Introduction

I am fascinated by the role of religion (akin to other major institutions such as government) as a social determinant, and how it can so drastically impact the lives of individuals, as well as the principles and functioning of society as a whole. This interest led me to investigate religion from an institutional perspective, and more specifically, to look closer at the valuable work done by women in religious life. I have found that these women have historically provided important social services to highly disadvantaged populations that were otherwise socially ostracized.

In my quest to meet these women, understand their contributions, and record their stories for posterity I was faced with a striking realization. The population of nuns is, for lack of better terminology, at risk of extinction. There are fewer and fewer young postulants joining orders, and the sisters who remain are aging out of their years of service, and dying. As a result, there has been a restriction of the valuable social services that these women have historically provided to vulnerable populations. A short non-exhaustive list of some of these services include foster care, nursing and midwifery, hospice care, social work in prisons, patient advocacy at hospitals, mother's homes and counseling, daycare, and high school counseling. This realization led me to ask the question, what are the potential implications of this reduction of the social services provided by the female monastic community in different regional contexts, and what will happen when these women cease to provide those services to their communities?

Following the global trend of secularization there has been a simultaneous reduction in new postulance by women to religious life, and in the social services provided by those women to their communities. The factors and environment after World War II in Europe intensified the preexisting global secularization trend, but also had other effects as well.
These included the creation of welfare states and overall state development in Europe, which allowed European governments to be well equipped to fill the gaps in service created as nuns left their work. Although the shrinking of religious institutions is happening on a global scale, Latin America did not experience the events of World War II in the same way as Europe, thus it has not reached the level of economic development and governmental structure necessary to absorb the services that are being abdicated as their population of nuns dwindle. In both the United Kingdom and Perú, the number of nuns and the services they provide have decreased or are decreasing drastically. In the United Kingdom, developments concurrent to secularization created an atmosphere ripe for government compensation for these gaps in service, but in Perú, as nuns cease to provide these services, the government is not currently able to, nor has it shown a desire to fill these gaps, leaving certain populations vulnerable to losing the services that they so rely on, without an alternate provider.

Theoretical Framework

In order to understand the implications of the dwindling population of active nuns, it is crucial to understand the sociopolitical and historical context that has led to this reduction in aspirance and postulance. For this, I will test several theories. First, I intend to incorporate academic work that explains the existence and origins of the trend of secularization, including Casanova’s article which analyzes secularization theory through the lens of globalization, and draws conclusions on the new state of religion in modern times.¹ There is ample evidence (including Morris’s article on the decline of Christianity in Britain) to suggest that in recent history there has been a global secularization movement, which has manifested especially strongly as a popular break with major organized religions (as opposed to a reduction in

spirituality). Secularization has happened across multiple religions, and in my analysis I will specifically address the reduction in the populations of nuns in the Anglican Church (United Kingdom), and the Catholic Church (Perú). While this trend can be seen globally, it is most striking in Europe and the United States, where the movement away from religion has been happening the longest. There has also been investigation which suggests that religion has the largest remaining stronghold in vulnerable populations, and in poor countries. With this in mind, I intend to incorporate historical analysis which correlates the secularization trend, at least in part, to the economic and social trends that were exacerbated by World War II in Europe, and the resulting global ripple effect. Taking a historical perspective on secularization trends is argued strongly by Gorski’s chapter, “Historicizing the Secularization Debate: An Agenda for Research” from the Handbook on the Sociology of Religion.

Having established that the trend of global secularization is aligned with events in Europe (namely the effects of World War II), I will investigate other contemporaneous effects of this turmoil, including on the implementation of welfare states in Europe, and the overall development status of the nations involved in World War II. There is academic consensus on the fact that World War II and the events that preceded it were instrumental in shaping welfare states in Europe, (for example, the NHS in the United Kingdom). In particular, I will consult Esping-Anderson’s book on welfare states, and the chapter on continental Europe which explains postwar social security models. With the above mentioned analytical framework of secularization, and economic and social indicators of state

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developmental status in mind, I will explain why there has been a drop-off in the number of nuns worldwide, as well as determining the implications it may have on the provision of social services in disparate global contexts.

**Research Methodology**

The hypothesis that I intend to test is that the Peruvian government is comparatively ill prepared to take over the social services provided by nuns as those women become increasingly incapable of providing them. To test this hypothesis, the first portion of my research entailed a series of oral history interviews, conducted with nuns who provided social services to vulnerable populations (defined here as groups and communities at a higher risk for poor health or destitution as a result of the barriers they experience to social, economic, political and environmental resources, or limitations due to illness or disability\(^7\)), including women, children, minorities, the elderly, the sick, and incarcerated persons. These interviews were performed with six women from three Anglican orders in England, who provided social services between 1950 and 1970, and an additional five women, at three Catholic orders who have been involved in providing social services in Perú within the last five years.

These two sets of interviews will serve as the basis for a comparative study, wherein I will analyze the contents of the interviews to glean information and insight on the role played by nuns as providers of social service in the 1950s-1970s in the United Kingdom and in Peru today. I plan specifically to deeply analyze their responses to questions such as “What are the main issues faced by the people you serve?”, “Do you see any potential for change in these circumstances in the future?”, and “How do you tackle these problems?” to help explain the scope and impact of the work done by these women in both the United Kingdom and Perú. I will also look closely in both sets of interviews at the comments on the interaction between

\(^7\) Definition adapted from the National Collaborating Centre for Determinants of Health [http://nccdh.ca/glossary/entry/vulnerable-populations](http://nccdh.ca/glossary/entry/vulnerable-populations).
the services they provide and the government, and perspectives on the evolving role of nuns as providers of social services.

I have chosen to analyze the cases of the United Kingdom and Perú, due to the similarities between some important developmental statistics (such as maternal and fetal mortality and poverty level) in the 1940’s and 50’s in the United Kingdom, around the time that the services of nuns began to taper off, and in Perú today. This makes these two cases particularly ripe for comparison, as the differences between the famously well-developed welfare state in the United Kingdom is juxtaposed against the underdeveloped social service system in Perú, and allows for a controlled comparison where the level of development of the social service system acts as a quasi-independent variable.

The reality is that analysis of these interviews can only offer a glimpse at what the true scope of loss-of-service will be in Perú or potentially has been in the United Kingdom, because no individual or group bothered to collect data on service provision by nuns in the first place. However, based on the content of the interviews, I suspect that the loss of service will have ripple effects and lasting impacts in Perú more so than in the United Kingdom.

In addition to these interviews, I will consult statistical data on governmental social spending in Perú, as well as indicators of population health and wealth to determine the effectiveness of current Peruvian government spending on its citizens social service needs.8 In contrast with information on the implementation and effectiveness of welfare policy in post-war United Kingdom, and in combination with general development indicators for both post-war United Kingdom and Perú today, I will use this data to support my hypothesis.9

Limitations

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I anticipate that there will be some statistical information that would be useful in my comparative analysis of the United Kingdom and Peru that may not be available for both cases, as it may very well have not been collected. For example, I would like to use numerical data on the rates of individuals receiving social services from religious organizations, but data on that specific metric is not available. Despite this fact, there is an abundance of information about the creation and effectiveness of the United Kingdom welfare state (although it may not manifest as statistical data, so I will still be able to make approximate comparisons through conservative extrapolation of the information available.

There is also a serious lack of statistical or numerical data on the quantity of nuns providing social services, the kinds of services they provide, and the scope of those services. For this reason, I will have to rely mostly on the content of my interviews to fill these gaps in information. Although it would be easier to have this information in a quantitative format and at a country wide level, it is actually very telling that this information is not available. The lack of statistical information reinforces my concern that individuals who previously received services from nuns will fall through the cracks when those services are no longer provided, because it indicates that relevant government agencies are neither paying attention to the services provided by nuns nor the needs they fulfill in their communities.

I also acknowledge the limitations of the information collected in the oral history interviews with nuns, due in part to the self-selection of the participants, and, more importantly, to the relatively small sample size. I do believe, however, that the sample is diverse enough (at least with regard to the kinds of services they provide or provided) to be fairly representative of the larger population of nuns, and can therefore speak reliably to the social and political climate surrounding their work.


