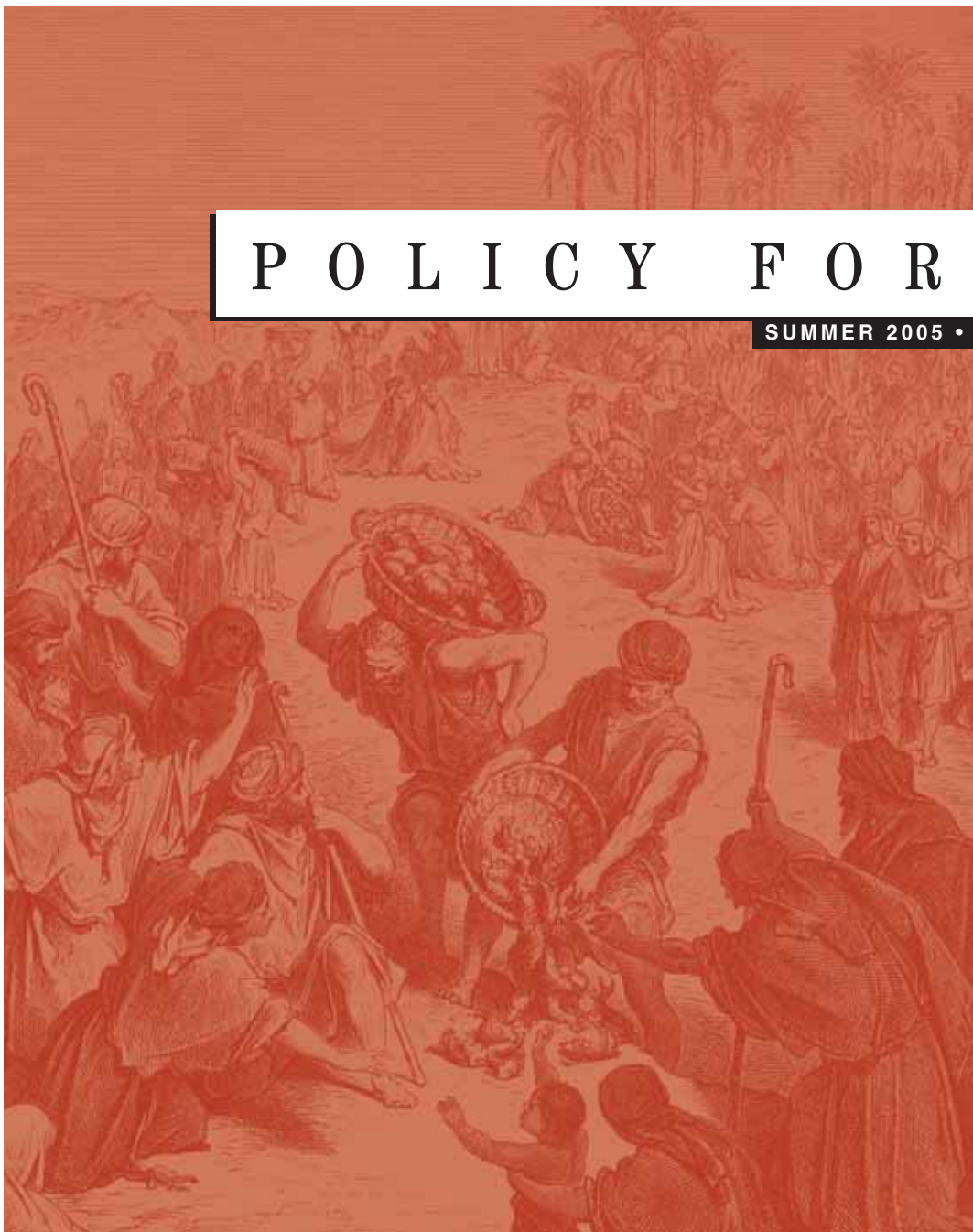


P O L I C Y F O R U M

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## Faith Makes a Difference:

A Study of the Influence of Faith in Human Service Programs

*Beryl Huguen, Fred De Jong, Karen Woods*

In the first nationwide study that specifically measures how faith relates to the organization and delivery of human service programs, initial results indicate that faith-based or religious charities do indeed conduct their operations in ways that markedly set them apart from secular organizations.



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# INTRODUCTION

**T**he data from 564 privately funded human service programs show that programs with a faith component often structure themselves, find funding, and offer services differently from those that do not. Many of the study's participating programs are part of voluntary community organizations that are faith based; run by staff and volunteers motivated by deeply held religious convictions; and try to help people in need at the local level, most often with little public support. These faith-related programs tend to use individual gifts, congregations or denominations, and dues or fees much more for funding than those that have no faith component. They are also more likely to explicitly mention or make mandatory a faith component to the program participants. A program's faith element relates to the people they serve and the type of help they provide, as programs with more explicit and mandatory faith-related elements are likely to be substance-abuse programs. This study is an important beginning step in measuring the type and degree of participant exposure to a faith-related service.

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## **The Role of Faith in the Delivery of Human Services Has a Long History**

In the United States, faith often motivated early public-relief efforts. Privately organized homes for the aged, sanitariums for the mentally ill, as well as children's aid societies are just a few examples out of many. The tradition continues today with innumerable food pantries, thrift stores, and homeless shelters sponsored by and delivered through local private efforts and resources.

Over time, the role of state and federal governments in the delivery and funding of human services grew. Urbanization and the Great Depression of the 1930s, when the numbers of people needing help often overwhelmed local resources, accelerated this trend. Social Security legislation in the 1930s established a governmental mechanism to partially provide for one's old age and for one's family in cases of death or disability before retirement age. Children's aid societies were supplanted by federal legislation requiring states to ensure child-protection investigation and assessment in cases of abuse and neglect. With an increasing

number of people living to advanced ages, the great cost of medical care in skilled nursing homes prompted Medicare legislation in 1965.

Human services in the United States, especially since the 1930s, has grown to be a blend of federal financing and regulation, state supplemental financing, and administration and local delivery of services through public agencies of various types. These local public agencies often subcontract to private nonprofit and for-profit organizations. This system in many parts of the country relies in part on faith-related organizations that provide human services, such as Catholic Social Services, Lutheran Social Services, and similar organizations. Until recently, these faith-related subcontractors dealt with requirements to carefully separate their program's faith components from the delivery of publicly financed services.

However, today this governmentally dominated human service delivery system is being questioned. A growing public sentiment contends that the bureaucratic and impersonal systems of government have not been able to bring about lasting changes in people's lives. This sentiment

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includes an increasing concern regarding the lack of focus on morality, personal responsibility, and faith in government programs and services. As a result, some societal leaders now call for a what researcher Ram Cnaan labels a “newer deal” between government and community-based organizations and congregations regarding the provision of human services (Cnaan 2000). Aspects of this “newer deal” emphasize the “devolution” (a downward reassignment) of responsibility to state and local levels and the privatization of programs and services to nongovernmental entities, both non-profit and for-profit. The focus encourages and equips local and private community organizations and congregations to take increased responsibility for social, economic, and personal needs of citizens in their communities. In some ways the “newer deal” comes full circle to the earlier more community-based approaches for serving those in need. The Charitable Choice provisions in the 1996 welfare reform legislation illustrate one aspect of this trend. These provisions essentially give local faith-based organizations the option to contract for public money while still practicing their faith component in service delivery to clients.

Several assumptions help to shape this federal policy shift to allow public money to pay for services with a faith component. One notion is that religious service providers, because of their religious sensibilities, “often go above and beyond the call of duty with clients or act in ways that inspire an unusual degree of trust among program beneficiaries” (Dilulio 2002:56). Another is that faith-based agencies simply care more deeply, demonstrating a persistence and willingness to hang in there with people over the long haul, and they do so because of their religious understanding that all people are image bearers of God. Robert Woodson, president of the National Center for Neighborhood Enterprise, suggests that such commitment by religious persons is the reason faith-based organizations are able, in his judgment, to reduce deviance and

delinquency (Woodson 1999). These service-provider values and attitudes can be embodied in the act of service itself, marked for instance by the compassion inherent in the manner in which the service is performed. Or they can be offered in a variety of explicit ways, either inside or outside the formal program. It is frequently asserted that it is these programmatic religious practices and principles or the specific religious values and attitudes of service providers, or both, that give faith-based programs a competitive advantage over secular programs.

This renewed emphasis on community-based approaches and local initiatives inescapably involves questions of how to incorporate faith-related organizations into the overall human service delivery system. With federal changes that no longer require subcontractors to separate their faith components from service delivery, bigger questions arise. In what ways does faith influence how we organize and connect the agency to the community, how do we choose whom to serve, how do we deliver services, and how do we measure program outcomes?

## **A Study of Private Efforts Toward Individual Change**

To begin to answer some of these questions, researchers examined a nationwide sample of 564 nongovernmental organizations that provide human services. Each organization had a program that had been nominated for The Samaritan Award, an award given to America’s leading charities sponsored by the Acton Institute’s Center for Effective Compassion. A nongovernmental organization was defined as one receiving 15 percent or less of its budget from government (grants and contracts) funding sources. Additionally, in order for the organization to qualify, programs needed to have been in operation for at least three years.

As part of the nomination process, each nominated program completed a detailed Web-based questionnaire partially based on Marvin

Olasky's seven principles for effective compassion (Olasky 1996). Consequently, nominated programs provided detailed explanations of funding sources, governing-board involvement, measurement of community connectedness, delivery of service, concepts of an individual change process, and measurement of client outcomes.

Two caveats will help to accurately understand these results. First, one cannot apply these results to all nongovernmental social services. However, they do present a broad cross-section of agencies from many parts of the United States and a great variety of program types. Second, the data could have a positive bias. In other words, these data most likely represent above-average programs, because nominating organizations are unlikely to submit descriptions of poorly performing programs. However, the resulting data from the 2004 nomination process offers an opportunity to better describe the role of faith in the detailed program descriptions that were provided. (Note that having a faith component in the nominated program was not a requirement for a nominated program.)

### **Measuring a Program's Faith Component**

Although the term *faith-based organization* is commonly used, there is no consensus as to what identifies or defines an organization as being religious or faith based. The question is made even more difficult given the wide diversity of organizations, both in size and targeted service populations, that consider themselves to be religious or faith-based. Since the late 1940s, the criterion used by public officials to determine if an organization is eligible for government monies is if it is *pervasively sectarian*.

If an organization is determined to be primarily or pervasively sectarian in its intent, it is deemed not eligible for public monies. What is meant by pervasively sectarian is not always clear, and, as a result, the term is frequently interpreted differently by different government departments and agencies.

Much of the current public debate about faith-based agencies speaks of the designation

as an either-or condition, i.e., either an agency is faith based, or it is not. The reality of the phenomenon is more complex. What is a faith-based organization? How do we know if an organization is religious or how religious it is? Another way of posing these questions is to ask where it is that we locate faith in a faith-based organization.

Organizations can be and are faith based to a degree dependent on which aspects of a program are being measured and how frequently or consistently faith-related program elements are practiced. John Dilulio, past director of the White House Office on Faith-Based and Community Initiatives, observes that the great variety of types of faith-related organizations can be expected to produce many different ways of expressing their faith component in practice. Dilulio (2002) suggests the term *programmatically faith* in which organizations express their religiosity through a variety of key organizational dimensions—for example, an organization's self-identity or name, mission statement, personnel (staff and management), decision making processes, program benefits, and service delivery methods.

Another approach to programmatic faith is to think of organizations as being faith related, rather than as being faith based. In other words, the religiosity of an organization is determined more by how an organization is related or connected to institutional religion,

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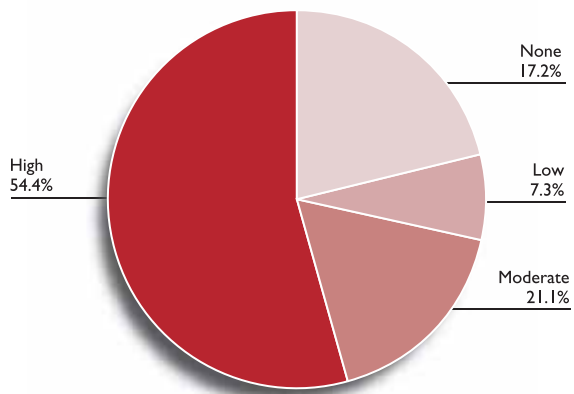
to specific congregations, to denominations, or to other religious bodies. The focal point is on the tie or link to institutional religion. This link to institutional religion is distinct or separate from how one expresses faith in action within an organization. This approach runs counter to the idea that faith can be represented by an identifiable set of religious practices or attitudes or from within specific organizational dimensions, which are the indicators of faith in the faith-based typologies. According to researchers Steven Smith and Michael Sosin (2001), these ties or links to institutional religion revolve around three areas: resources, authority, and culture. Resources can be money, facilities, or the volunteers that a congregation or denomination may provide to an organization. Authority relates to how much ecclesiastical structures influence organizational policy and practice. The area of culture includes how an organization relates with other faith-related organizations, such as congregations, regulatory agencies, suppliers, and even professional associations. These ties to institutional religion, like any funding and authority source, can be both a source of support and a constraint.

This study uses both concepts of programmatic faith and faith-relatedness. The measures of faith that are elements of service delivery represent the programmatic-faith approach. Programs reported their degree of programmatic faith by three measures: the centrality of spirituality to their program, the degree of communication to program participants of faith-related content, and the consistent application of faith-related program elements in the helping process. The analysis of funding sources helps detect the faith-relatedness of each program.

## Spirituality

The first step in conceptualizing and measuring a program's faith component was to determine the centrality or salience of faith

**Graph 1**  
**Centrality of Spirituality in the Program**



in the service program. This question gives a “big picture” rating for the entire program.

The spirituality measure is one question with four choices from, none to low to moderate to high. The survey stated, “Describe the centrality of spirituality in your program.” As illustrated in Graph 1, 54.4 percent of programs (307 programs) rate the centrality of spirituality in their program as high. Add the 21.1 percent (119) of programs that rate the centrality of spirituality as being moderate—typically and commonly present—and over 75 percent of programs see spirituality as playing a central role in their program.

## Communicating Faith to Program Participants

The second approach to conceptualizing and measuring faith was to identify how the program's overall faith orientation is communicated to program participants (Green and Sherman 2002). The survey instrument asked, “How do you describe the faith dimension of your program, if any?” Included in this communication process is the program's understanding of how faith is associated with or involved in participant change. As depicted in Table 1, programs present a diverse range of faith orientations and processes to communicate these orientations.

**Table 1: Communication of Program's Faith Orientation to Participants**

	No. of Programs	% of total
1. Faith is an explicit, critical, and mandatory part of our work with participants who choose to participate in the program	81	14.4
2. Faith is an explicit and critical part of our work with participants, but staff respect the right of participants to not participate in the religious or spiritual aspects of the program	130	23.0
3. Faith is explicitly mentioned to participants, and staff seek to establish personal relationships with participants outside of the program that involve religious or spiritual matters	25	4.4
4. Faith is explicitly mentioned to participants, and they are invited to inquire more fully about religious or spiritual matters outside of the program	44	7.8
5. Faith is revealed through acts of caring for participants rather than by any explicit mention of religious or spiritual matters in the program	204	36.2
6. Faith is not revealed in our work with participants in the program	4	.7
7. No faith commitment	76	13.5
Total	564	100.0

Table 1 shows that for over one-third of the programs (36.2%), faith is communicated *implicitly*, mostly through acts of caring for program participants. Another third of the respondent programs (23 %) communicate their faith *explicitly* and see the role of faith as being critical to participant change. An additional group (14.4 %) of programs communicates faith explicitly and sees faith as being so critical to participant change as to make it mandatory for program clients to participate in the faith dimension of the program. A smaller group of programs (12.2 %) are explicit about their faith commitments but primarily seek opportunities to communicate or relate around faith issues during times outside of the program.

### **Incorporating Faith-Related Program Elements in the Helping Process**

The third way to conceptualize faith was to determine the extent to which a variety of faith-based activities, processes, and relationships are made available to program participants. How much direct exposure to specific faith practices do program participants receive? How important is it to expose faith-based elements to program participants?

The survey asked applicants to “indicate the extent to which certain faith-related programmatic elements are made available to program participants.” Table 2 lists each of the fifteen faith-based programmatic elements and a mean

score indicating its level of exposure to participants in the program. A higher mean indicates that a particular faith-related element is practiced more frequently. The extent of exposure

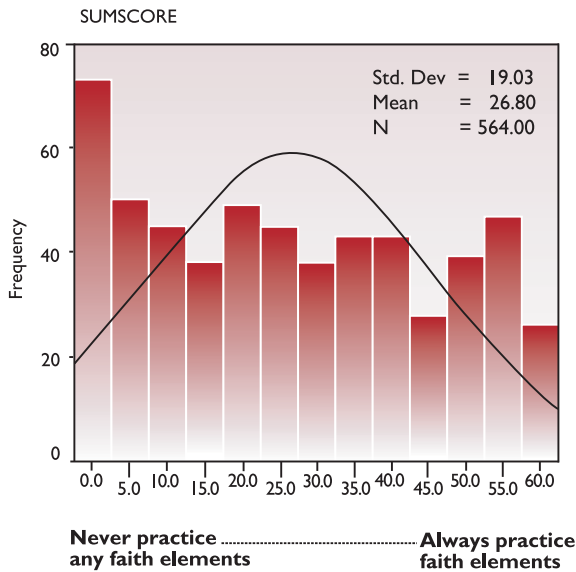
to faith practices was measured by a Likert-type scale (0=Never, 1=Rarely, 2=Sometimes, 3=Quite Often, 4=Very Frequently).

**Table 2: Participant Exposure to Fifteen Faith-Related Program Elements**

<i>Scale: 0 = Never, 1 = Rarely, 2 = Sometimes, 3 = Quite Often, 4 = Very Frequently</i>	Average Frequency
1. The faith element of our program is primarily reflected in the service and care of our staff	2.96
2. Program participants perceive or think about our program as faith-based	2.47
3. The faith elements incorporated into our program are clear and open	2.38
4. Program participants see faith-related literature on display in our program	2.09
5. Program participants join in group prayer—such as at the beginning or end of meals or meetings—as an element of our program	1.99
6. Program participants are invited to worship services that are separate from the program	1.85
7. Program participants learn to discuss faith-related beliefs, values, or traditions as an element of our program	1.79
8. Program participants are encouraged to make personal changes in attitudes and behaviors that are based clearly and openly on the faith-related values of our organization	1.74
9. Program participants are encouraged to make personal faith-related commitments	1.66
10. Program participants are encouraged to make personal changes in attitudes and behaviors that are understood but unspoken as being based on faith-related values of our organization	1.62
11. Program participants pray or meditate as an element of our program	1.57
12. Program participants study faith-related texts as an element of our program	1.48
13. Program participants join in worship services as an element of our program	1.34
14. For our program to be successful, program participants must undergo a faith-related transformation	1.05
15. Program participants are required to participate in mandatory faith elements of our program	0.81

The data show that programs rarely make their faith-related elements mandatory but that demonstrating faith by caring and service is very commonly practiced. Table 2 also demonstrates that implicit communication of faith components is the most common means for

**Graph 2**  
**Faith-Related Elements Frequency Score by Numbers of Programs**



communication of a program’s faith component rather than explicit faith-related content. In addition, communicating faith within the program to participants is much more practiced than referring clients to outside locations such as worship services separate from the program.

Graph 2 illustrates the wide variation in the frequency of use of faith-related elements in programs. The frequency scores from each individual faith-related program element were added to calculate an overall faith-related

program element sum score (the average is 26.8, with a low score of zero and the highest possible 60; see Graph 2). The tallest bar indicates that the most frequent score was zero (the mode), which applies to those programs which report no faith-related elements, although more than twenty programs cite consistent use of all fifteen faith-related elements with the maximum score of sixty.

## The Role of Faith in Human Service Programs

The initial analysis shows many statistically significant differences between programs that score high in these three programmatic faith measures. These results generally fall under two questions.

- *Does faith relate to how a program is organized and funded?*
- *Do the people served and the type of service change by the degree of program faith?*

### *Does faith relate to how a program is organized and funded?*

All measurements of program faith—the centrality of spirituality, communication of faith to program participants, and faith-related service-delivery practices—show statistically significant (i.e., important and reliable) differences in source of program funds. Programs with high centrality of spirituality tend to use foundations, government, and business sources of funds less but use individual gifts, congregations or denominations, and dues or fees much more than do programs with no emphasis on spirituality (see Table 3).

**Table 3**  
**Significant Mean Percentage of Program Budget Differences Between High and No Centrality of Spirituality with Six Sources of Program Funding**

Faith Measure	Foundation Grants	Gov't Grants & Contracts	Individual Gifts	Congregation/ Denomination	Business/ Corp.	Dues & Fees
Spirituality						
High	16.4	1.7	38.2	13.1	7.1	10.1
None	30.6	6.3	23.2	2.5	11.6	7.0

**Table 4**  
**Significant Mean Percentage of Program Budget Differences between No Faith Communicated and Explicit Mandatory Communication of Faith to Participants**

Communicating Faith	Foundation Grants	Gov't Grants & Contracts	Individual Gifts	Congregation/Denomination	Business/Corp.	Dues & Fees
Explicit						
Mandatory	9.5%	.3	51.6	7.9	6.4	13.5
None	29.8	6.6	24.5	2.2	13.0	7.0

The receipt of certain types of funding ripples through a program's way of expressing its faith component. Having a faith component that is explicitly mentioned to participants and is considered a mandatory part of the program is significantly higher for programs receiving individual gifts, congregational or denominational funds, and dues or fee income (see Table 4).

Programs deliver their help in ways associated with particular funding sources. Receipt of individual gifts, congregational or denominational funds, and dues or fee incomes have a

modest but significant, positive association with incorporating the fifteen faith-related program elements into a program's service delivery. In contrast, foundation, government, and business income sources tend to significantly depress the practice of program faith elements.

***Do the people served and the type of service change by the degree of program faith?***

The nominated programs reflect a wide variety of social problems and populations served (see Table 5).

**Table 5**  
**Program Types/Populations Served by Social Problem**

	No. of Programs	% of total sample
1. Education/Advocacy/Social Support to Children and Youth (includes tutoring, after-school programs, mentor programs)	88	15.6
2. Education/Advocacy/Social Support to Mixed Ages (includes services to all ages such as friendly visiting to seniors and disabled, case management, legal services)	45	8.0
3. Education/Advocacy/Social Support to Adults (includes mentoring, budget management, parenting classes)	70	12.4
4. Medical and/or Health Needs (includes health clinics, exercise programs, pregnancy-related services, in-home health assistance)	89	15.8
5. Basic Needs (includes food pantries, thrift stores, short-term financial support)	68	12.1
6. Housing and Homeless Services (includes emergency shelter, transitional housing, housing repair, construction)	58	10.3
7. Mental and Emotional Help (includes counseling, summer camps for children)	40	7.1

**Table 5 Continued**

	No. of Programs	% of total sample
8. Education/Advocacy/Social Support to Families or Households (any program that serves the whole household such as family-life education, Social Security, and welfare appeals)	36	6.4
9. Substance Abuse (recovery, drug and alcohol treatment)	29	5.1
10. Crime: Adult and Juvenile; Domestic Violence (including ex-offender programs, visitation)	26	4.6
11. Other	15	2.7
Total	564	100.0

A program's faith component significantly associates with which social problems are addressed and whom the program serves. Table 6 shows selected services and/or populations by the program's level of communication of faith-related content to participants. Note that substance-abuse programs most frequently make faith-related content explicit and mandatory, while this level of faith-related communication occurs least often in mental health and counseling programs.

The degree to which programs incorporate faith-related elements in their helping also significantly varies by type of service and/or population (see Table 7).

Programs that most frequently use faith-related program elements significantly concentrate among substance-abuse programs and criminal-justice-related and/or domestic-violence programs, while the program types that least often incorporate these faith elements in service delivery are mental health and/or

counseling and education and/or social support and advocacy to families. Recall that the faith-related program elements could score as low as zero and as high as sixty if all elements were practiced consistently.

### What Did We Learn About Programmatic Faith?

*The function of faith in human service programs has become more transparent.*

The study contributes to a better understanding of the diverse roles that faith plays in many programs. We see faith as central to a program's identity in some cases and in others not at all. In other programs, faith is an explicit, critical, and mandatory part, but, in many others, faith content is communicated indirectly and implicitly. Some programs apply many different modes of exposing participants to faith, while others only practice a restricted number of program-related faith elements.

**Table 6**  
**Communication of Faith-Related Content by Type of Service/Population Served**

Communication of Faith	Housing, Homeless	Mental Health, Counseling	Substance Abuse	Education/Advocacy/Social Support to Families
Explicit				
Mandatory	22.4%	7.5	44.8	2.8
None	12.1	17.5	2.5	25.0

**Table 7**  
**Average Faith-Related Program Elements Score by Type of Service/Population Served**

Highest		Lowest	
Substance Abuse	Crime, Dom. Violence	Mental Health, Ed/Advocacy/Social Counseling	Support to Families
39.4	32.7	19.4	20.3

Documenting this diversity of how programs implement faith has important implications. Participants served by faith-based programs may have very different types of faith-related program elements, may encounter different styles of communicating faith content, and may experience varying degrees of choice in their exposure to a program’s faith content. Clearly, one faith-based service will not be the same as the next and could be wildly different in each participant’s experience. This study is a beginning step in measuring the type and degree of participant exposure to a faith-based service.

More accurate measurement of participant exposure to a faith-based service is a first step in defining what faith-based agencies do that is different from their secular counterparts. It begins to lay the basis, as well, for measuring how much and what kind of faith-based service a participant receives. In truth, evaluating faith-based service effectiveness cannot proceed with any degree of accuracy until we understand what it is that we are testing.

*Funding source and programmatic faith have a strong connection.* It is no accident that faith-related programs use some budget sources less. Law and regulation continue to inhibit access by faith-based programs to many government revenue sources. Similarly, many foundations will not fund programs that have clear faith-based mission statements and services. In addition, as a matter of principle, some programs shun government dollars and instead rely on a variety of local resources. Government sources also can have major accounting, reporting, evaluation, and service-

delivery requirements that programs either cannot or choose not to do.

A program’s ties to funders can be both a source of support and cause for restraint, a point made by researchers Steven Smith and Michael Sosin (2001) when studying program ties to institutional religion. While the majority of programs in this study reported such ties, the average proportion of budget contributed by this source was only 10.3 percent and over 40 percent (240 programs) reported no institutional religion funding ties at all. However, institutional resources contributed can be much more than money and can include nonfiscal resources, authority, and culture. Resources besides money may include facilities, or the volunteers that a congregation or denomination may provide to an organization. Authority relates to how much ecclesiastical structures influence organizational policy and practice. The area of culture includes how an organization relates with other faith-related organizations, such as congregations, regulatory agencies, suppliers, and even professional associations. Consequently, these ties to institutional religion can have as much of a channeling effect on a program as would public funding and deserve more study.

*Finally, the data suggest that some types of services and populations may lend themselves to faith-based services while others do less so.* For example, faith-related program elements are much more common among substance-abuse treatment providers than among mental-health programs. Factors that may affect when faith shows the most positive effect when

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applied in programs are as yet not documented by empirical studies. Influential considerations may include the cost of the intervention, its duration of participant contact, and the degree

of technical training required. These data imply that faith-based services may serve some but not necessarily all needs better when compared to nonfaith-based programs.

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## ACTON INSTITUTE

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