provided by Baylor University

Citation: Study: Why social workers aren't discussing religion and spirituality with clients (2015, July 9) retrieved 6 May 2024 from <https://phys.org/news/2015-07-social-workers-discussing-religion-spirituality.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.