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In a Changing Ireland has Social Care Practice left Religious and Spiritual Values behind

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Proceedings of Seminar held in the
Dublin Institute of Technology, on 3rd April 2006

Edited by Judy Doyle and Carmel Gallagher
School of Social Sciences and Legal Studies,
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40-45 Mountjoy Square,
Dublin 1

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In a Changing Ireland has Social Care Practice left Religious and Spiritual Values behind?

Seminar Proceedings 3rd April 2006

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Ms. Michele Clarke, Chief Inspector, Social Services Inspectorate …. Chairperson.

Mr. Gerry Burke, Age Concern, England.

Dr. Carmel Gallagher, Dublin Institute of Technology.

Mr. Noel Howard, Deputy Manager, St. Joseph’s Special School, Ferryhouse.

Ms. Lorna Wogan, Inspector and Monitoring Officer, Registration and Inspection Service.

Dr. Ellen Hazelkorn, Director of Faculty of Applied Arts, Dublin Institute of Technology.

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The Editors

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**Carmel Gallagher** is a Sociology lecturer on social care professional training courses in the Dublin Institute of Technology. She has recently completed a PhD which examined the social and community participation of older people in an urban and a rural location in Ireland. She was awarded a Government of Ireland Senior Research Scholarship for this work in 2002. Her research interests are in ageing, community and understandings of what is a good life. She has presented papers at conferences both in Ireland and abroad and has a number of publications. Along with colleagues she has developed training for staff providing ‘Activities Programmes’ in day and residential settings for older people.
Contributors

**Michele Clarke** is Chief Inspector of the Social Service Inspectorate (SSI), an organisation established in 1999 by the Department of Health and Children to inspect social services. Prior to working with the SSI, she worked independently, undertaking service evaluations, reviews, training, consultation and research, in the area of child welfare and protection, and alternative care services. She was a part-time member of the Department of Social Studies in Trinity College Dublin for ten years, and also worked as a social worker in the community and in child psychiatric settings. She has undertaken studies in Family therapy and was a registered member of the Irish Association of Psychotherapists.

**Most Rev. Dr. Diarmuid Martin** is Catholic Archbishop of Dublin and Primate of Ireland. He studied Philosophy and Theology in Dublin and Rome and was ordained in 1969. He spent many years in Rome and served at the Pontifical Council for Justice and Peace, where he represented the Holy See at the major United Nations International Conferences on social questions held in the 1990’s. He also took part in activities of the World Bank and the International Monetary Fund, especially on the theme of international debt and poverty reduction. In March 2001 he was elevated to the rank of Archbishop and undertook responsibilities as Permanent Observer of the Holy See in Geneva, at the United Nations Office and Specialised Agencies and at the World Trade Organisation. He was appointed Coadjutor Archbishop of Dublin in 2003.

**Lorna Wogan** graduated from the Dublin Institute of Technology in 1985 and completed a post graduate course in Child Protection and Welfare in Trinity College in 1992. She has worked for over eighteen years as a social care practitioner, manager and director in residential child care in the former Mid- Western Health Board. She is currently working within the HSE West Registration/Inspection & Monitoring Services.

**Gerry Burke** has been working for Age Concern in England since 1979. He has considerable experience in issues of governance and management, equalities and diversity, and standards and their implementation in this major voluntary organisation. He was firstly involved in developing and supporting new Age Concern organisations across the North of England and from the 1990s helped to create a federation for the 400 charities now using the name at local, county and national levels throughout the country. The federation was formally established in June 2000 and he was Head of Secretariat until 2003. Since 2003 he has been involved in developing Age Concern’s approach to spirituality and ageing, a completely new area for a secular body.
Noel Howard has nearly forty years of experience working with children. In 1973, moving from a teaching career, he began as a residential care worker in the Irish juvenile justice system at what is now Finglas Child & Adolescent Centre. Since 1999 he has been Deputy Director at St. Joseph's Children Detention School, Clonmel. St. Joseph's caters for up to 40 children referred by the Courts or the HSE. He has been an active member of the Irish Association of Social Care Workers.

Rev. Dr. John Stephens is originally from Belfast. Following graduation from the New University of Ulster, he worked as a statistician with the Central Statistics Office in Dublin and with the Medical Research Council (UK) in The Gambia. After training to become a Methodist minister, he worked on the Portlaoise Circuit, and in university chaplaincy in the city of Dublin. For the last 5 years he has been serving as Superintendent Minister of Dublin Central Mission.
Religious and Spiritual Values in Social Care: Foreword
Judy Doyle and Carmel Gallagher

The rationale for this seminar topic *In a Changing Ireland has Social Care Practice left Religious and Spiritual Values behind?* arose from discussions with social care practitioners, undergraduate students in social care and colleagues in the School of Social Sciences and Legal Studies in the Dublin Institute of Technology. Varying degrees of interest in the subject and numerous interpretations of the importance of instilling religious and spiritual values in children who are in care have been expressed. Views ranged from expressions of hostility to the very idea of enforcing any religious norms to concern not to be seen to be imposing one’s own values and beliefs. However, many reactions involved expressions of ambivalence about their own beliefs and therefore a reluctance to begin to engage with the religious or spiritual formation of children in care. Indeed some suggested that because there was so much uncertainty among practitioners themselves about their own belief system the whole issue of religion and spirituality tended to be ignored altogether. It appeared, therefore, that any sense of best practice in relation to valuing the individual religious and spiritual needs of children in care appeared somewhat blurred, elusive and even at times contradictory.

Social care students and practitioners cited religious beliefs and practices as ethical dilemmas that are posing very real issues for them in their day-to-day contact with children. They expressed their difficulty encouraging values, beliefs and practices in children’s lives that they personally did not agree with, or believe in. Consequently, they felt hypocritical and deceiving in their remit as professional practitioners. Reasons cited for these difficulties are deep rooted both historically and in our most recent past in the history of social care in Ireland. Child abuse investigations, particularly the investigations that involved the Catholic Church in Ireland, were cited as being instrumental in influencing social care practitioners in their decisions as to whether of not to encourage religious practices and beliefs in children in state care. These feelings are also reflected in Ireland at a societal level as while traditionally the Irish population has predominantly been monocultural, white and Roman Catholic, there has been a significant decline in the numbers of Irish Catholics attending
religious ceremonies and practising religion on a regular basis. Therefore, as Irish society becomes more diverse and inclusive of many different cultures and religions, the remit of social care practitioners to care and of educators to teach must reflect changing norms and values. Hence, the question: *In a Changing Ireland has Social Care Practice left Religious and Spiritual Values behind?* must be open to discussion, and we must challenge ourselves to address the full meaning of *holistic care* for children living in state care.

The aim of the seminar was to generate discussion and encourage reflection on the issue of the place of spiritual and religious values in social care across the life span. There are very different approaches and views in relation to meeting spiritual/religious needs in care settings. For example, it is generally accepted that in Ireland religion and spirituality are very meaningful in the lives of older adults and religious needs are catered for to some extent in day and long-stay care settings. However, it is far less clear what role religious practice and spiritual values have in care settings for children and young people. The fact that there has been little debate among social care practitioners or educators about this topic should not, however, be taken as indicative of lack of interest. Given the rapid changes in Irish society that we already referred to, the loss of moral authority by the Catholic church and the reduced adherence to institutional religious practice among both the Catholic and Protestant communities, there may not be the same public language available to discuss religion and spirituality in a changing Ireland. However, our ambivalence about, hostility to, or reluctance to address questions related to the religious or spiritual needs of young people in care may be a blind spot in our approach to the developmental needs of the young person.

Traditionally, residential care for children was provided by religious orders. In a society where the moral authority of church leaders and religious personnel was often unquestioned and sometimes abused, and where the state took a subsidiary role in the welfare of children, religious personnel were entrusted with the management of care institutions. Religious training and religious practice were embedded in everyday routines. Today the majority of residential centres are run by statutory authorities and are increasingly regulated to ensure the safety and welfare of children. In this new era of child protection the place of traditional Christian values that shaped our child care
services is very unclear. New policy and practice guidelines require that practitioners take a holistic view of a child’s developmental needs. For example the National Standards for Children’s Residential Centres (2001: 21) states that care practices should take account of ‘young people’s individual needs and respect their social, cultural, religious and ethnic identity’. In addition young people should also have ‘similar opportunities and leisure experiences to their peers and have opportunities to develop talents and pursue interests.’

But exactly how are religious and spiritual needs understood and articulated in respect of young people in state care? How do the religious beliefs and values of practitioners influence their approach and the models of care provided? Are religious and spiritual needs addressed in care plans? Taking a longitudinal view, what will care recipients say about the care they received and the opportunities they got to develop their human capacities in all dimensions including the religious and spiritual dimension? These are important questions that should challenge practitioners and educators alike as Ireland continues to change and to become more multicultural.

It is increasingly recognised by psychologists within the health context that spirituality is central to quality of life. Religious and spiritual beliefs have been found to be connected to wellbeing and adjustment in later life (Coleman et al., 2002). For example, belonging to a religious community provides social support in times of difficulty and limits the effects of stress. Religion may also be health-promoting in providing a sense of coherence and meaning which give adherents a sense of purpose of life and helps them to develop the courage to endure suffering. In terms of the impact on society, churches have been seen as strong repositories of positive communal values. Using British social attitude surveys Gill found a statistically significant correlation between participation in voluntary service groups and church going (Gill, 1999: 107-8). Paradoxically, these benefits of religion are being highlighted at a time when institutional and traditional religious practice appears to be increasingly marginalised in Western societies. There is considerable agreement among sociologists and historians that major religious traditions, especially in many of the advanced industrial societies of the West, continue patterns of decline which can be traced back to the nineteenth century as measured by indicators such as attendance at worship and religious belief (Bruce, 1996). This is widely seen as part of ‘secularization’, understood as processes by which religious institutions and
practices lose their social significance (Wilson, 1982: 49). However, questions about the social significance of religion and the role of religion in civil society are complex and should not be oversimplified (for further discussion see Herbert, 2003 and Davie, 2000).

For centuries religious beliefs and religious practices have been expressed through the Christian churches in Ireland. There has been a strong adherence to institutional Catholicism as the majority religion in Ireland and the Protestant minority community have also had high levels of church participation through the Church of Ireland, Presbyterian and Methodist churches. While religious practice remains strong and significant for many people, Irish society has not been immune from the broader trends away from institutional religion. There has been a decline in religious practice such as Mass attendance. For example there has been a decline from 87 per cent of Catholics to around 65 per cent of Catholics who attend weekly Mass from 1981 to 1998 (Fahey, 2002). In terms of variation by age and geographical location Mass attendance varied from 94 per cent of older people in one Diocese outside the Capital to 50 per cent of all Dubliners to 41 per cent among all 18-24 year olds in the country. Religious practice is still strong in comparison with Britain, for example, where it is estimated that less than 10 per cent of the population are involved in religious practice on a regular basis (Davie, 2000). In addition to a broad decline in religious practice and a more pluralistic approach to the provision of welfare and education services, Ireland has experienced a major cultural upheaval in the rapidly growing numbers of immigrants, representing both Christian and non-Christian faiths. Thus, added to the secularisation trends, which are themselves complex, will be the influence of other non-Christian faith groups as they integrate into Irish society.

The term spirituality is difficult to define and its relationship with religion is complex. Being religious involves accepting established religious institutions and relating to the sacred through prayer and communal worship, while being spiritual involves creating one’s own autonomous space by borrowing elements from various religions and mythical traditions. Coleman suggests that spirituality refers to ‘a sense of being, a sense of becoming, relating to others, a sense of meaning, a sense of belonging and wholeness and of reaching out to what is beyond, the holy that which underlies all’ (Coleman, 2006). Questions of ultimate meaning have been explored by the great
philosophers and thinkers, and through the great world religions. Coleman argues that while the spiritual and the religious were closely connected in the lives of past generations, the term spirituality appears to have now broken free from religion. According to longitudinal research by Wink and Dillon in California, the consequences of being ‘religious’ or ‘spiritual’ were beneficial for people but in different ways. Religion (defined by belief in God, prayer, attendance at communal worship) related to positive relations with others, involvement in social and community life tasks and ratings of generativity. Spirituality (defined by non-tradition-centred beliefs, sense of connectedness with sacred others, involvement in practices such as meditation) related to ratings of personal growth, involvement in knowledge building life tasks, and wisdom (Wink and Dillon forthcoming, 2007). However, many commentators including Coleman himself remain sceptical about claims in the literature that religion and spirituality represent two different dimensions of human experience (Coleman, 2006).

We cannot in this publication deal with the complexities of the debate on the place of religion and spirituality in contemporary Irish society but this short account draws attention to what aspects of wellbeing and human capacity we are addressing when we speak of ‘religious and spiritual’ needs. It also sets out the cultural context within which we can understand the changing significance of religion. We believe that this topic is centrally important to social care practice and it is our hope that this seminar and publication will encourage policy makers and practitioners to look anew at how this aspect of human development is catered for within care institutions.

Michele Clarke, Chief Inspector, Social Services Inspectorate, addresses the possibility that in the state regulated and professional social care sector that has replaced privately run religious child care facilities, the spiritual and religious wellbeing of children in care may not be addressed. She sets out the challenge for staff and policy makers to work out strategies to help children and young people in care to develop their spirituality while respecting their autonomy.

Archbishop Diarmuid Martin’s theme is that of Christian love or charity, which he sees as involving the fundamental dimension of gratuity in our relations with others. He refers to the unique anthropological vision of the human person that springs from
the gospel and argues that ‘the fundamental principle of social policy should therefore be to enhance human capacity’. In relation to social services he criticises both the ‘assistential’ models of the past and modern business models. He reflects on the difference between pluralist and secular values and between religion and spirituality and he welcomes the debate on examining the role of religion in social policy.

Lorna Wogan, Monitor in the Social Services Inspectorate, argues that children in care need ‘scaffolding’ and ‘anchorage’ in the form of religious instruction and opportunities for spiritual development. She expresses the view that care staff do not in a conscious, planned and proactive way attend to the spiritual needs of children in care. She makes suggestions as to how staff could do this: discussion with parents, teaching children what is means to be a member of whatever religious denomination they belong to, creating opportunities for quietness and reflection and appreciation of nature, imparting Christian values by word and example, helping them prepare for liturgy and for events such as First Communion and Confirmation.

Noel Howard, Deputy Manager of Ferrybank Children’s Residential School, reflects on the changes in his service from an era when the ‘Brothers’ were in charge to a state run service today. He develops the idea of place, both the place where troubled and troublesome children are cared for and the place where care workers bring their own sets of values to work with such children. He suggests that there were positive benefits in some of the religious practices in care institutions in the past and that in reacting to some oppressive religious practices and in our antipathy towards abuses against children in religious run institutions that we may have ‘thrown out the baby with the bathwater’. He also argues that there is a vocational aspect to the work of a social care worker and that through fostering positive relationships with children we can impart positive values that over a longer term can benefit them in life.

Carmel Gallagher presents evidence from a research study that points to the importance of religious values and the salience of moral frameworks in the lives of older people. She describes the types of interactions and activities that were of value in older people’s lives such as helping activities and involvement in social clubs and
voluntary groups. She explores some of the links between religious beliefs and practices and social connectedness.

Gerry Burke, Age Concern, England, addresses the question of how his organisation as a non-denominational body in a secular and multi-cultural society should respond to the spiritual and religious needs of older people. His organisation is working towards developing a set of standards in spiritual care, to provide what he calls ‘soul space’ for older people in care settings, many of whom have lost touch with their faith communities or who are not members of a religious community.

John Stephens, Methodist Minister, Dublin Central Mission and former DIT chaplain writes about his church’s experiences in redefining its mission in central Dublin to respond to the growing number of immigrants into Ireland. He describes how the church has developed a practical Christianity and has become a place of welcome for many newcomers to Ireland.
'In a Changing Ireland, has social care practice left religious and spiritual values behind?' - An Introduction

Michele Clarke

I welcome the opportunity to address the topic ‘In a changing Ireland, has social care practice left religious and spiritual values behind?’, as the place of moral and spiritual values in social care used to be central to the provision of social care when this was largely in the hands of the Churches. But in recent decades it has slipped to the margins of both professional practice and public attention. Yet moral, spiritual and religious well-being is central to those in care as it is to all of us, and perhaps more so, given that what characterize most of those in care are childhood and youth, old age, and adult dependency for reasons of physical and mental disability. These are all states of being or phases of life when the big questions are likely to loom especially large and when the support of belief and faith (of whatever kind) is particularly important.

One does not have to go far to seek the reasons for this de-emphasis of moral, spiritual and religious values in social care. But it is perhaps worth recalling some of them, for the diagnosis will help to inform debate on this topic, and may suggest some directions that future action in social care practice might take.

Most obvious is the overall secularization of Irish society. By this I do not just mean the retreat of formal religious practice to a position less dominant than it used to be but also the weakening of the social contract that long existed between Church and state for the provision of many education and welfare services. It is particularly marked in children’s residential services. In 2006, of approximately 150 homes for children in state care, some two thirds are run by the Health Service Executive (HSE) while only one third are provided by voluntary and religious bodies. It is interesting that the latter are almost evenly divided between the Catholic and Protestant churches. While it is true that there are now many non-religious homes for the older people, care of people with disabilities is still dominated by religious orders. Eighty per cent of services in this sector are provided outside the HSE, many of them by Catholic religious orders.
It is clear that two issues are likely to stem from this contrast in the role played by the Churches in the different fields of social care – one familiar to us from the past, the other reflecting the newer conditions of Irish society. Where care is still provided mainly by religious bodies, respecting the spiritual and religious rights of those receiving the care remains fundamental, especially since such respect was too often absent in the Ireland of the past. This is a matter for legislation, formal standards, and proper professional practice. However, it is the second issue on which I wish to concentrate, because it is the one which is less familiar, having crept up on us almost unaware. It is the possibility that in facilities not run by religious bodies, the moral, spiritual and religious well-being of those in care may simply be left unaddressed and consequently marginalized. This presents a particular problem in children’s residential care centres, since it is here that the withdrawal of religious orders has been sharpest while the decline in formal religious practice has been greatest amongst the young. Yet at no period in life is moral and spiritual development more important.

A reluctance to tackle the question of moral, spiritual and religious development has of course been compounded by the scandal of past abuse of children in the care of the Catholic Church, scandal which has broken in waves on public awareness over the past fifteen years and often with a considerable time-lag since the events concerned. The evils perpetuated under the cover of religion have made it harder to address religious issues. Additionally, social care workers almost certainly reflect society at large in experiencing the declining influence of organised religion. While this does not by any means imply a diminished concern with spiritual or moral issues, it does tend towards an emphasis on the private and individual nature of religious and spiritual belief and an unwillingness to see this embedded in the formal structures of the state – including the social care provided in the state’s name. This trend is underlined by professional training in the field, notably the Health and Social Care Professionals Act, 2005, which is driven by the physical and psychological well-being of those in care rather than by explicitly religious concerns.

Of course, there are provisions and safeguards concerning religious beliefs built into current regulations and practice regarding residential child care. The right of the child
to follow his or her religion in non-religious homes is assured, and religion is one of a list of criteria (which include ethnicity and language) on which development is encouraged. Parents’ preferences regarding their children’s spiritual and religious education are sought at the time of entry into care. The vast majority of children in care in Ireland are baptised Catholic, and in conformity with parental wishes make their First Communion and Confirmation. Indeed, these rituals, which are important both for the child’s life-cycle and his or her religious development, provide an opportunity to reaffirm contacts with the family and to involve it in a normal and joyful event. Long-term centres usually have stable practices concerning religious practice. In these respects, due regard would seem to be paid to the religious and spiritual development of children in state care.

And yet, one cannot help wondering whether this is enough – or whether it even addresses the issue as it presents itself today. For while in the case of non-national children whose religion is other than Christian (e.g. Muslims and Hindus), great care is taken to facilitate and foster spiritual beliefs and practices that are seen as constituent of the child’s identity, the same is much less likely to be the case for Irish children in care. This may reflect the movement of society as a whole toward a more privatised spirituality, a more relativistic view of morality, and a declining participation in organised Church life. Social care workers (and through them the state) are in a similar position to many parents. They are raising children and adolescents whose attitude to spiritual and religious matters may be very different to their own when growing up but whose ambivalences they may well now share. Where they differ from parents, of course, is that their role is defined by professional norms and training – the training they receive in institutions such as the Dublin Institute of Technology (DIT). As I have already observed, these professional norms currently tend in the direction of ensuring the physical well-being of the children, their safety from harm and their educational development, while perhaps being reluctant to engage in a moral and spiritual formation that is seen as inappropriate and open to the dangers of the past.

Where, then, does this leave care staff in guiding a young person who may be resisting a religion’s practice inherited from childhood or desired by their parents – or conversely, who is eager to pursue a spiritual or religious exploration not envisaged
when he or she came into care? Tolerance and a reluctance to be prescriptive may mean that social care workers accept a young person’s minimal participation in organised religion, even if they are baptised and formally part of a church. But what latitude do they have to talk about alternative forms of morality – or even spirituality – as part of the growth of adulthood? In short, acting in place of parents but on the basis of professional child care practice, how do those looking after children in the care of the state take the initiative in catering for the spiritual and religious development of their charges? Clearly by respecting the autonomy of the young people concerned, and by using dialogue, just as parents would. But also by working out strategies in the planned care of children and young people to rescue the issue from the sidelines. There are no pat answers as to what those strategies should be. This is why debate on this topic is welcomed and why we look forward to proactive practice for children in state care in this regard.
The Spiritual and Religious Dimension in Holistic Care

Most Rev. Dr. Diarmuid Martin

As a seminarian in Clonliffe College, I spent my summers working in a centre for ex-prisoners in London. It was there that I first came into regular contact with the professional world of the caring professions and began to take an interest in and read contemporary writing on social work theory in Britain.

After ordination, I was sent to Rome to continue my theological studies and my professor, a remarkable Italian moral theologian, asked me if I had any ideas on what I would possibly like to write a thesis. My immediate suggestion was on “A comparison of the Anthropology of British Social Work Theory and biblical anthropology”, and I had even brought my books with me from Dublin to facilitate my work. I was a little dismayed when the Professor replied: “But there is no one here who could moderate a thesis on British Social Work Theory, why do you not think about writing something on Saint Paul?” From my limited experience in social work, I had learned enough about dealing with people to recognise when there was no point in pushing something any farther, so Saint Paul it was to be – and in hindsight I do not regret it.

I recall that experience today to stress that every scientific theory in the social work area is inspired by its own anthropology, its own understanding of who the human person is, and is of course coloured by such anthropology. There can be debates around and between different visions of anthropology. The challenge is to ensure that anthropology does not become ideology, that it does not become self-serving to the detriment of the real needs person that you find yourself dealing with.

That struck me when I read in one of the initial reflections in a note I received about today’s meeting. The note read: “It appears to us that in adopting a holistic view of a child’s wellbeing, spiritual and religious needs may largely be ignored”. Clearly there would be something odd with a holistic approach which excluded something, namely spiritual and religious needs. It could hardly call itself truly holistic, if that word is to
mean: “relating to or concerned with complete systems rather than with the analysis of, treatment of, or dissection into parts”.

There are of course social work theories where the anthropological underpinning would indeed leave aside as unimportant the spiritual and religious, would play down the role of the spiritual and the religious or at the minimum would leave room for it only if the client, or patient, or resident explicitly asked for it. In a world in which the religious dimension is often considered to belong exclusively to the private sphere, it can be difficult for some to engage with the spiritual dimension of the person in services provided within a pluralist framework. Pluralist however does not mean secular. Pluralism should not ask individual or communities to leave their values and religious heritage on the street corner before they can enter into the dialogue of the public square. People have a right to ensure that their religious identity is respected and a right to be able to bring that religious identity with them into their contribution to public debate.

There is at the same time a growing realisation of the importance of the spiritual in the make up of a person and of the importance of that dimension in a process of healing and personal realisation. Most healthcare institutions provide today enhanced chaplaincy services, supported from public funds. It is important however also to remember that spirituality is often undefined and can mean many things. It is not the same as religion. One can find social work theories which will gladly embrace the concept of spiritual, but will become more resistant when it comes to religion and especially the religion of organized religious confessions.

I remember debates at the United Nations in the nineties where there was great difficulty in introducing reference to the spiritual dimension of the human person. This resistance came especially from the more secularised Western countries, who were at times almost allergic to any reference to anything even vaguely religious. They were surprised to find that the defence of the spiritual came not just from the Vatican, but from some rather unexpected allies. It was the era of Gorbachev, who was stressing that the crisis in the Soviet Union was indeed a spiritual crisis. Even the Chinese delegate spoke of China’s efforts to enhance spirituality, adding hastily
however that he was talking about “Chinese socialist spirituality”. So with unusual allies, spirituality won the day.

In the past, especially in Ireland, the Church filled many gaps in the social and educational structures of the country. Now there is an ever stronger move towards “professionalism”, and on the role and responsibility of the State to provide or at least guarantee access to service for all. With the stress on access for all, can come a trend to stress the pluralist character of the service to be provided and a reticence about anything that would impose any type of religious ethos.

It is important to remember that the Second Vatican Council clearly stressed that the act of faith can only be the free act of a human being. Religion, the act of faith cannot be imposed, but must the result of the free choice of an individual. Religious institutions indeed have been providing services to people of all faiths and none and proselytism is something that is not part of the programme of any of the major Christian confessions.

The Church has the right and obligation to be active in the formation of consciences and thus indirectly of public opinion. The most original contribution of Church organizations to social reflection is to stress the unique anthropological vision which springs from the Gospel and which, I believe, can be readily appreciated and assimilated by social theory and practice even in pluralist societies. Indeed reflection on that Gospel inspired anthropology can bring a genuine enrichment to social reflection.

The fundamental principle that guides the process of enlightening consciences is charity. This might surprise some. The word charity has unfortunately become debased or devalued in our English-speaking world. Many people today would say: we don’t want charity, we want justice and we want our rights; we don’t want charity, we want development.

But as a Christian believer I cannot abandon something which is fundamental to my identity as a follower of Jesus Christ. The disciples of Jesus are to be known by their
charity, by their love for one another. What I have to do is to rediscover, for myself and then for others, the true meaning of charity, of Christian love. That meaning is very different from the debased value of charity as hand-outs. I must show that true Christian charity brings an irreplaceable contribution to reflection on relationships between people and among peoples.

Self interest, comparative advantage, competition or long term national interests are all too often the motives which today govern relations between peoples. What we have to do, I believe, is to recover the notion of charity and love in the fundamental dimension of *gratuity* in our relations with others. That is the remarkable thing about God’s love: God loves gratuitously; God does not ask anything in advance. The Letter of Saint John reminds us that just “Jesus loved us first”. The believer is called to mirror such gratuitous love. In the caring professions the other can never just be a client, someone we manage, much less a threat. The other must always be our brother or sister, someone whom I am linked to with a relationship of love.

Poverty is the inability for people to realise their God-given potential. Fighting poverty means that we invest in human capacity, we enable people to be the people that God wishes them to be. We rejoice that they can be so, equal in dignity to us. It means that we personally feel hurt when there are others in the world who are unable to have the same opportunity to fully realise themselves as we are. Our relationship is one based on love and respect for the other, in their inherent dignity and freedom. A relationship of charity between people will mean a desire to enhance their dignity and their capacities and thus also of their freedom or liberty. It means recognising the other fully as persons.

The fundamental principle of social policy today should therefore be that of enhancing human capacity. People should never the objects of social policies. They are its subjects. Subjectivity is of the essence of being human. Human beings anywhere in the world are subjects with potential. The more individuals are enabled to realise that potential the better it will be for all.

Human beings must be enhanced so that they can form subjective, participative
human communities, which become the artefacts of their own future. We should even be happy when the people of the developing countries become our economic competitors. Social policy aims at putting people in charge of their own lives and future. Social workers should normally be in the business of putting themselves out of business. This is very different from the assistential models of the past – what too many people call charity - which looked only at delivering certain services and programmes. It is also different from the other more modern theories which look on social services as business. Let me explain.

In working in the area of international development, one discovers often that many NGO’s turn out effectively to be - or turn themselves into being - just the privatised arm of governments. They are looked on as being better able to delivery certain services and, let’s not forget it, they are cheaper.

Let me stress that I am not against applying business criteria to the running of caring institutions and services. There is need for rigid efficiencies and good business practice in the delivery of social services, but the measure of efficiency should have to do with enhancing dignity as well as with productivity.

There is room – even need – to establish new forms of partnership between public sector, business and civil society. At the same time, it is important to maintain one’s sense of qualitative identity. Church inspired groups have to be attentive to the temptation, that through working with business institutions, we water down that concept of gratuity, which should inspire our work, because we can easily become compromised by current policies and flavours of the month, simple budgetary constraints or policies in which liberal economics becomes the dominant motif.

Pope Benedict XVI dedicated his first Encyclical Letter to the theme of God’s love and how it is reflected in the Church and in society. He stresses especially the role of politics in the just ordering of society. The role of the Church and the role of politics are looked on as distinctive. The biblical affirmation of giving the things of Caesar to Caesar is an important affirmation about the correct distinction between religion and politics. But it also a warning against any deification of politics. The Encyclical
warns that “the Church cannot and must not take upon herself the political battle to bring about the most just society possible. She cannot and must not replace the State. Yet at the same time, she cannot and must not remain on the sidelines in the fight for justice”. (Deus Caritas Est, #26, a).

The role of religion within social policy and with the working interaction between those delivering social and educational services must be looked on anew in very generation to ensure that the legitimate requirements of the past are not canonized into the path for all times. That is part of the debate going on in Irish society and this is something to be desired.

What is important is that this debate be careful not to take place on ideological grounds or even in terms of the pragmatic needs of the moment. Much of the development of social care in Ireland sprang from the desire of individuals and communities to witness to the love of God. While the concrete realisation of the contribution of Christians can and must be reviewed as situations change, to marginalise that contribution would be to impoverish social reflection and leave aside the contribution of Jesus Christ who represents the gratuitous and superabundant love of God, the best antidote to the measured and packageable model of our consumer society.
How are Religious and Spiritual Values Imparted to Children and Young People Living In Care Settings?

Lorna Wogan

Introduction
I do not claim to be an expert on the topic of spirituality or that I have any definitive answers to give you here today. What I want to do today is to get you to begin to ask yourselves questions and get you to consider your roles, responsibilities and duties in relation to how you as social care practitioners address the spiritual needs of young people in care.

I am here today to share and reflect on my own experiences, my own questions and what I believe are your responsibilities as social care workers in this particular area. What I have to say is based on my own values and belief systems and how I worked with children and young people in care over the past twenty years and my experiences, in more recent years, as Monitoring Officer for children in care. I will also draw on my duties and responsibilities as a parent of two young girls. I believe that I have a duty and responsibility to give my children a sense of faith and spirituality in their lives and I believe that you as social care professionals have a responsibility to ensure that young people in your care are given the same opportunities and experiences afforded to our own children and family members. My own knowledge base is the Roman Catholic Church and Church of Ireland. However regardless of what religion a child or young person in care belongs to, this is where our responsibilities lie.

Legislative framework
Our child care legislation clearly outlines where our responsibilities lie in relation to ensuring that young people in care have the opportunity to practise their faith. Section 40 of the Child Care Act 1991 provides the legislative basis for the Regulations in relation to Children’s Residential Centres. Part III, Article 10 of the Child Care (Placement of Children in Residential Care) Regulations, 1995, states that
A health board shall satisfy itself that the children placed in a relevant residential centre are facilitated, in so far as is reasonably practicable, in the practice of their religion.

Our National Standards for Residential Care Centres, under the Standard 6 in respect to the Care of Young People, criteria 6.14 states that Young people are facilitated in the practice of their religion, taking account of views expressed by their parents.

Inspection & monitoring of Children’s Residential Centres is clearly defined within our legislation and regulations. Inspectors and Monitoring Officers, as the authorized persons, must satisfy themselves that residential centres are in compliance with all regulations and standards and have a responsibility to report on how care staff support the young people in care in terms of meeting the standard in relation to religion. These pieces of legislation and standards set the context and outline our duties and responsibilities.

In reading some of the information about this seminar there were a number of statements that struck me as being relevant to our topic today and which are relevant to our work with young people. These include that spirituality is not *out there*, (outside of oneself), it is *in here*, (within oneself), and it is about our individual life story, our place in the world, our views about life and death. Spirituality has to do with what is intangible in our lives, yet which is of central importance.

An earlier speaker, Gerry Burke from Age Concern in England stated that they are interested in the ‘whole person’, that it starts with the ‘person’s needs’ and recognises the ‘complexity of persona and need’ which includes the ‘physical, emotional, psychological and spiritual’. This statement is equally as relevant for children in care as it is for older people. It needs to be acknowledged that meeting the religious needs of young people is both complex and extremely challenging. It also needs to be acknowledged that so often the complexities and challenges get confused with our own issues – our own experiences of church, the hierarchical church, what we have heard in the public domain and the media, our perceptions, our lack of confidence to
address the issue, our lack of experience in this area.

Perhaps many social care practitioners see themselves as shaky in their own sense of believing and belonging. For many social care students and practitioners embarking on their professional career they are establishing their own personal and professional value systems and defining priorities in their own lives. They may feel they no longer wish to adhere to the religious practices of their faith. This is an informed choice we can all make within the context of your own needs and life experiences. However we have responsibilities to the young people in our care to instill an understanding of faith and spirituality in the lives of children and young people placed in our care. No matter what our religious or non-religious stance may be, few parents would leave the future lives of their children to chance or to the accidental influences of the surrounding culture. We should be constantly aware of the importance of providing some scaffolding to help young people in care find meaning in life. If we fail to do this what anchors will they have in life? What will they trust? Where will they find nourishment in their hearts for their vision of what is worthwhile in life?

**Religion and care planning**

Residential care has become a highly regulated environment with well defined policies and procedures in relation to our work with young people in care. Through the care planning and placement planning process workers are attentive and vigilant in addressing the physical, emotional, health, educational, social and cultural needs of our young people in care. However, it is my view and my experience that care staff do not, in a conscious, planned and proactive way attend to the spiritual needs of children in care. In the area of religion in the life of the young person care plans and placement plans state little more than the religion the child was initiated into and the status of the young persons cooperation with staff vis-à-vis mass attendance. Why is it that we don’t place emphasis on developing our practice or evidencing our practice in this aspect of the child’s development? We are thus failing the standards and the regulations in this regard. As Inspectors and Monitoring Officers what evidence do we look for in terms of residential centres meeting this criterion within our regulations and standards? If we do not address this in inspections and monitoring visits we too fail to meet our responsibilities.
I suggest that care staff need to challenge themselves to be more creative in using everyday routines and interventions within the centre and experiences within the wider community to assist young people in establishing an understanding of their faith, their values and beliefs. It is my view that spirituality, rather than doctrine or religious practice, is more likely to be the influencing factor in the lives of young people today.

**Addressing the spiritual needs of young people**

The first consideration must be what religion are the children baptized or initiated into. This is recorded on a number of documents relating to the placement, therefore it surely has some significance? We must also ensure that we have meaningful and open discussions with the parents of our young people in care in order to explore their views and ascertain their hopes and aspirations for their child. The centre staff should be able to inform the parents of the centre’s approach in relation to promoting the child’s faith and sense of spirituality.

As Ireland becomes a more multicultural society we must be prepared to inform ourselves about the religious customs and practices of those young people admitted to our care system. Each human being irrespective of religious background has spiritual needs. We are body, mind and spirit and we need to address each aspect to ensure that we live some sort of a balanced life. Meeting the spiritual needs has to do with giving young people

1. A set of beliefs, and
2. Value systems

We need to find creative ways to ensure that we give young people a set of beliefs and value systems. It is not just about making efforts to get young people to Mass or to observe formal religious practices.

I realise that many care staff don’t feel secure in ‘talking about religion’ with young people in care. But words are not everything. Even the ‘good example’ of their own religious ‘practice’ is not everything. It could just seem like an external routine to the
younger generation. However children and young people do look to significant adults in their lives for leadership in the area of faith and our example is more important than our words.

Providing opportunities to be still and to reflect

We live in an age of music, noise and activities. We tend to have an intensive programme of activities for children in care. There is little or no room for quietness and calm. When we as adults find time for quietness and stillness we frequently can be at home with ourselves and find an inner calmness. It is a time when we can look at what is going on in our lives, where we can begin to look at what we stand for, who are we, what do we want in life.

One of the values we need to seek and re-find for children in care is that ability to be still, to relax and to just ‘be’. We need to give them the opportunity to develop a capacity to reflect on their relationships and life itself and what has happened for them in their lives. We need to help young people get in touch and to appreciate nature and the world around them. We need to help them:

- Notice the change in the seasons
- To listen to the sound of water in the waterfall
- To watch the waves in the sea
- To feel sand beneath one’s feet
- To appreciate the ocean breeze
- To enjoy leisurely walks through a forest
- To watch and appreciate a sunset
- To appreciate gifts, such as sight, hearing, smell, touch etc

Giving young people the opportunity to have these experiences is giving them quality life experiences, helping them move beyond the immediate into a deeper part of themselves, where they can get in touch with their core, the essence of who they are. At a basic level one is helping the young person move aside from the world of rock / pop music, away from noise and clutter into a quieter and calmer world where they may begin to make sense of their life story, of the circumstances that led them to come into care.
This provides staff with the opportunities to ‘be’ with the young person, to allow him/her the opportunity to take ‘time out’ from all the distractions and business of life in a residential centre. I suggest this is where key-working sessions can take place at their best. This “quiet time” is very often where healing process can begin and take place.

**Helping children to be members of a religious community**

While all this I’m sure makes sense to most of you, we have to do more, we have an obligation to do more. If a young person is baptized / initiated into a certain religion we have an obligation to teach them what it means to be a member of that community. If we have not the knowledge we need to educate ourselves. Care staff methodically research and carefully select the information they require to undertake health, education and leaving care programmes. Shouldn’t we apply the same principles in pursuit of the information we require to address their religious beliefs?

There are a number of ways of imparting knowledge.

- Bible / gospel stories
- Night prayers
- Preparation for Easter and Christmas Church celebrations

What do *we* say Christmas means when we are preparing for Christmas? What are *we* celebrating? What is *our* emphasis? What are we saying to young people about what it means?

A new and complex culture within our society makes believing difficult because it offers an alternative menu of meaning and values. This is a challenge we have never faced before in the same way. Is there not an opportunity here to move beyond the glitter and glamour that is so removed from the meaning of Christmas? Young children can greatly enjoy the creativity of actually making a crib, designing the figures themselves. By encouraging such expressions of faith we are actually forming the religious sensibility and making memories for the children. The same applies to Easter – is it more than the Easter Bunnies and Easter Eggs? What is the message of Easter from a Christian perspective? Will we be having these kinds of discussions and
debates with the young people in our children’s centres this week?

What about the sacraments for those who are Roman Catholics? How do we prepare them for first Communion/Confirmation? Do we leave it to the teachers? What is our emphasis? Certainly the schools can do a great deal in terms of looking after our children’s faith. But as an influence the school on its own is weak. Without the active support from care staff in the Centres the religious education that schools offer will not be sustained. How do we as care workers help them in relation to Mass? What efforts have we made to find a meaningful liturgy? Have we ever looked around to where there might be Youth Masses? Do we think we have our responsibilities met when we have told them the times of masses in the local church?

**Imparting Christian values**

Being a Christian means to care for all

- To include all those on the margins of society
- To fight for justice
- To be reconciled with those who have hurt us (this may very likely to have implications for children in care and needs to be looked at in this context)
- To learn how to forgive. Many of the young people we meet are in need of healing, of forgiveness, of needing to forgive (not forget).

We all search for meaning in life – young people in care have additional struggles due to their life’s circumstances. These issues may relate to abuse, separation, rejection, broken relationships and issues relating to their sexual identity. They have a need for respect and support through the many issues they have to come to terms within their lives.

Values in life are ‘caught’ rather than ‘taught’. Children and young people learn from us. They learn from how we relate to our colleagues, how we treat and speak about their parents. Irrespective of religious beliefs the Christian definition of love in the Bible can be a solid basis for life: ‘Love is patient, love is kind…’ (1Corinthians, 13.4).
Young people who feel rejected or abused in life may find it very difficult to live by a moral code based on respect, love and acceptance. But we can give them experiences of love and acceptance and understanding which are gospel based and deeply human values.

It is worth recalling the famous parable of the Last Judgment (in Matthew 25) where there is no question of what one believed but only of what one has done with one’s life, and especially whether one lived a concrete compassion towards the weak and wounded of the world. There are many people today, and in the future, for whom a full commitment of faith will be practically impossible to reach. But, if you can pass on love, compassion and healing that can be a kind of ‘implicit faith’

In many ways meeting the spiritual needs of young people is doing what we are already doing as care workers but with an awareness and intention. This awareness and intention is very important.

**Concluding thoughts**

In life today many people come face to face with family tragedies and young people in care are no strangers to such tragedies and life crises. Many have to deal with unimaginable tragedies in their lives. How do we help them make sense of their world and their experiences? What have we to say or offer by way of consolation?

In the past child care services have been accused of being rigid in terms of religious practice and passing on the faith. Maybe much of this criticism is true. However, have we swung the pendulum to the other extreme and replaced the past practices with ‘nothing’. I suggest that we may have.

Is passing on the faith left to the more senior staff members or those whom we know who practice their faith? If you as member of staff do not do your part to pass on faith I would suggest you are failing in your responsibilities. When was passing on the faith or religion last discussed at a staff meeting or staff training day? Staff teams need to address this issue. If training is required, source it.
Finally, I would suggest that these are the religious needs of young people which staff must address:

1. To believe that life has a meaning and a purpose.
2. To have a sense of community as a place of deepening relationships.
3. To be appreciated and loved.
4. To be listened and heard.
5. To experience religious faith as a journey, an adventure of growth.
6. To have practical help in developing a mature sense of faith.

In many ways these needs are obvious. But they clearly indicate that we as adults have a key role in supporting and befriending our young people on their way to a more adult faith. Not so much by our words but by the non-verbal messages they pick up from how we live and from how we relate to them.
I will begin by letting you know where I’m coming from. Like all of us… parents, environment and community were major influences on my childhood. Unlike today there was another all pervasive influence. The Church, both subtly and in many cases not so subtly, controlled, with the priest seen as God and church teaching unquestioned. It must also be said, however, that the Church, whether for good or ill, did give a sense of order and control. And while that order and control hid some unpalatable truths which would later emerge in a more liberal Ireland, there was a certain security which flowed from the influence which religion had on us. As is often the case for many people, black or white was far preferable to the struggles and questions which grey raises.

To relate this to the topic of the seminar, I would suggest that a sense of security and certainty also prevailed in the children’s centre where I worked for over twenty five years. In later years the sense of order that religion provided declined and in a changing Ireland that decline was replicated around the country in many of the child care centres which had been run by religious orders. In the broader Irish context the author John McGahern, who died recently, has painted a vivid, harsh and sometimes depressing picture in many of his novels of the influence of religion in the lives of ordinary people. And we must keep in mind that we are not talking about hundreds of years ago but rather a little less that a generation ago.

The importance of place
A sense of place is vital for us all. I would like to consider the concept of place; place in the sense of where children in care are and our responsibility to cater for their moral and spiritual wellbeing. My suggestion, ultimately, is that, living in a different world from the relatively recent past the place we provide for children in care - welcoming, secure and safe - will provide a base from which spiritual and moral values can emanate. In a society where materialism is rampant staff teams must have
the confidence and conviction that such values have a real place in the lives of children who are marginalized and deprived. I will juggle with that word place as we go along. In terms of my perspective on children and young people in care with whom I have worked over a good number of years, rather than providing answers, I will explore some questions that we can ponder with benefit.

Let us for a moment reflect, briefly, on the past and then move on to where we might go into the future in terms of the broad theme of the seminar and in particular the idea of place. Because, if the places of care our children go to are safe and secure then there will be many openings for them to imbibe all that is best in either a spiritual or moral sense. And that will come from trained, committed adults who know what they are about and who can create an atmosphere and environment that is welcoming and warm with realisable goals, however minimal.

L.P. Hartly, in his novel of English country life, ‘The Go Between’ (1953) which deals with the loss of innocence and where the theme of place resonates, begins with the famous opening lines…

‘The past is a foreign country, they do things differently there’.

I would suggest that things were done differently in the past in dealing with children in general as well as in care situations. It was, of course, not all bad. It would be presumptuous, indeed even arrogant to suggest that because of what we all now know about the past that it is my generation or your generation that has suddenly become enlightened as to how children in care should be treated or how their spiritual and moral needs should be met. And I say that without forgetting for a moment all that went wrong.

We need to look more objectively at the past and acknowledge what was worthwhile as well as what was problematic in social care practice. The phrase ‘Throwing the baby out with the bathwater’ is apt when looking back and attempting to bring the best from the past to bear on the future. This is true in terms of spirituality - a term meaning different things to people in different cultural contexts and in different eras.
We have many examples of enlightened child care practices from the past. The Philadelphia House of Refuge established in the early 19th century\(^1\) provides us with a very revealing perspective on what *place* should be for children. And this from a time when the term Mission Statement was unheard of as a concept! The refuge provided care for children only after much deliberation by judges. Reading material and play areas suitable for children were provided. Surrounding walls were built not to keep children in but to keep strangers out. This was a most enlightened approach and interestingly, God is not mentioned.

In Ireland the 1908 Children Act, even in its demise, still governs the lives of young offenders who come into care through the Juvenile Justice system. We should not forget that many commentators have had to admit that it too was a most enlightened piece of legislation. Furthermore, in its working and direction, the religious needs of those it affected were not forgotten.

To return to the more recent past in 1973 I began work in Finglas Children’s Centre which replaced the old Marlborough House. It was run by the De La Salle Brothers and catered for boys only. The staff, in those early years, both lay and religious, was male dominated though there were a number of nuns and a small number of female staff also working there. The centre was not unique because, as you know, religious orders ran the vast majority of residential centres for children. We now know that the state, giving lip service to children and the family, conveniently forgot its obligations to those children who, for whatever reason, found their way into public care. Change, however, was on the way, and from the mid 1970s more and more lay people were beginning to come into this area of work and the following decades saw a remarkable decline in the influence of religious orders with all that that meant.

It was not surprising then, that in the place I worked, because of the Brothers and the prevailing ethos of that time, there was strong emphasis on religion as in prayers, Mass, presence of religious symbols and so on. Over time some of the lay staff would

\(^1\) The Philadelphia House of Refuge refers to one of a number of Houses of Refuge set up to provide care for child vagrants outside of adult prisons from the 1820s onward. The first was set up in 1825 in New York. They were not as benign as their quoted purpose and were often places of harsh regimes.
have expressed the view, in a joking manner but perhaps with some intent, that whatever religion they had when they began working in Finglas they had none left after a few years working there. What was the reason for this implied negative view? - “The Brothers” of course! At times it seemed that - a bit like blaming the British - whatever difficulty one had in Finglas the Brothers were a convenient target. It seemed like “they” were always to blame. So, the boys coming to Finglas at that time were coming to an institution where religion and religious symbolism was very much part of their day. One of those religious symbols was, naturally, the crucifix and in the early days many wooden crucifixes dotted the walls of the centre. They were soon removed from all but the most inaccessible positions as they presented a convenient weapon for the boys to use on their peers or indeed, on occasion, the staff.

Looking back on it now I would suggest that religion was a controlling and ordering factor in the boys’ lives in Finglas. Was that necessarily a bad thing? I can’t put my hand on my heart and say that it was. Let me give you an example. Before the boys went to their meals they lined up for prayers. Similarly at the beginning and end of each day and often before class time there was a pause for prayer. Now, while ostensibly the emphasis appeared to be on the prayer, the actual process established order, slowed things down and provided a pause before moving on to the next activity. Meal times were often the most difficult and disruptive time of the day with large numbers of boys in a confined area. The prayer before meals, while outwardly the focal point, helped to create calm and allowed other instructions and directions to be given.

I remember one staff member, who as part of the morning prayer ritual, when one or more of the boys were due in court later that day, would ask that we all say a prayer for the judge to guide him or her to make the right decision in relation to the boy or boys in question. The more alert among the boys were often less than enthusiastic for such a practice and let that be known in language that would certainly not have impressed the judge and certainly was not appropriate as part of morning prayer. Mass, the core of religious practice, was one area where numerous difficulties arose. On their way to Mass, the boys passed near the front entrance of the centre and the risk and temptation for the boys to abscond was ever present. Although not always keen, all the boys went to Mass and various enticements were used to get them there.
The carrot of a swim after Mass often worked as did the suggestion that the particular Mass “only takes five minutes.”!

Another enticement was the miraculous medal which each new boy got at the end of Mass. The brother in charge would, prior to Mass, have delivered his own sermon on the miraculous powers of the medal and would relate stories of how it worked wonders in wars and other catastrophes. I remember an occasion when a boy had to be removed from the church at Mass time because he was disruptive. He actually left the church without too much difficulty and agreed that he might be better engaged playing football in the gym until Mass was over. I and another staff member accompanied him. Everything seemed to be going fine until he suddenly realised that he would miss getting the miraculous medal at the end of Mass. Despite being told that we could get him one anyway he barged past us out of the gym insisting that he wanted his ‘nekrakulous megal’ from the priest only, and no one of us was going to stop him. Needless to remark, in referring to the medal, the priest and our attempts to stop him a number of well chosen expletives were used (by him!). A chase ensued out of the gym and back to the church where he made his grand entrance and brought proceeding there to a halt. On being asked by the priest why he was back he again referred to the ‘nekrakulous megal.’ Discretion being the better part of valour, it was felt he was better off remaining in view of his obsession with getting the medal. In the event the medal had, one more time, proved effective and order was restored!

The particular enticement to go to Mass for the miraculous medal declined too especially as it became increasingly evident that, after Mass and as the day wore on, rows and fights regularly erupted among the boys over claims that others had stolen their medals. The practice of giving and wearing the miraculous medal has of course declined as a religious observance over time.

God never of course closes one door but opens another! When what is now the Oberstown Girls Centre was based down the road from Finglas in Whitehall, the presence of the girls at Mass each Sunday, while bringing its own perceived difficulties, did act as a magnet for the boys to attend with less persuasion than usual. Disorder was never far away for either group and more vigilance than usual was necessary to get things back to normal particularly when the ‘sign of peace’ seemed
very rushed when given by the boys and girls to the adults and much longer than necessary between themselves!

So, one can only wonder as to what the boys really got from Mass, the central religious service of their week, in view of the reasons why they attended. What I will say is that involving the boys in a more integrated way in the actual liturgy service, as happened in later years, helped enormously. I do believe that children are very attracted to ritual and symbolism and I see, in the centre where I now work, that by involving them and expanding on their individual talents at Easter, Christmas and indeed at other significant times, the spiritual dimension does not have to be boring and meaningless.

How does the present day differ from the decades of the 70s, 80s and 90s? Was there a stronger sense of values and a clearer moral code? If so, was religion the reason? I can recall a heated debate at a child care meeting about the correctness, or not, of allowing the children to watch ‘The Incredible Hulk’ and ‘The Bionic Man’ because it showed that physical strength was the way to solve problems. Thrown in for good measure at that meeting was an opinion that allowing children to watch ‘Top of the Pops’ was exposing them to pornography because it featured scantily clad dancing girls. Who remembers ‘Legs and Co’? One can only look back wistfully on what was really a simpler age when one considers what children are now exposed to on television. Are the children who come to us today less moral because of a decline in religious values? They certainly have much more to contend with, they are more precocious, they do some terrible things, but really I can’t say I think they have less of a value system or are less moral. There are people who will disagree with when I say that I don’t think children coming into care today are “worse” than they were twenty or thirty years ago. They may well be right and I may well be wrong.

Now where does this leave the influence that religion had or did not have on those children who were in centres where religion played a big part? Frankly, as I said in relation to Mass attendance and its real or imagined effect, I tend to think that it was the relationships with staff and how those relationships were positively fostered that may have had a greater influence for good. I do know that when children who have been in care where I now work ring up after anything from three to twenty years after
leaving us it is the child care staff and quite often the household/domestic staff they will ask for and enquire about. This leads me to where social care workers come in in terms of what provision they can make for the children they work with where moral/spiritual values are concerned. Because as I am sure you will agree, we are hardly going to go back to the systems that pertained in the past in terms of a one dimensional, unquestioned religious authority such as the Catholic Church was.

Firstly, what have we as social care workers to offer? Certainly not an authority by reason of just who we are. Remember nobody is ‘God’s gift’ to Child Care or Social Care. We do however bring our past, the place we have come from, our experiences - both good and bad, our personality, our training, our talents, some of us with one or two, others maybe fortunately blessed with more than that. We bring our optimism and I hope a sense that we can make a difference. We bring, hopefully, a strong professional ethic.

Dare I say, we may have, what has become a somewhat disreputable word, a vocation for what we do. Now before anyone jumps up and looks for a fight with me on this one, let me say that, yes, a job is a job and we all have to pay the mortgage. I believe strongly however that not just anyone can work with difficult children whether it is in the classroom, the community or residential care. So, if as social care workers we are privileged to work with the most marginalized children who find their way into the residential care system, or indeed the community services, let us not forget that these children are in our place and we have a responsibility to cater, in the best possible way, for their spiritual and moral well being.

There is much in place, and rightly so, to ensure that we have learned from the past and that, first and foremost, children are safe and secure. There are Inspections, Legislation, Policies and Procedures, Children First, Standards etc that should combine to make care safe. And, if after spending a period of time in care at an earlier age, an adult, even if he / she ends up in Mountjoy prison, can look back to when they were in our care and feel, “I was safe there”, then somebody has done a very good job. In addition to that if good relationships are fostered that enables the spiritual and religious aspect to be developed then that is a further bonus.
I would argue that we have drawn back, that we have become cautious around the whole spiritual dimension and that we know the reasons why. One gets a sense that we are, at times, bending over backwards and jumping through hoops to ensure that there is no suggestion that we are, as it were, foisting spirituality or morality on to children we look after because we might be seen somehow to be condoning what was, in some cases, wrong and abusive in the past. I have always felt that if a Muslim, or Hindu child, were to come to one of our centres then staff would be very anxious to ensure that his or her religious and spiritual needs were met. However, I would suggest that our Christian / Catholic children deserve the same.

How then can we contribute to the spiritual and moral development of the children we work with? We are not talking here about making some dramatic impact on a child’s life but maybe we have some talent on our staff team that can zone in, however imperceptibly, and make some small difference. Of course, much more importantly we can make that difference in our place by doing the ordinary things extraordinarily well. Because working with difficult children is unglamorous, monotonous, mundane. So is parenting and it is because of just that ordinariness that relationships are built and values which very often cannot be taught are actually caught. The idea of “The Other 23 Hours” springs to mind here (Trieschman, Whittaker and Brendtro, 1962). It is the ordinary and mundane, real quality care that happens each day, every day which is the key.

If violence begets violence then the converse must be true. Kindness, sensitivity, fairness, conveying a sense of right and wrong, being just and being an advocate - surely all of these if manifested by us will make a difference in a child’s life. Wordsworth, one of the great poets of the English language, an agnostic, is spiritually ecstatic in his poem not about God but about a place, Tintern Abbey with its particular atmosphere and rustic surroundings. Let us consider what he suggests has a major influence for good in one’s life.

These beauteous forms,
Through a long absence,
Have not been to me
As is a landscape to a blind man’s eye:
But oft, in lonely rooms, and mid the din
Of towns and cities, I have owed to them
In hours of weariness, sensations sweet,
Felt in the blood and felt along the heart;
And passing even into my purer mind,
With tranquil restoration- feelings too
Of unremembered pleasure; such perhaps,
As have no slight or trivial influence
On that best portion of a good man’s life,
His little, nameless, unremembered acts of kindness and of love.

And maybe, that atmosphere near Tintern Abbey which Wordsworth, the agnostic, found so spiritual, so godlike, while it can hardly be replicated in our *place* perhaps the more we achieve, in making where we work as calm, as safe, as spiritual as we can, then perhaps we need not necessarily hanker after what some euphemistically call ‘the good old days’. We can help make the now, our *place* a haven for the troubled children who find their way into our residential centres. Is this not what we would want for our own children were they to have to experience the care system in Ireland? And let us not forget, that ‘there, but for the grace of…’ goes your child or my child, your brother / sister or mine.
Religious Values and Moral Frameworks in the Lives of Older People in Ireland: Some Research Findings

Carmel Gallagher

Introduction
This presentation will discuss religious values and moral frameworks in the lives of older people. It is based on recent research that I carried out for a PhD on the participation of older people in their communities. I will firstly, give a short account of the research study. I will then present some specific findings on religious practice and the importance of religion and spirituality in the lives of older people in the study. I will explore the moral frameworks that were evident in the lives of the older people and the types of interactions and activities that were meaningful and of value in their lives. Finally, I will discuss the extent to which intermediate level groups such as clubs and voluntary groups articulated strong positive values. I wish to highlight in particular:

1) the links between religious belief/practice and social connectedness, and
2) the extent to which moral frameworks based on the Christian religious tradition were associated with practical social concern for others.

A recurring theme in the study was how intertwined ideas about enjoyable and worthwhile activities were with ideas about voluntary work and involvement with other people either in communal leisure, informal sociality, helping or community activities. Religion was a source of personal meaning for very many of the study participants but the importance of social ties embodied in religious communities was also highlighted in the study. While the study did not investigate religious or spiritual values in any depth, it did provide insight into people’s beliefs, the extent to which religion was an important source of meaning in people’s lives and the moral frameworks reflected in their social practices.

The study is an examination of the social and community participation of older people in an urban and a rural setting in Ireland and was carried out between 2000-2005. A suburban area of Dublin, fictitiously named Rathmore, was chosen for the main part
of the study and a rural area in Donegal, Rathbeg, was chosen as a secondary research site. The study focused on the social and communal activities of older adults including their leisure interests, involvement in clubs, religious practice, voluntary work, relationships with kin, friends and neighbours, help given and help received, use of social services and informal interactions in neighbourhoods and other communal settings. The study demonstrated the interactions and activities that were of value in the lives of older people and the extent to which older people contributed positively to the lives of others. A multimethod approach was used. One of the main sources of data was an interview based survey of 165 older adults in Rathmore. A smaller survey was carried out in Rathbeg. Ethnographic observations were conducted extensively in many settings including centres where older people socialise and in a wide range of social and communal settings such as clubs, pubs, churches and other formal group settings.

**Religious practice and values**

Religious practice was strong and significant in the lives of the older people in the study. Not surprisingly though there were different approaches and emphases evident in relation to religion and spirituality. The overwhelming majority of the sample were members of the Catholic Church, a handful were members of the Church of Ireland and a small percentage were not members of any church or were agnostic. Religious practice was clearly important to the vast majority. Levels of regular church attendance were very high; almost one third of respondents attended Mass daily while about 40 per cent attended at least two or three times a week. A further 40 per cent attended Mass or religious service weekly making a cumulative total of almost 80 per cent who attended Mass or religious service at least once every week. We know that this contrasts somewhat with overall trends of decline in religious practice in Ireland. According to surveys showing trends on weekly Mass attendance there has been a decline from 87 per cent of Catholics to around 65 per cent of Catholics who attend weekly Mass from 1981 to 1998 (Fahey, 2002). Indeed many older people acknowledged that the high levels of religious practice among their peers were not widespread in newer communities and among younger age groups.

There were different approaches evident in relation to religion and spirituality, from the devotional and pious to a more questioning reflective stance and in some cases a
critical and disenchanted attitude towards the Catholic Church. However, prayer seemed important to many, regular personal prayer, prayer in coping with difficulties and prayer through Mass going and church attendance. Many older people say set prayers including the rosary and prayers they learned as children and they include all their family in these prayers. However, one critic of contemporary religion has suggested that forms of Catholicism that are supposed to be traditional including ‘stylised and sentimental prayer forms’ only in fact became popular from the end of the nineteenth century and replaced what he sees as more authentic expressions of spirituality associated with folk religion (Kirby, 1984: 66). While high levels of Mass going and prayer indicate strong belief among the older age group, it is also clear that these religious practices were developed from childhood and were supported by the rhythms of communal life and institutional forms of authority that do not prevail to the same extent in contemporary society. At the same time the trends toward more private spirituality and secularism can be contrasted with the continuing popularity of forms of prayer such as Novenas. Novenas remain popular and have been incorporated into liturgies that attract high levels of ‘voluntary’ church attendance. For example a Novena of Grace that is held in a church in Rathmore every March attracts a packed congregation on eight consecutive evenings.

Older people are particularly active in parish work. Indeed many of the respondents said that it was older people who do the bulk of work in Parishes and the researcher found much evidence of this. We noted that church groups were the most common group that our respondents were involved in, with 15.2 per cent helping in their church in some capacity. The types of work that the older adults did in their parishes included being members of Parish Core Groups or Parish Councils, serving as Ministers of the Word (reading the scriptures at Mass) or Ministers of the Eucharist (giving out the Eucharist at Mass), cleaning the church, helping to prepare the Liturgy, helping with the church collection, singing in the church choir, helping with fund raising and so on.

The importance of social ties embodied in religious communities has been recognised. For many people who went to Mass daily or a few times a week Mass was built into the structure of their day and had a social aspect to it. One man who attended Mass two or three times a week said: ‘It gets you on an early start and you meet people.’
Another respondent who attended daily Mass said:

I get up at 7.00 every morning. I know the people who live around [name of area]. After Mass every morning we have a chat. I meet fellas, hear the news, what’s going on … they’re well up to date on everything. One man I speak to - I don’t know his name – I chat about Gaelic football with a neighbour on the – Road and I don’t know his name (Interview July 02).

Churches have been seen in the social capital literature as strong repositories of positive communal values (see for example Gill, 1999, Herbert, 2003, Davie, 2000). Research in Britain by Gill found a statistically significant correlation between participation in voluntary service groups and church going. In the present study while there was a statistically significant correlation between churchgoing and volunteering, it was not as strong or as clearcut as in Gill’s study. We found that respondents who went to church two or three times a week were the group most likely to volunteer while those who went on a daily basis or once a week were equally likely to volunteer. Respondents who were irregular or non-churchgoers were less likely to volunteer. The same values and dispositions are often involved in religious practice and volunteering. In Britain churchgoing is not as culturally embedded as in Ireland, therefore belonging to and practising one’s religion may perhaps be a more purposive activity than in Ireland. That the connection between church going and volunteering is less strong in Ireland may be accounted for by the embeddedness of churchgoing and religion in the lives of older adults.

While not the only factor associated with volunteering, many volunteers displayed social concern in Christian terms. It was often the case that the lives of those who contributed significantly to communal life through voluntary and community work were imbued with a strong sense of Christian duty or a disposition that was compatible with practical social concern for one’s ‘neighbour’. While the value base of Christianity strongly urges practical social concern for others, undertaking voluntary work is a conscious decision that involves making room for it among one’s other concerns. It was interesting that no significant correlation was found between volunteering and the stated importance of religion or spirituality. This may reflect the different interpretations of what respondents meant by ‘importance of religion’ and the inadequacy of direct survey questions to elicit some of the subtler orientations to
religion and spirituality. It also reflects insufficient knowledge sought in the study, for example we did not expressly distinguish between spirituality and religion and this may have limited respondents’ accounts of their own beliefs and value orientations.

Helping, Volunteering and Positive Neighbouring
Apart from formal voluntary work it was very striking how much older people in the study helped others informally. Positive neighbouring was strongly evident in both Rathmore and Rathbeg, considerable amounts of practical help were given and received and helping activities contributed to satisfaction with life both for givers and receivers. Approximately 30 per cent of older people in the study did some form of voluntary work, mainly charitable, church or community development. This is somewhat higher than the rates suggested in other studies, for example a recent report suggests a rate of 25 per cent for this age group (Tipping the Balance, 2001: 16-17). A higher proportion, 40 per cent said they helped someone outside their own household; neighbours were the most frequent recipient of such help followed by their own children or grandchildren. Help given by neighbours ranged from the provision of companionship to provision of services such as transport and even included personal care tasks and house maintenance. Many people spoke about the practical help and support they received from neighbours in their day-to-day lives. A recurring theme in the interviews in Rathmore and Rathbeg was how helpful, considerate, dependable and friendly their neighbours were. One-to-one relationships with neighbours and friends involving support and practical help were vital for those experiencing incapacity and those living alone. However, it was clear that positive relationships with neighbours enhanced life for those with extensive kin and friendships networks and those without significant kin or friendship networks.

In addition to overt forms of helping, we came across many examples of older people giving encouragement to each other in unobtrusive ways that demonstrated kindness and understanding. This is more than general valuing of good neighbours or feelings of general good will towards those in one’s locality. We came across an example of a group of neighbours who looked out for a person who was developing symptoms of dementia by encouraging her to continue normal social interaction supported by their presence. They did this by unobtrusively monitoring her movements in the neighbourhood and by inviting her to accompany them on short trips to the shops and
to social events. They had encouraged her to host a regular religious-based event in her home and then helped her to provide hospitality at it.

Positive neighbouring emerged as a major social resource and was characterised by reciprocities, kindness, practical social concern and friendliness. People valued the kindness and helpfulness of neighbours that was demonstrated through many helping tasks, visiting and support at times of particular difficulties. In many cases neighbours were friends. We have seen that these friendships involved obligations, not in any forced sense, but appeared to arise out of sharing life space through habitual interactions and knowing and understanding one another’s situation. Being attuned to the lives of others in one’s locality was also evident among volunteers and those involved in community activities. In addition to enhancing the lives of neighbours and friends this disposition produced beneficial social outcomes when harnessed to social policies for example in the development of day centres and sheltered housing. One of the main organisers of an initiative to develop sheltered housing and day care facilities in the environs of Rathbeg spoke about his reasons for taking on the task:

I saw lovely older people who felt in the way in their own homes … Rejection is the worst thing that can happen to anyone … I wanted to make sure people felt wanted again and never feel a nuisance. They feel they are important now – instead of a nursing home they got a new life and made new friends.

An impressive day care and residential facility has resulted from the vision, commitment and energy of this informant and other volunteers in Rathbeg. Being connected through social activities, helping activities and voluntary activities was associated with satisfaction with life and sense of purpose. Informal and formal helping were key aspects of connectedness that contributed to satisfaction and enjoyment of life for givers and recipients alike.

**Intermediate level groups**

In addition to one-to-one friendships that were supportive and helped people to ‘get by’ we observed friendship among members of clubs and social groups in Rathmore and Rathbeg. Such friendships were characterised by sociability and fun as well as by a sense of sense of openness to the lives of others and of social concern. Many volunteers and members of Senior Citizens’ clubs, Active Retirement Associations,
church groups and community groups displayed fellow feeling, kindness and a sense of obligation towards others. For example members of an ARA in Rathmore were said to be always supportive and protective of a member who was developing symptoms of Alzheimer’s disease by encouraging them to continue to participate in activities and then looking after them unobtrusively on social outings and holidays. These elements of friendship appear closer to the traditional idea of friendship than some contemporary accounts of friendship that stress intimacy. Bellah et al. remind us that the traditional idea of friendship as developed by Aristotle and Cicero and understood in the Christian concept of ‘personhood’ involves an essential moral component:

It is worth remembering that the traditional idea of friendship has three essential components. Friends must enjoy one another’s company, they must be useful to one another, and they must share a common commitment to the good ... For Aristotle and his successors it was precisely the moral component of friendship that made it the indispensable basis of a good society. For it is one of the main duties of friends to help one another to be better persons: one must hold up a standard for one’s friend and be able to count on a true friend to do likewise. (Bellah et al., 1996: 115).

Activities such as volunteering and informal helping involve communicating an agreed set of expectations about appropriate standards of behaviour and help to create a more habitable social world. Some older people stood out as ‘creators of community’ in both their everyday interactions and their broader social concern for others in the wider community. The idea of ‘good example’ was suggested by the lives of many individuals who were exemplars of positive neighbouring and the recognition that many people gave to the work of such individuals suggested that positive communal actions had ripple effects. Putnam has emphasised the interactive effects between friendship, reciprocities and good example in his discussion of the ripple effects of ‘doing good’:

Volunteering fosters more volunteering, in both formal and informal settings … studies have shown that (with other social and personality traits held constant) people who have received help are themselves more likely to help others, so that simple acts of kindness have a ripple effect. In short, giving, volunteering, and joining are mutually reinforcing and habit-forming – as Tocqueville put it, “the habits of the heart” (Putnam, 2000: 121-122).
Charles Taylor the moral philosopher argued that a sense of what is good needs to be articulated and given expression so that people can have possibilities for making moral choices (Taylor, 2000). A vision of what was good was articulated in many of the groups common in communities. Positive moral orientations were also expressed through common cultural practices such as greeting others, interactions at funerals, helping at times of difficulty and so on. Intermediate level groups such as Active retirement associations, clubs, special interest groups, voluntary and church groups facilitated positive relationships and friendships and older people themselves were actively involved in co-creating these forms of sociality.

**Summary**

1. Religious practice was strong and significant among the older adults in this study. Older people were essential to the functioning of local churches and church-based voluntary work. However, concern was expressed that the cohesiveness provided in the past through the churches may not be present in the future.

2. What constituted a good life for older people in the study were interactions involving family, neighbours and friends in communal settings.

3. Engaging with others through common interests, social activities and helping activities were all intertwined and often bound within a strong Christian and humanitarian commitment.

4. The contribution made by individual older people was very significant. While some stood out in terms of their voluntary and community work, it was not necessary to be a social activist to positively influence the lives of others. Small meaningful interactions enhanced the lives of older people involved in such reciprocities.

5. Intermediate level groups including clubs, church groups, voluntary groups and special interest groups provided important contexts for positive sociality and promoted a sense of self and of community.
Soul Searching: Spirituality and Ageing - The Age Concern Experience

Gerry Burke

‘If you want to steal some money, don’t rob a bank – open one’ (Bertholt Brecht). I use this interesting quote from the great Communist playwright because it illustrates levels of meaning. There is the play on words, the context of his philosophical and political beliefs, the humour, and a take on the truth! When I was asked to make a presentation about the work of Age Concern in England on spirituality and ageing I looked for a way of expressing our general approach, which is to do with the understandings of ‘meaning in life’ in a diverse society. It was, therefore, important to acknowledge that words, concepts, traditions and practice in spirituality are complex, diverse and, to some degree, divisive.

What is Age Concern?
Age Concern in England is a federation of four hundred charities, all using the name and working to a single quality framework in their activities for the benefit of all older people. In one form or another it has been in existence since the early days of the Second World War; it has a presence throughout the United Kingdom with similar organisations operating in N Ireland, Scotland and Wales. There are links with other organisations, also using the name, in other parts of the world (e.g. Age Concern New Zealand, Age Concern Ukraine).

Religion in Britain
The total population of England, Scotland and Wales is 57 million (Census, 2001). As stated in responses, this includes 41 million Christians (72%), 3 million non-Christians (5%), 8.5 million no religion (15%) and 4 million religion not-stated (8%). This presents a challenge to those who have alleged that Britain is a secular society, at the very least in attempting to understand what people meant when they ticked the box marked ‘Christian’. In a survey carried out by the Home Office in the same year as the census there are even more interesting figures, comparing the religious profiles
(within the main religions) of those under-35 and those over-65, and the no-religion category.

\[
\begin{align*}
\text{Under 35s} & \\
\text{Christians & Jews} & 18\% & \text{Muslims} & 34\% \\
\text{Sikhs} & 25\% & \text{Hindus} & 21\% \\
\text{No religion} & 23\% \\
\text{Over 65s} & \\
\text{Christians & Jews} & 20\% & \text{Muslims} & 3\% \\
\text{Hindus} & 8\% & \text{Sikhs} & 8\% \\
\text{No religion} & 5\%
\end{align*}
\]

It is clear that the twenty-first century is witnessing a sharp decline in religious allegiance amongst the younger generation, of every tradition: a quarter of under-35s state ‘no religion’ compared to only 5% of those over 65. The other figures show the increasing numbers of those of non-Christian faiths, reflecting the growth in the immigrant population and the comparatively low numbers of older people, the generation which first arrived.

\textbf{Spirituality and Religion}

Active participation in the life and worship of religions may be low in the emerging generations of younger people, but it is important to reflect on the change in religious activity over the last fifty years. In the 1950s we know from studies such as Grace Davie’s ‘Religion in Britain since 1945’ (Davie, 1994) that around 50 per cent of the population of Britain engaged in some form of religious activity on a weekly basis (not necessarily attendance at a church on Sunday). In the late 1990s this figure had decreased to around 10 per cent. Younger people today are largely untouched by religion except as information, spectacle or ritual; regular engagement with the expression of a faith is just not part of their lived experience. Davie also coined the phrase ‘believing without belonging’ to describe the attitude which results in 71 per cent of the British population prepared to admit to some form of belief in a God (Home Office Social Attitudes survey) whilst most of them have nothing to do with any form of organised religion. It is a fascinating mix of information, illustrating the ambivalence of the majority British population to all things religious. Attitudes to
religion are largely formed by indifference and ignorance – there is only residual knowledge of the central truths of Christianity. Teachers find themselves in a dilemma attempting to explain the scriptural and religious allusions and references in the great literature inherited from the ages of faith. At the same time, Britain is a place of stunning cultural and religious diversity; every form of belief is given its space. A worthwhile resource giving the range and variety of religious expression can be found in ‘Religions in the UK, Directory 2001-03’ (2001). A more recent feature is the suspicion and antagonism which has grown alongside the more visible presence of religions predominant in the Indian sub-continent and the Middle East, most particularly Islam. The religion itself is not a problem, rather the social and ideological consequences of larger numbers of its adherents taking a higher profile in the general life of the communities where they live. It is antagonism by association. It is not the first time this has happened, as people in Ireland know only too well.

There’s a wonderful sentence in ‘From the Road to Nab End’ by William Woodruff (2002) which for me summarises neatly the findings of the surveys. “My father didn’t care which church he belonged to – so long as he could stay away from it”.

Here is the simplicity of believing without belonging. It is explored in a recent book by Alan Billings, an Anglican priest working in the Lake District (2004). Billings had worked previously in an industrial city and has, therefore, seen the varieties of practice and non-practice of very different sections of the population. His point is that, whilst the majority of the indigenous British population has abandoned any pretence at active involvement in religion, the findings of the Census and other surveys are borne out when it comes to times of joy and sadness. People still arrive at the vicarage looking for christening or naming ceremonies, for weddings and, especially, for funerals. He does not try to make too much of this but asserts the continuing need of ordinary people to link to ‘something beyond themselves’ when it comes to moments of deep importance in their lives. He acknowledges that this is only relatively religious but maintains that it is specifically spiritual.

**Why is Age Concern interested?**

Age Concern declares its purpose to be the support of all older people in their search for fulfilment and happiness in life. It recognises that some people have settled religious, or agnostic, or humanist or atheistic views. It also acknowledges that many
people have doubts, confusions or yearnings for an elusive wholeness. Age Concern is interested in the whole person and her or his need: physical, psychological, social and spiritual. Age Concern is not alone in confronting the realities of each individual’s search for meaning in an unsettled world. So is the National Health Service in Britain, for example; the service which confronts issues of life, death and quality of living on a daily basis has recently issued guidelines for its staff on spiritual care. It is clear and unambiguous: spiritual care is an essential part of the whole care to be offered by medical, nursing and ancillary staff; it is not just for religious chaplains, it is for everyone. The guidelines, however, illustrate a dilemma in a multicultural and diverse society: how do you define ‘spiritual care’?

### Definitions of spirituality

Spirituality is a slippery word. Everyone who touches on the concept produces a definition, and some are more useful than others. Take for example the following:

*Spirituality as lived experience can be defined as conscious involvement in the project of life integration through self-transcendence towards the ultimate value one perceives.* (Sandra M Schneider’s, Dictionary of Christian Spirituality).

This is complex and not very accessible to the lay reader. I am not in any way criticising the intentions or the accuracy of the author but it is typical of many definitions found in the stacks of books on ‘Mind & Spirit’ which are beginning to litter the shelves of every bookshop.

Much better is this:

*Spirituality is that which gives meaning to life and allows us to participate in the larger whole.*

and

*Spirituality has to do with those intangibles that are nonetheless of vital importance to most human beings: values, relationships, and the discovery of meaning and purpose in life.* (Jewell, A., 1997)

In pursuit of an Age Concern attempt at a definition, I too have felt compelled to put something together for my own colleagues:
The spiritual is the part of living experience which cannot be immediately captured in words and images, but which expresses the deepest longings of every human for the fulfilment of emotional and intellectual fulfilment.

I have found this next, however, clear, simple and in language which speaks to the needs of the ordinary men and women Age Concern wants to help:

_Spirituality today is like an ache in the soul, a longing for more than meets the eye._ (Downey, M., 1997)

How can we be spiritual? Older people regularly express a need to reflect on their lives, if they have a chance; to settle their minds; to find a place, even if not acceptance, for evil and suffering; and to remember and celebrate the good they have experienced. This goes to the heart of the search for the spiritual in a secular sense. It does not require the benefit or the consolation of religion although these can be and often are of enormous help.

Spirituality is found in our ability to reflect:

- looking for meaning in our lives
- looking beyond the here and now
- looking for the wisdom of years
- looking into memory.

**Age Concern plans**

As a secular organisation, Age Concern is looking first at the needs of people without a religious belief or a close connection with a believing community; there are, as yet, few chaplains for the unbeliever! People without religious affiliation experience unwitting discrimination in their search for meaning in their lives; if they want to find a way of expressing their search it can be a lonely time.

Faith communities traditionally are understood to value the older members of their churches, synagogues, temples and mosques – at least, this is what we have been told. More recent studies suggest that this may not be the whole story (cf. Coleman et al 2004). Many older people who move to residential care, for example, lose all contact
with their community of belief; older people are viewed as recipients of concern rather than carriers of wisdom, in the sometimes desperate attempts to retain the interests of younger people. Age Concern is interested in finding ways of maintaining or restoring links between the older people it supports and the communities which have benefited from their membership over a lifetime. This will be a challenge to our workers.

It is the reason for our exploration of ways of offering training and support to our volunteers and paid staff. It is the reason for developing a set of standards in spiritual care to add to the other important expectations outlined for every Age Concern. Age Concerns are being asked to look at ways of making ‘soul space’ in their activities: quiet and reflective times during day care sessions, opportunities for reflective conversation and activity in domestic care; space within our buildings which will be seen as set aside for peaceful reflection. We are also producing a series of model ‘secular soul celebrations’ based on the seasons of the year, opportunities for people of all religions and none to come together to celebrate their common humanity.

Much work has been done on the importance of memory for people as they get older, not morbid dwelling on the past but more recognising what life has offered and how we have responded. This can cause grief as well as joy but it is not to be avoided. Age Concern wants to encourage older people to be fulfilled, as they are now, in sometimes very limited circumstances, by reflecting on what they have been able to give to their families, their friends, and their society. In this context, the words of an 86 year old American, Pearl Aiken, cannot be surpassed:

_They say it’s bad to live in the past. But what if you’ve had an interesting life? Maybe you like going back over it. Is that so terrible? For some reason, we’re always patting young people on the back, congratulating them, saying: ‘You’ve got your whole life in front of you’. But, since when is it better to look forward than to look back? A long past is a fine possession._
New Life in City Centre Dublin

The Reverend John Stephens

We live at a time of unprecedented change in Ireland. There is no part of life that has remained isolated from this change. During the last ten years the congregation of Dublin Central Mission (DCM) on Lower Abbey Street has witnessed the nature of our changing city more than most. At the beginning of the millennium the congregation was asking questions about its future. Over a long number of years the congregation had been in steady decline. It consisted primarily of an elderly group who were committed to the life of the church but were struggling to attract new members. DCM is the result of a merger between two churches over forty years ago. Abbey Street Methodist Church has had a worshipping presence on this site for almost 190 years. They have existed as a place of welcome for those who came to work in the city and lived above the shops or in close proximity to the city centre. Dublin Central Mission was originally established on Lower Great Georges Street and embraced the social concern of the churches prevalent at the end of the nineteenth century. It sought to provide practical support and Christian love to the many who were living in squalid conditions and distant from any church community. It embraced a practical Christianity whether this was buying a holiday home in Skerries to take children out of the smog and grime of the city and give them a holiday beside the sea, to buying a bog and cutting and distributing turf during the “Emergency”. Both congregations have a rich heritage of reaching beyond themselves.

Since the merger the focus of DCM had been towards care of the older person and it established one of the first sheltered housing complexes in the Republic in 1965, followed by the building of another housing complex and nursing home during the 1990's. In the midst of this work among the elderly there was the ongoing concern as to the future of city centre ministry. Rev. David Kerr (Superintendent of Belfast Central Mission) challenged the congregation to hear afresh the prophet Jeremiah (Jer. 29:7) when he called the Jews living in exile in Babylon “to pray for the prosperity of the city where God has placed you for if it prospers you to will prosper.” The congregation clearly felt that God's call was for them to remain in the city centre and
after making this decision things began to happen. Around the year 2000 an Indian couple and a Nigerian couple started to attend. They experienced a welcome and during the next year others began to arrive. During 2003 the congregation had grown principally through new residents to Ireland. At this time the congregation developed a project called "Welcoming the Stranger". With the help of some external funding they employed two people: one was to be a new attenders pastoral visitor. Her role was to provide support, advice and help to those who were new to the city. She worked to integrate the new arrivals into society and into the life of the church. The second person looked at the bigger picture concentrating on church and community. Her aim was to seek ways in which the church could have a ministry to those beyond its doors who were not looking to become part of the church community. Her initial work concentrated on the provision of services to asylum seekers and refugees. Having realised that there were a large number of charities, churches and NGO's already providing these services it was decided to focus on other areas. The most successful of these have been free English language conversation classes for new residents. These are run by volunteers from the church and beyond. They have been extensively used by people who have come to Dublin from the new accession states. Lunchtime parenting classes have also been organised for city centre workers. During the last year it has been particularly encouraging to see a Homeless Ministry develop within the congregation. This involves a group of around ten people from a variety of ethnic groups offering soup and sandwiches to the homeless in the city centre.

During the last six years as a result of the above and primarily because of the welcome offered the congregation has grown from 40 attending on a Sunday morning to around 120. Also the ethnic diversity within the congregation is truly amazing. It is about 25% Irish, 30% African, 20% Indian, 10 % Filipino, 5% Korean and 10% others. We set ourselves the aim to be a multi ethnic congregation with a multi ethnic leadership and a multi ethnic staff. This has been achieved. At one level the events of the last six or seven years have been truly remarkable. At another level it could be argued that to unlock the future Dublin Central Mission has rediscovered and reclaimed its past through these key concepts of being a place of welcome and showing a Christian concern for the stranger and the marginalized within our society.
Religious and Spiritual Values in Social Care: Concluding Thoughts

Judy Doyle and Carmel Gallagher

The papers presented in this publication have drawn on the knowledge, experiences and views of people with a particular interest in or a relevant perspective on the question of the place of religious and spiritual development in social care, particularly in relation to children in state care in Ireland. There are contributions from social care practitioners, religious leaders, academics and policy makers. All contributions point to the importance of acknowledging and supporting the religious and spiritual development of children and young people in state care. The papers challenge the interpretation and meaning of holistic care, and suggest that children’s needs and rights include the religious and spiritual dimension alongside other essential needs such as love and security, education, health and mental wellbeing. Furthermore, religious socialisation shapes the adults who work in social care services and whether explicitly or implicitly influences their value base and their professional approaches to their work.

As Ireland changes rapidly from a monocultural to a multicultural society the remit of the social care practitioner changes too, whose brief expands to cater for children from ethnic minority groups with different religious beliefs and cultural values. While cultural diversity can greatly enrich a society, it brings particular challenges for professionals involved in socio-educational work, not least in respect of instilling religious practices and beliefs. Parallel with these developments are the difficulties posed for social care practitioners who have been hurt and repulsed by the findings of many child abuse investigations and in particular the investigations involving the Catholic church in recent years. The withdrawal from participation in Catholic religious practices is well documented among significant numbers of the general population in Ireland. Hostility, uncertainty, ambiguity and disinterest in relation to formal religious practice are common among people who were baptised and brought up as Catholic and such orientations are common among social care practitioners.
Social care practitioners must be mindful that regardless of their own religious beliefs and practices, they must fulfil their professional obligations and work from an ethos of holistic care and protection of vulnerable children. Consequently, this publication poses ethical questions for practitioners. Although social care practitioners work within the remit of loco parentis, they are also obliged to work in the best interests of children and to adhere to the child’s family beliefs and norms, where appropriate and as much as possible. Where a social care practitioner is a non-practising or non-religious person, role confusion and blurred boundaries can occur, and ignoring the religious and spiritual development of a child can become a working norm.

The professional working relationship is difficult for social care practitioners in regard to questions of religious belief and practice. However, practitioners must be ever mindful that children living in care are not their children. Usually these children have families and at some point in their lives they will return home to live with their families of origin. The transition back to their families and communities can be difficult and it can be even more difficult if the child has been assimilated to the norms and values of the social care practitioner rather than to the appropriate norms and values of their own families. Through teamwork and ongoing evaluation of appropriate practices in residential care, practitioners must ensure that the religious and spiritual dimension of children’s lives is acknowledged and must determine how best to support this in the day to day lives of individual children. A key question for practitioners to ponder is that supporting the religious and spiritual development of children in state care may not be a matter of choice but a duty of care.

This publication highlights the significance of religious norms and values across the life span and the real meaning and value that older people derive from their religious beliefs and practices. It also highlights that even in societies which are more secularised than Ireland service providers need to take account of spiritual and religious needs of service users and find ways to respond to them. It can be argued, therefore, that unless the foundation seeds of religious beliefs and practices are sown in the early years people may not have the possibility of choosing or deriving satisfaction from religion and spirituality as they age. Some of the contributors make suggestions as to how this can be done to enhance the moral and spiritual development of the child. Furthermore, the Christian tradition whose central message
is love and respect for all human persons, especially those most in need, has been the wellspring from which many of Ireland’s services for vulnerable and marginalised groups have sprung. An example of how one Christian church has responded to the religious needs of immigrant communities is a reminder that residential care institutions must respond creatively to the religious and spiritual needs of both Irish and non national children alike.

In summary, social care practitioners must put the child or young person at the centre of their practice, they must be aware of their role in imparting religious and spiritual values, consciously or unconsciously, they must take a longitudinal view of a child’s religious and spiritual developmental needs and they must through the collective wisdom of work teams be open to the different ways in which religious and spiritual development and growth can be fostered.
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