

Why Should We Pay Attention to Religion and Belief: The Evidence Base

Recent research in health and social care reveals that professionals and their settings are required by law and/or professional code to give attention to religion, belief and spirituality across health and social care, but that these terms are largely undefined or operationalised. As a result, they tend to 'stay on the page' and rarely translate in to practice, despite good intentions. Key recent work leading to the current work with policy makers includes:

Crisp B and Dinham A (2019) Are the Profession's Education Standards Promoting the Religious Literacy Required for Twenty-First Century Social Work Practice? British Journal of Social Work: OUP vol 49 Issue 6 pp1544-1562

ABSTRACT: This article analyses regulations and standards which frame social work and social care education and practice across a set of English-speaking countries including the United Kingdom, Australia, Canada, Hong Kong, India, Ireland, New Zealand, South Africa and the United States, as well as the *Global Standards for the Education and Training of the Social Work Profession*. All documents were keyword searched and also read in their entirety. Religion and belief appear briefly and incoherently and are often deprioritised, unless particularly problematic. There is a common elision of religion, belief and spirituality, often expressed in the designation 'religion/spirituality'. References to religion and belief, and their inclusion and removal, are recognisably subject to debates between policy-makers who frame the guidelines. This makes them issues of agency which might themselves benefit from analysis. Religion and belief may frequently be addressed by the use of overarching frameworks such as 'anti-oppressive' or 'anti-discriminatory' practice. Yet such proxies may prove merely apologetic and result in standards which aim only to establish what is the minimum required. It is hard to argue that religious literacy has been a priority in the English-speaking social work countries, though new law and emerging best practice may make it so.

Crisp B and Dinham A (2019b) Do the Regulatory Standards Require Religious Literacy of Health and Social Care Professionals? Social Policy and Administration Wiley Blackwell vol 53 Issue 7 pp1081-1094

ABSTRACT: Health and social care professionals need sufficient religious literacy in order to handle the complexities of religious beliefs and practices, including the growing numbers who identify with other belief systems and those who claim to identify with no religion. The extent to which the need for religious literacy has been formalised was examined in an analysis of regulatory frameworks for health and social care professionals in the UK. Although all but one of the regulators make some

reference to religion and beliefs, they are silent on the question as to what is meant by religion and beliefs. Some standards include a requirement not to impose one's own beliefs on others, but there is very little requirement to develop a reflective, self-critical awareness of one's own stance. Likewise, some standards refer to knowledge and skills required but greater specificity is required for these to be meaningful.

Crisp B and Dinham A (2019c) The Role of Occupational Standards in Workplace Religious Literacy Journal of Beliefs and Values DOI: 10.1080/13617672.2019.1672437

ABSTRACT: This paper explores the UK National Occupational Standards to identify the breadth of health and social care occupations for which it has been determined that workers need some degree of religious literacy. A total of 465 standards documents which mention religion and beliefs relating to a diverse range of occupations were retrieved, of which 13 had a primary focus on religion and beliefs. Approximately 60 percent of these standards noted the need for knowledge about religion and beliefs, though only a quarter of these specified actual performance criteria. With some exceptions, most of the standards were vague as to what is meant by religion and its proxies, with very few attempts to define their terms. A lack of specificity renders the inclusion of references to religion largely tokenistic rather than reflecting a measure of religious literacy which could be practically operationalised.

Crisp B and Dinham A (2019d) Are Codes of Ethics Promoting Religious Literacy for Social Work Practice? Australian Social Work Melbourne: Taylor Francis doi.org/10.1080/0312407X.2019.1698628

ABSTRACT: As codes of ethics play at least a symbolic, if not educational, role in highlighting and informing professional priorities, 16 codes of ethics for social work and social care practice were examined for references to religion and belief and analysed against the four domains of Dinham's religious literacy framework. Although religion and belief are mentioned in all but two of the documents, approximately half the surveyed codes only mention religion and belief in respect of either knowledge or skills. Some recognise the need for social workers to be aware of their own biases, but very few recognise the need to explain what is meant by religion and belief, despite these terms being in flux. While codes of ethics can contribute to the development of religious literacy among social workers, this requires social workers who already have some religious literacy to actively participate when codes of ethics are being revised.

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Dinham A (2018) Religion and Belief in Health and Social Care: the case for Religious Literacy International Journal of Human Rights in Healthcare vol 11 no 1, Emerald Insight

Drawing on original research and analysis in UK higher education settings, the article shows why health and social care educators, policy makers and practitioners need to develop their religious literacy in order to engage fully and competently with the religion and belief identities of their service users in a religiously diverse and complex world. The relationship between religion and belief on the one hand and health and social care practice has been scarcely addressed, despite the important work of Furness and Gilligan in the UK and Canada in the USA. Their work appears as exceptional within a wider context of professions which have been forged in a predominantly secular milieu, despite having their roots in Christian social services in the USA, Canada and the UK. New research in the sociology of religion shows that religion and belief themselves vary in form, number and mix around the world, and that the religious landscape itself has changed enormously in the period during which secular social work has been changing significantly in recent

years. It has been observed that in the UK secular assumptions reached a peak of confidence in the 1960s, when health and social care were most rapidly consolidating as a public profession (Dinham 2015). The inheritance has been generations of health and social care practitioners and educators who are ill-equipped to address the religion and belief identities which they encounter. In recent years this has become a pressing issue as societies across the West come to terms with the persistent – and in some ways growing – presence of religion or belief, against the expectations of secularism. In total, 84 per cent of the global population declares a religious affiliation (Pew, 2012); globalisation and migration put us all in to daily encounter with religious plurality as citizens, neighbours, service users and professionals; and internationally, mixed economies of welfare increasingly involve faith groups in service provision, including in social work and welfare settings across Europe and North America. Yet the twentieth century – the secular century – leaves behind a lamentable quality of conversation about religion and belief. Public professionals find themselves precarious on the subject, and largely unable to engage systematically and informedly with religion and belief as they encounter them.