The Spirituality of Welfare Practitioners in Social Service for the Elderly in Indonesia

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Abstract

Social services for the aged in Indonesia still revolve around psychosocial approach regardless of other relevant dimensions, such as spirituality. The quality of service is influenced by interaction between the elders and welfare practitioners, but it seems that spirituality of the later will mostly shape the service. Therefore, this study aims to explore how the practitioners understand spirituality and how it is implemented in practice with clients. This qualitative study recruited nine practitioners delivering services for elders in both institutional and home care setting. NVivo software was used to organize data and coding results that can be simply retrieved for analysis process. This study finds that the practitioners actually have their own view point and practices of spirituality enlightened either by religion or non-religion. Such living spirituality is practiced daily but is not explicitly and consciously used in their interactions with elderly clients. By constructivist grounded theory, several themes constructed from practitioners' views and actions are as follows: meanings of spirituality, religious affiliations and practices, meaning making and benefit finding, beliefs and values, motivation to be practitioner, and spiritual assessment and intervention.

Keywords: Spirituality, elderly, practitioners, grounded theory.

I. INTRODUCTION

Indonesia has experienced an ageing population along with social, economic, and cultural changes (Noveria, 2006). This combination can affect the well-being of older people, in turn. Like in Asia-Pacific regions, Phillips (2000) says, the government has limited capability, while society is uncertain in providing social services for them. Family members who are supposed to take care of their elders cannot give adequate attention because of a busy life or economic difficulties, for instance. As a result, the care will be taken by welfare practitioners who mostly have no family relationship.

The existing care practices for the frail elderly are still dominated by the psychosocial approach regardless of other relevant dimensions, such as spirituality and religion. Spiritual beliefs and practices of the age, that indeed be the strength to address their problems, are frequently ignored. Likewise, there is an emerging need to implement a holistic approach which is also supported by the fact that the term spiritual is explicitly stated in Law of social welfare (UU No. 11/2009) and social welfare for the aged (UU No. 13/1998).

In Indonesia, research and publication on spirituality, particularly social service for older persons, are limited. So far this issue is still restricted to claims of scholars or bureaucrats. Andayani (2010) in her article notes that religion is highly relevant in daily life. Ironically, she says, this fact is not followed up by research and discussion that may result in a spiritually sensitive approach or intervention. Moreover, the spiritual based practice has been implemented by many social service agencies, although in a traditional way. Similarly,

Fahrudin (2005) encourages social workers to start exploring theoretical and practical matters on spirituality and religiousness indigenously that best suit multicultural Indonesian society.

It is necessary to note that the quality of social service is highly influenced by the interaction of practitioner-client. In an interactional paradigm, as proposed by Shulman (1991) to challenge medical paradigm, process and interaction between the social worker and the client will determine the practice outcome. In the involvement of spirituality and religion, each point of view and experience will, of course, shape the practice. On the one hand, elderly clients have passed through life phases and experiences that will colour the way they cope and answer existential queries that emerge from themselves. Most of them will look after the answers to religion or surrender all to God. On the other hand, most practitioners are still young, may have a different point of view and life experiences, and have no family relationship with clients. These disparities will shape the service provision.

The reasons raised by MacKinlay (2004a) to study ageing spirituality can perhaps support the way of thinking of this research. Firstly, religious experiences between the older persons and the younger are different. Secondly, due to the maturity level, their faith development is also dissimilar with the practitioners. In involving spirituality to social work, according to McKernan (2007), efforts to understanding practitioners' spirituality will be better than just assessing clients' spirituality. The reason is that the form of social work practice involving such subjective experience will be shaped by practitioners' faith and beliefs. Likewise, Barker (2008) has also explored how social workers understand spirituality and how it is used in practice.

It is no doubt that in Indonesia spirituality is an emerging issue and has a significant role to attain well-being condition for the aged. The problem is the scarcity of theories and the inadequacy of practical guides in the context of Indonesian society, particularly for those who identify spirituality as an issue in social work. Such condition not only happens in this country but also does in the Western context, as recognized by Hodge (2011), that most practitioners have not been sufficiently skilled how to use spiritual interventions. This research is expected to contribute to fulfilling the gap. For this reason, this research will focus on answering two main questions: how the practitioners understand spirituality and how it is implemented in practice with clients.

It is necessary to note that social service for the aged in Indonesia is primarily handled by the Ministry of Social Affairs. This Ministry much promotes using social work approach, although there are many institutions, owned by both the government and non-government stakeholders, delivering social services for the elderly with various kinds of social care, such as social security, health service, financial assistance, feeding service, home care, and daycare. Therefore, this research is much concerned with social work domain.

II. METHODOLOGY

This research used a qualitative method aiming at drawing the complexity of personal understanding and experiences concerning spirituality. This method is expected to bring about complete description and understanding (Nelson, 2009) that cannot be simply analyzed and conceptualized by scientific language and approach (Swinton, 2001). Besides, the subjective meanings of practitioners can be deeply achieved by means of constructivist assumptions

(Cresswell, 2009). Constructivist paradigm is one of four main paradigms in research according to ontological, epistemological, and methodological aspects (Guba & Lincoln, 1994).

Due to the research goal and paradigm, this study is suitable to use grounded theory which was originally introduced by Glaser and Strauss (1967). This method, some say strategy, was used since it is a promising method to develop social work theory and knowledge (Sherman & Reid, 1994); can be a stimulus for the research conducted hand in hand with social work practice (Shaw & Gould, 2001); and is a revolution in qualitative research (Denzin & Lincoln, 1994). This iterative and recursive approach (Bryman, 2008) is also helpful to develop social work knowledge particularly in the domain of direct practice (Gilgun, 1994).

To outreach informants, the first step was mapping and contacting several institutions in DKI Jakarta and its surrounding dealing with elderly people. Several agencies were cancelled to be the objects of this research because some of them had been disappeared or might be moved to another place that cannot be traced further. Some others were because of bureaucratic reason, the unclarity of whether this research would be allowed or not, or the lack of practitioners with social work background. In result, it remained four institutions that could be followed up, i.e., two state-owned institutions (nursing home) and two private institutions (nursing home and home care setting).

The researchers found the fact that there were limited practitioners delivering services for the aged. Some state-owned institutions, even, did not have professional social workers. Moreover, it was hard to find practitioners who work in a community-based setting, especially in-home care. For this reason, the criteria for practitioners working in nursing homes should have social work education. While for home carers, they should still have social work competencies through merely from a series of training or technical guidance.

Some practitioners that were suitable with the criteria seemed reluctant to participate, especially those who worked in state-owned institutions. Perhaps, it was because they assumed that the interview is like a test to their knowledge and skills. In fact, the researchers occasionally made them sure that this research is aimed to explore what they understand and how they do in interaction with clients in relation to spirituality. Moreover, there was a fact that one nursing home prohibited their carers to participate in this research. Eventually, based on the above criteria, this research purposively recruited nine practitioners coming from nursing home (five informants) and home care service (four). In terms of gender, they are seven women and two men, while their educational background varies from junior high school to social work specialist (postgraduate level).

Document review, observation, and interview were used to collect data. A series of interviews were conducted using an interview guide with several revisions. The interview was conducted when there had been a rapport between practitioners and informants. Each interview took about 30 to 70 minutes and some were paused because of one thing or another. In the process of the interview, the researchers opened possibilities to interact with informants by way of affirming, correcting, responding, probing, or somehow rearticulating questions through different modes.

By probing, it means that the researchers tried to deepen certain aspects and seek, investigate, or predict informants' responses. For example, the term spiritual or spirituality was probed with more familiar terms, such as ruhani or ruhaniyah and batin or batiniyiah (from Arabic terms).

To illustrate, in exploring the meaning of spirituality in informants' perspective, the researcher firstly raises an open question, broken down from the first research question, "When did you hear the term spiritual or spirituality? What does it mean according to you?" The researchers then tried to probe with other terms that could be more familiar in their ears as previously stated.

Interview transcripts were analyzed through four phases according to constructivist grounded theory as formalized by Charmaz (2006): initial, focused, axial, and theoretical coding. These phases are modified from the three major types of coding as developed by Strauss and Corbin (1998), i.e., open, axial, and selective coding. The coding process was also aided with a qualitative data software, namely QSR NVivo, to organize coded data that classified into various themes or categories in such a way that patterns and relationships between categories/sub-categories are interestingly highlighted.

Even though there was no ethics committee in our study program, it does not mean that this research had no ethical consideration. Prior to fieldwork, the researchers had to pass through a range of proposal examinations for which the ethical concerns of this research were examined by three to five experts. For example, informed consent and voluntary participation for all informants were ensured. Overt observations (Patton, 2002) were also conducted by way of disclosing our self-identity as researchers to avoid deceiving subjects (Rubin & Babbie, 2001). Another issue was also emphasized that the spiritual aspects held by informants were occasionally explored through the life experiences that could be hard for them. Therefore, researchers tried to avoid raising their traumatic feeling. Besides, during the interview the researchers kept sensitivity and respect to their religious faith and values, without testing or judging their worldviews and pretending to teach them.

III. RESULTS AND ANALYSIS

Based on the coding process with NVivo software, 171 references are representing the first question, i.e., how practitioners understand spirituality. Those references are grouped into nine nodes or themes. They are then grouped into five categories as follows: meanings of spirituality, religious affiliations and practices, beliefs and values, meaning-making and benefit finding, and other minor components of spirituality that were less expressed by informants, such as relationships, sources of inspiration, and hope and fear. While the second question, i.e., how practitioners implement their understanding of spirituality, are reflected in 175 references which are grouped into six nodes. The six themes are then combined into four categories: motivation to serve the elderly, ethical principles, spiritual assessment, and spiritual intervention. Some of these findings will be explained in a bit more details.

The term spirituality is like an airy-fairy notion for Indonesian welfare practitioners. Because this term is not pretty familiar in their ears, their spirituality was not only explored from their perspectives, or say, how far they acknowledge and comprehend its meaning, but also from how it is conducted in daily life, in forms of faith and beliefs, attitude or manner, and deeds.

Practitioners' perspective of spirituality cannot be separated from common perception handled by society. From the exploration, spirituality is acknowledged by most practitioners as not so far from the concept of mental, religion or religiousness, piety, morals, and vertical relationship with God. Some other informants recognize this dimension as the inner aspect of human and

intrinsic motivation, though it seems that this recognition was the result from informants' interaction with interviewers at which they want an example or illustration in relation to spirituality.

In the context of social service, their perspective on spirituality is normally influenced by education and agency policies in which they work for. Nevertheless, the finding results show that there is no significant difference with the above commonsense. It is not surprising because since the beginning the researcher realizes that spirituality has not yet become an important issue in social work. That is why this research is not pretended to conceptualize the findings as Canda (1986) has resulted in a comprehensive conceptualization of spirituality.

Briefly, a spirituality that is comprehended by practitioners refers much to religious rituals and several expressions of spirituality. It seems that policies of social service for the aged have some impacts, though a little. For example, in the Law of social service for the aged, one of the efforts to improve the well-being of vulnerable elderly persons is religious and mental-spiritual service. The government rule (PP No. 43/2004) explaining the Law insists that forms of the service include religious guidance and providing means for religious activities.

The category of meaning-making and benefit finding results from the exploration of informants' life experiences. Loss and grief, for instance, happened in the past or sufferings that last are responded with positive meaning and coping. Most informants see that everything experienced is a fate that should be faced with the patient, sincere, and even feeling grateful. Moreover, hardships experienced are such a test or a reminder from God that must have a benefit. An invivo coding, quoted from one informant, that reflects this category is "behind a test there is a benefit (hikmah)."

Based on the above category, as the answer to the first research question, most practitioners did not conceptually articulate the meaning of spirituality. In other words, they drew it with a bit simple words, unlike the Western practitioners with a kind of sophisticated abstracts. But, it does not mean that spirituality is not contained within themselves. The spirituality that they hold is not comprehended nor defined, but it is just implemented. Such living spirituality is enlightened by both religion and non-religion.

From a series of interviews, their motivation to help older adults varies from dedicated to work, concerned with humanity, having social care, to religious motivation for the sake of God without expecting the rewards (lillâhita'âla) or entitlement. These motivations are very important in colouring the practice that will be discussed later.

Two important categories emerging from the exploration of how the practitioners use spirituality in practice with elderly clients are spiritual assessment and intervention. Related to the first category, the researchers tried to trace client records concerning religious and spiritual aspects of clients, especially those who were candidates of this research informant. But it just found clients' formal religion and religious living, such as rituals, prayers, scripture reading, and the way they conduct the rituals. It was hard to find records concerning clients' spirituality revolving around meaning-making, faith development, beliefs and values, the search for the answer of existential inquiries rising from themselves, and the like.

During the interview, practitioners barely touch on examples of methods or instruments for spiritual assessment to explore spiritual understanding and experienced by older adults. It is not exaggerated to say that the informants are still not familiar with well-known methods of spiritual intervention. For example, David Hodge has developed qualitative instruments, i.e., spiritual map and spiritual genogram (Hodge, 2001a; 2001b). In a nutshell, to what extent spirituality is expressed in interaction as well as in assessment depends on the practitioners' understanding and capability to articulate.

Due to the limitation of the spiritual assessment conducted by practitioners, the researcher explored more on how they do it in practice. Older individuals' understanding of spirituality to some extent had been explored but not recorded in good documentations. There were at least two main interesting concepts regarding spiritual assessment among practitioners. The first is a continuum, intensive assessment involving multidisciplinary disciplines. This assessment is conducted sustainably through intensive interaction with elderly. According to an informant, the outcome of initial assessment frequently cannot uncover the real elderly problems and particular individual factors in depth. These matters can be well explored by means of continuous assessment and intensive interaction. And, the depth of spirituality in assessment depends heavily on the living spirituality of practitioners together with relevant spiritual components. The second is the way practitioners touch on spiritual ageing. Some avoid to start communicating directly about this matter, unless the elders themselves start speaking.

The next after assessment is intervention plan and its implementation. Assessment and intervention occasionally are not separated phases, but it is possible to conduct these two phases in the same time. Even an assessment can be a part of intervention itself. The main technique commonly used by practitioners is listening to clients' story and moans, though repetitive. Some informants said that this method cannot be done in an instant way, but in a series of intensive interactions in such a way that the clients can freely speak out their problems. Besides, an intervention can be conducted if a rapport and trust have been built so that they feel comfortable to disclose themselves.

Types of intervention regarded by practitioners as using spiritual and religious approach are diverse, depending on the condition of the elders and to some extent the rapport has been developed. The examples are as follows: reminding, asking or inviting, giving advices, accompanying, and teaching them in doing prayers, praying (doa), or proclaiming repeatedly the name and attributes of God (dzikir). Some of the informants said that they often accompany their clients in religious speeches. All types of the interventions were done by way of asking and steering them with full attention, affection, patience, tough, and natural informal ways.

In relation to doa, it is interesting to explain in brief about a concept conceived by a social work specialist. In her perspective, praying means a wholehearted effort to make a connection between God, the client, and the one who is prayed. What the client pray will be heard by God and then, if He will, answer the pray for the one who is prayed. She also frequently explained this concept to clients while tried to raise their self-awareness that perhaps the suffering experienced by them right now is the consequence of what they did in the past. Such effort was intended to make the clients to be able to reflect and correct themselves. The expectation is that they will do a lot of good deeds, asking forgiveness to God (istighfâr), and the like, so that they can make a better relationship with their family.

A number of practitioners stated that what they conduct in intervention is just common standard ways, not specific techniques. An informant of sate-worked social worker exemplified giving support to the elderly client and speaking of religious duties as a Moslem, for instance, in ways that avoid an impression to dictate or coerce them. The support giving is also regarded as more effective and easily accepted if given individually, rather than collectively within a group or through speech.

To avoid refusal from an informant because of the past factor or another, a practitioner will not come into client by directly speaking of religious matters. But, she tried to use such a reflective or reciprocal approach by way of raising clients' self-awareness through common sensing. She called it as a 'humane' or 'genuine' approach. She also gave examples as follows: "Let you think about, (as an older adult) is it appropriate for you to do this?" or "As if you still do that, I think, it's not a good example for us as the younger."

IV. DISCUSSION

As previously explained in the study finding, most practitioners are likely to be more familiar with the term spiritual and consider this terms about similar with spirituality. By referring to some literatures, these terms indeed have different meaning. The term spiritual means something immaterial (Bagus, 2000) or connected with the spirit, the sacred (Hendrawan, 2009). In Swinton's (2001) opinion, the spirit has a close relationship with spirituality, but not the same. For Swinton, "the human spirit is the essential life-force that undergirds, motivates and vitalizes human existence". When the experience of the spirit is responded by persons or groups in some way, Swinton says, the certain way is called as spirituality.

As in the research finding, spirituality is lived by practitioners and is much expressed in religious teachings and traditions conducted either individually or collectively with community. Besides, the terms spirituality and religion (or religiosity as well as religiousness) are often used interchangeably. However, it is interesting to note that, as explained by Pargament (2007), the term religiousness previously had about the same meaning with spirituality today. Furthermore, Pargament notes that in defining spirituality most recent psychologists prefer to use the classic definition of religion according to William James, an American pragmatist and prominent psychologist. James (1958) defines religion as "the feelings, acts, and experiences of individual men in their solitude, so far as they apprehend themselves to stand in relation to whatever they may consider the divine".

Consequently, such preference will influence whether the concept of spirituality is broader than religion or, the other way around, spirituality is involved in the vast concept of religion as defined by James. Such distinction is reflected in different scholar traditions in North America and Europe. To put simply, Pargament and a lot of American scholars use James' definition so that, as Pargament (1999) notes, spirituality becomes a part of religion since the meaning of religion involves the divine or the sacred. On the contrary, Stifoss-Hanssen (1999), as the representative of European scholars, sees spirituality as a broader concept that include the meaning of religion. For further reference, the difference and connection between spirituality and religion is well explained by Nelson (2009).

Indonesian scholars at large are more accustomed with the term religiousness or religiosity rather than the term spirituality, but some are vice versa. To name a few, the priest Mudji

defines religiosity as the inner awareness of human to values and life purpose that which the process depends on their relationship with God (Sutrisno, 2012). So it seems that the meaning of religiosity in accordance with the priest partly represents that of spirituality which is indeed much more broader than religion with certain overlapping, as held by this research.

On the other hand, Komaruddin Hidayat frequently use the term spirituality together with religiosity, religiousness, and moral or morality. A number of his works, for example in Hidayat (2009; 2012; 2013), intensely touch these terms by taking existential issues, such as death, dying, illness, sufferings, alienation, mystical experiences, meaningful life, and happiness. Based on his works, it can be inferred that spirituality can be sourced both from religion and non-religion. Moreover, the term spirituality is not easy to define since it covers a very huge domain. Therefore, it seems that he would prefer to take many daily humanity issues in drawing spirituality. In short, Hidayat says that spirituality is not supposed to be a merely object of study, but it should be placed on the central position as "the heart of faith and religiousness" (Hidayat, 2013).

Actually, spirituality is recognized and defined variously from time to time. Gall et al. (2011) note that the understanding of this term as well as religiousness depends on a number of factors such as religious heritage, culture, generation, and nationality. In social work, this dimension is understood around the search of meaning, life purpose, connectedness, and transcendence. Some experts like Sue Spencer (Hugen, 2001), Max Siporin, and Edward Canda (Canda, 1986) comprehend that spirituality can be expressed both in religious and non-religious traditions.

Such a common understanding is still also handled by a number of experts and authors of social work in years after. The themes or components in the definition of spirituality that emerge at most are the search for meaning and life purpose, relationships or connectedness, and the sacred (Sheridan, 2009; Canda & Furman, 1999 &2010; Miley, 1992 in Zastrow, 2004; Hodge, 2001b; Reed, 1992 in Lydon-Lam, 2012; Swinton & Pattison, 2001 in Gilbert, 2007; and Lindsay, 2002 in Healy, 2005). Other themes that come along in relation to spirituality are transcendence, spirit, values, and existence.

Meaning, purpose, and values, as stated by Kirst-Ashman and Hull, Jr. (2006), is related to something beyond physical boundaries and connecting individuals to something bigger and higher than themselves. Meanwhile, the sacred is partly referred to "ideas of God, higher powers, divinity, and transcendent reality" (Pargament, 2007). As noted by Atchley (2008), the concept of the sacred can also be taken from non-deistic ideas; personified concepts of God in Judaism, Christianity, and Islam; as well as naturalistic concepts of indigenous people.

In addition, the conception that spirituality can be articulated in both religious and non-religious contexts is also gripped by Sheridan (2008; 2009), Canda (1986), Swinton and Pattison (2001) in Gilbert (2007), Canda and Furman (1999; 2010). Some experts from out of social work area that are frequently quoted also have the same conception, e.g., Atchley (1997); Koenig et al. (2001) in Lydon-Lam (2012); Hill and Pargament (2003) in Lavretsky (2010); Pargament (2007) and Hugueletand Koenig (2009).

1. The Care Practice

The living spirituality of practitioners is influenced and reflected in a number of concepts or themes that successfully explored and constructed. Among others, these are religious affiliations and practice, beliefs and values, life experiences and meaning making, and other components of spirituality. This research makes living spirituality, made up of these components, as the central of the care practice. This is not something new since Canda and Furman (2010) had previously done by way of making spiritual diversity as the heart of helping in social work practice.
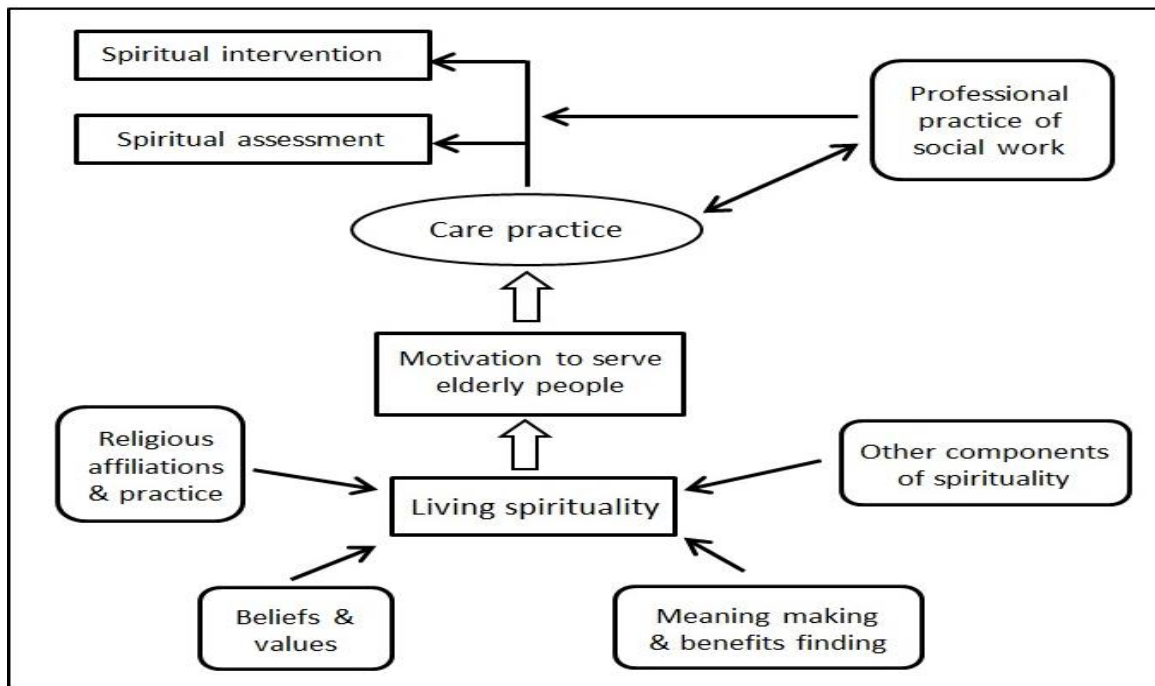
Figure 1: The care practice shaped by living spirituality

As shown in the figure, living spirituality will in turn influence directly or indirectly the care practice for the aged. For instance, the concept of meaning making and benefits finding can shape the interaction of practitioner-client and what kind of intervention looks like. For most practitioners, life experiences passed through are believed as God's fate and regarded as a test. Such belief and the way they responded might be projected in dealing with the elderly. Based on their life experiences, the practitioners know how to give empathy to the elderly sufferings; recognize their difficulties; treat them as like their parents; and offer the way out of their problems. These things sometimes are not taught in social work education and trainings, but rather their experiences have a significant role how to cope with the older persons.

For the practitioners having social work background, involving spirituality in their practice may cause a problem with the professional practice of social work. To illustrate, living spirituality with a number of spirituality components above are influential to shape how the welfare practitioners are motivated to deliver services. In relation to the personal motivation, it is interesting to note that almost all informants regard the clients as their own parents or grand-mothers/fathers. On the one hand, considering the elderly clients as relatives will exactly intensify the interaction of the practitioners-clients, amplify the clients' trust to practitioners,

and in turn make the service provision more effectively. But, on the other hand, it means that their motivation has involved their emotional and personal feelings.

Such condition is probably considered as a violation to ethical principles in terms of conventional social work that is still employing the medical paradigm. The reason is that personal and subjective feelings have trespassed professional practice. According to Shulman (1991), this paradigm rules that professional helping excludes the process that which social work is expected to influence intervention. An intervention is considered as the outcome of a complete inquiry and diagnosis. Medical social work practice uses "three-step diagnostic paradigm" (that is diagnosis–treatment–evaluation) focusing more on exploring the client rather than understanding the interaction of practitioner-client. In other words, this paradigm emphasizes much on the client's problem or deficit (pathological), while their strength is somewhat neglected. Moreover, such a way of thinking is dictated by the dichotomy or dualism of professional and personal manner. It means that a worker should behave differently as an individual compared to when he/she is dealing with the client that is supposed to perform professional attitudes.

Concerning the dualism of a worker as either professional or personal, it could be a problem for the motivation to serve the elderly in a personal manner or with religious enthusiasm as explained above. Hence, spirituality looks like incoherence with social work profession that should firmly hold on code of ethics. But, Shulman (1991) who promotes an interactional paradigm, says that with the dualism of personal and professional conducts, indeed social workers do not practice another ethical principle such as genuineness and spontaneity in interaction with client. The tension between personal and professional values was found by Canda (1986) in his research but he prefers to address this concern by looking for the congruence between the two. Barker (2008) in her research also tried to address "the fit between spirituality and professional social work" under certain contexts as practiced by social workers.

Another problem that may emerge among practitioners with social work background is related to the coherence between spirituality and social work. The coherence between the two domains was acknowledged by a number of practitioners having social work background.

An informant said that the motivation to deliver social service for the frail elderly is personal, but the profession of social work can be in line with and even cannot be separated from personal values and beliefs due to inner force involvement. Additionally, the informant who have educational background in social work and religion as well insisted that social work values and ethics are suitable with spirituality and religion. It is necessary to note that she is not really concerned with the difference of spirituality and religion, otherwise the two aspects are identical for her. In her opinion, the reason of the suitability is that religion is not only all about the vertical relationship of men and God, but also the horizontal interpersonal relationship (mu'âmalah). While, the helping profession is well linked with the issue of humanity, particularly social provision.

Religion is... to serve humanity, (so) it is firmly appropriate. ... Religion is not something high in the sky, but .... (it) should be about how it can be implemented in daily life and coloured with social work knowledge. ... So that religion... is supposed to be down to earth, that's it. ... And, religion is also not only confined to general duties, (such as) prayer, zakât (the alms tax), and the like, but also other social duties that should be conducted.

2. Spiritual Assessment and Intervention

As explained above, spiritual assessment conducted by most practitioners is just based on commonsense ways. They did not make use of particular techniques like several methods introduced by Hodge or a number of methods for certain contexts and clients. To mention some, a method developed by Mohr and Huguelet (2009) is fairly relevant for clients with severe illness. Nichols and Hunt (2011) exemplify some explorative questions to dig the spirituality of chronic illness sufferers.

Despite unsystematic, to some extent it looks suitable with a model scheme of spiritual assessment offered by Moore (2003). In the same way, one of the principles of evidence-based practice*a la*Hodge (2011) speaks of how to practice spirituality-based intervention in ethical and professional way. The first thing to do is to make sure, by means of assessment, whether spirituality is relevant for clients and they show their interest. It should be convinced with an informed consent understood as a continuous process that can be cancelled by the client at any time.

The suitability is related to the relevance of spirituality for clients by way of considering whether it is the practitioner who ask to client about religion and spirituality or the other way around. In short, the fit between the practitioners' methods and the experts' can create new modifications of spiritual assessment that are better to implement for the Indonesian context.

All techniques previously explained in the study result, whether or not the practitioners considered them as religious-spiritual based methods, might be included in spiritual intervention. As Canda and Furman (1999; 2010) note that indeed any type of intervention in social work can be used in spiritual practice as long as it is done in the frames of values and helping profession context that are spiritually sensitive. The main thing is that the practitioners have to be conscious and intentional of spirituality in doing practice, although it should not explicitly start speaking with clients.

In line with the above explanation, David Hodge, as quoted in Hodge (2011), defines spiritual intervention as "therapeutic strategies that incorporate a spiritual or religious dimension as a central of the intervention" (p. 149). A lot of techniques and therapeutic methods using spiritual intervention have been made by many experts. Holloway (2007) exemplifies Canda and Furman; Furman et al.; Gilligan, Gilligan and Furness; Burton (pastoral theology); Fowler (spiritual development and review); Rumbold (the continuum of 'helplessness and hope'); Nouwen and Campbell ('wounded healer' and 'fellow traveler'); Thompson (existential searching); as well as Neimeyer and Anderson (meaning reconstruction). Among these examples, Holloway considers that the work of Canda and Furman is the most complete and detail. In their book, Spiritual Diversity in Social Work Practice (published in 1999 and had been revised in 2010), Canda and Furman do elaborate complete examples of helping techniques that are spiritually oriented, varying from practice with individual, family, group, to organization and community.

In Asia, the Center on Behavioral Health in Hong Kong has also developed therapeutic techniques, namely "Integrative Body-Mind-Spirit Social Work", which is integrated with the Eastern philosophies, primarily Chinese (Lee et al., 2009). In implementation, Ho et al. (2009), for instance, conducted a quantitative research in 2004. Their research examines the

effectiveness of the care for women with breast cancer by means of an Integrative Body-Mind-Spirit (IBMS) model compared with Social Support Group (SS Group) approach. In result, the group of women handled with IBMS model showed a better improvement in terms of psychosocial aspects rather than those with SS Group.

By referring to the above concept and intervention techniques, this research constructs practitioners' experiences in several categories that are classified into spiritual dimension of elderly problems, spiritual tasks or needs of ageing, and spiritual intervention. By the first classification, it means various issues experienced by the elderly having spiritual nuances or caused by spiritual-religious problems. As a notice, the elderly issues are based on practitioners' perspectives, not the clients themselves.

Meanwhile, spiritual tasks or needs of ageing can borrow MacKinlay's (2006) explanation in referring Erikson in relation to psychosocial development. She notes that "the 'tasks' are not simply tasks that the person completes and then moves on". In other words, Mathews (2009) also explains, spiritual task is not a phase or task that should be completed before dying. The tasks should not also be serial, but overlapped phases that can happen again or, even, be revised through a number of chances and life events. Mackinlay (2006) names it as "the process of becoming" which is experienced by each person.

Therefore, kinds of tasks or needs here much refer to the concepts developed by some experts. From the spiritual problems of the elderly problems and spiritual tasks, various examples of intervention that are spiritually sensitive will be raised in the table below.

Table 1: Examples of spiritual intervention based on spiritual tasks and the elderly problems containing spiritual dimension

The Elderly Problems	Spiritual Tasks of Ageing	Examples of Spiritual Intervention
Distressed, depressed, hopeless	- Affirmation (Jewell, 2004; Mathews, 2009) - Spirit/enthusiasm, life power (Baskin, 2007) - Hopes (Mackinlay, 2006) - Feeling meaningful and useful for the others - Mode of being or existence - Reminiscence (Mackinlay, 2004b)	- Chatting, asking something, comforting - Giving certain tasks and responsibility - Giving support, attention, and affection - Regarding the self as their friend or son/daughter
Feeling abandoned, isolated from family	- Relationship, (Mackinlay, 2004b), connectedness - Reconciliation (Jewell, 2004; Mathews, 2009)	- Using physical touch (for the same gender) - Giving advice or input - Inviting to conversation or discussion personally - Reminding them to be patient - Inviting to pray

Disputes among older people residing in aged care agency	- Comfortable and secured ageing without being disturbed by others	- Reminding the clients of life end - Raising awareness to live together with other clients, to do righteous deeds, and to avoid disputes among them
Death anxiety	- Preference of where and who will handle their funeral	- Asking carefully, for the aged who still have family, concerning the preference of where and who will deal with their funeral - Recording and facilitating them with other parties, especially for those who want their funeral handled by their family
	- Collecting provisions	- Looking for the information about the clients who collect money, jewelry, etc. - Asking their wants/goals in collecting the stuffs, e.g., for additional cost for diggers to deepen the funeral niche and for the cost of praying or religious rituals (Tahlilan & Yasinan). - Facilitating to make their wants/goals to be handled.
	- Facing the process of dying	- Teaching them simple Qur'anic readings to face dying process (sakrotul-maut) - Assisting them - Reading Surat Yasin for them - Guiding them to recite syahâdat
	- Good and easy death	- Looking for the information about the clients who insert an implant (susuk) for a magical charm or another. - Looking after and efforting the way to displace susuk (sare'at)
	- No fear for if no one will handle their dying	- Rukun kematianor Rukma (death pillars) for home care elders.
Unfinished problems, hopes, and fear before dying	- Dying with good and honoured condition (husnul-khâtimah) without being burdened by unfinished problems	- Helping to deal with and facilitate the elderly with unfinished problems - Anticipating all possibilities emerged after their death. - Providing a blank/form to record the written last will and testament (wasiat)

		- Making the wasiat and their hopes to be fulfilled.

V. CONCLUSION

Social welfare practitioners acknowledge that spirituality is a concept of mental, religion or religiosity, piety, morals, and vertical relationship with God. Some refer to the inner aspect or the unseen faculty of human as well as inspiration from the inner side. However, spirituality understood by some others is much more concerned with religious rituals and is reflected in a number of components, such as religious affiliations and practices, beliefs, values, the way they respond to sufferings, fear, and hopes. This aspect is also much expressed in religious teachings and traditions that are conducted both individually and communally with groups.

The term spirituality is not recognized by most practitioners and their acknowledgement is not properly referred to the universal understanding, that is the search of meaning and life purpose (Hinnels, 1995). Nevertheless, this is not to say that they have no spiritual entity. They might not understand or define the spirituality that they live and experience both in daily life and in interaction with elderly clients. This kind of spirituality, according to Hinnels, is classified on the level of praxis or experience. To sum up, such living spirituality is not comprehended nor defined, but it is lived and done.

How the above understanding of spirituality is implemented in practice with the elderly clients is then explored further. This research results in a number of themes that are classified into four categories, i.e., practitioners' motivation to serve the elderly, beliefs and values, spiritual assessment, and spiritual intervention. The salient motivation which is likely influenced by their spirituality or religiosity is that they help older persons because of religious enthusiasm for the sake of God without expecting rewards and/or entitlement. Together with this impulse, almost all informants regard the elderly clients as their own parents or grandmothers/-fathers. Beside the second category, i.e. beliefs and values, some informants also speak of the coherence between spirituality and the ethical principles of social work profession.

The next categories emerged from the second research question is spiritual assessment and intervention. This research finds the fact that there are minimum records or documentation of spiritual assessment, but a bit superficial identification of clients' formal religion and religious living, such as rituals, prayers, scripture reading, and the way they conduct rituals. Most practitioners are also unfamiliar with well-known methods of spiritual assessment. Accordingly, in the phase of spiritual intervention, most practitioners realize not to employ particular techniques. On the other hand, they make use of standard ways like reminding, asking or inviting, giving advices, accompanying, and teaching the elderly clients in doing praying, prayers, or proclaiming the name and attributes of God (Arabic term: dzikir). However, this research finds several methods or approaches seeming to be like the initiatives of some practitioners that are shaped by their knowledge of religion and personal capability. For example, a practitioner promotes a 'humane' or 'genuine' approach for the purpose of raising the elders' awareness regarding death and dying.

This research recommends that, in the aged care agencies, it looks necessary to examine the understanding of spirituality by practitioners. Such examination can use some common instruments to explore the clients' spirituality, such as spiritual history, spiritual ecomap, and

spiritual genogram developed by Hodge. The result of this examination then can be a consideration for agency managers or officers in delegating their workers to deal with the clients, particularly in relation to religious and existential problems.

By now, the number is still regarded by many people as having 'magic power'. So, it is a good idea if this qualitative research is followed up with quantitative research involving both practitioners and the clients as respondents. Beside other research findings, the concepts or categories found here can be the variables for the quantitative studies conducted in Indonesia. The goal is that such survey will be, at least, a preliminary effort to portray the viewpoints and attitudes of welfare practitioners and clients regarding the use of religion and spirituality in the context of direct practice.

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