Bringing Religion and Spirituality into Therapy

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Bio-Psycho-Social-Spiritual.
Outline.

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- Religion, Spirituality, and Mental Health
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- Why is it important to create a space for R&S in Therapy?
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Spirituality Defined.

The meaning gained from life experiences, which may or may not be implicit within the context of religion.

And/or:

One’s subjective experience with the sacred and the personal subjective expression of one’s religious experience.

Religion Defined.

- Religion involves a belief in and connection with a superhuman or divine power to which forms of worship and other ritualistic practices are directed.

- A set of symbolic forms and acts that relate man to the ultimate conditions of his existence.

- A system of beliefs and practices by means of which a group of people struggles with the ultimate problems of human life.

Individuals look to religion in times of difficulty, pain, and distress for comfort as well as to fulfill such needs as intimacy, spiritual connection, meaning, and self-actualization.
Religion and psychology have not had the most harmonious past.

Credit goes in part to Freud... and later Ellis.

However, things are starting to change.
Religion, Spirituality, and Mental Health.

Benefits seen in physical and mental health.

Contributions toward better clinical outcomes.
Religion, Spirituality and Mental Health.

Positive spiritual beliefs and religiosity are associated with:

- Longevity
- Diminished levels of stress and enhanced capacity to cope with stress
- Lower rates of suicide and drug abuse
- Lower rates of anxiety and depression
- Lower levels of psychological distress
- Increased hope, optimism, well being, happiness, and life satisfaction
- Purpose and meaning in life
- Greater social support and less loneliness
- Greater marital stability and satisfaction
Context: Why Clients Might Be Reluctant to Address R&S in Therapy?

There is a sense of reserve regarding R&S in our society.

“Don’t ask, Don’t Tell.”

A belief that therapy is a secular space.

Fears of being disrespected, discriminated against, judged or even pathologized by the therapist.
Context: Why is R&S typically excluded from Therapy?

Lack of education in graduate training programs

- Therapists are unprepared.
- A silent message that this is not a serious or relevant topic to address in therapy.
- Adherence to the myth that one lacks religious knowledge.
Why would religion be any more awkward a topic for therapy than sexuality, infidelity, or death?
Context: Why is R&S typically excluded from Therapy?

Only 48-60% of therapists identify as religious and/or Spiritual.

However, most Canadians and thus most clients actually identify themselves as religious. 84% to be specific. (Stats Canada 2001 census)
Why is it important to create a space for R&S in Therapy?

- 94% of Americans believe in God,
- 93% identify with a religious group,
- 90% report that they pray,
- 84% try to live according to their religious beliefs,
- 81% prefer having spiritual beliefs and practices integrated into therapy,
- 80% report that religion is very or fairly important in their lives,
- 75% want their therapists to address spiritual issues as part of their care
- 58% feel the desire to experience spiritual growth,

Spiritual connectedness is a need in and of itself – not a misguided need for something else.

It is a part of our human makeup.
Why is it important to create a space for R&S in Therapy?

Religious beliefs and identities as indivisible.

Permeate most aspects of the self.

Psychotherapy as a space for exploration, introspection, and personal growth.
APA Code of Ethics:

“Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups” (p. 1063).

Clinical Process.

Ethical Responsibility
Therapist to Initiate
Develop a Deep Curiosity
Open and Present
Clinical Process.

Not Required to Agree
Are Required to be Respectful
Self-Exploration is important
Clinical Process.

One of the most basic issues clients come to therapy for centres around disconnection and isolation.

Religious communities are often a valuable resource.
Religion and Spirituality in Treatment.

What does it mean to be a spiritually sensitive therapist?

The focus is on the client’s R&S beliefs and practices.

Gain consent before using explicit R&S interventions.
Questions to ask: Things to consider.

Act out of respect and sensitivity

- Might R&S be contributing to the current problem?
- Might R&S help alleviate the problem?

Invite clients to share their R&S concerns, issues, and values in the same way they share any other area of their life.
Questions to ask: Things to consider.

Clients may offer little ‘crumbs’.

Open and willing.

See the depth after safety and trust are established.
Questions to ask: At Intake.

Address the topic in some way right from the beginning

Potential Intake Form Question:

• “Do you consider yourself a religious and/or spiritual person?”

Intake sessions can include a number of open-ended questions regarding a person’s spirituality and religion.

• What gives you meaning and purpose in life?
• Do you consider yourself a religious and/or spiritual person?
• Do you belong to any religious organizations or institutions?
• Do you and your family share the same religion or spiritual beliefs?
Questions to Ask: During Assessment.

During assessment may want to look at and explore:

- Religious rituals, beliefs, and practices,
- Participation in religious community,
- Level of religious knowledge,
- Supportive connections to priest or clergy,
- Guiding values and ethical positions
- Areas of strength or dysfunction within their R&S life,
- How the client believes R&S is involved in their current life circumstance,
- The congruence between beliefs and lifestyle.
- Ways they incorporate R&S into coping or problem solving
**Questions to ask: In Session.**

- What is the importance of R&S in your everyday life?
- Are you content with your belief system? What role has faith played in your life, now and in the past?
- What gives your life purpose and meaning?
- Are there things in your life that are sacred to you?
- What was your religious upbringing? Are your beliefs different now?
- What specific religious practices, rituals, or activities do you engage in? What value do these provide for you?

More Questions to Ask: In Session.

- Who do you have important and significant relationships with in your religious community?
- Is there someone in your R&S community that you can talk to about deeply religious questions or concerns?
- Has your current problem affected your relationship with God/higher power?
- Is your R&S important to this problem?
- How do you see your faith relating to this or other problems?
- Have you used any aspects of your R&S to help you deal with this problem?
- How do you want to have these issues addressed in therapy?

Discussion Questions.

In groups of 3 or 4 please discuss and make a list of:

Some potential concerns about bringing Religion & Spirituality into therapy?

Some potential concerns about NOT making a space for Religion & Spirituality in therapy?
Ethical Considerations.

Ethical practice includes and requires that therapists recognize the central role R&S plays in the client’s life and they demonstrate a sensitivity, awareness, and respect for the client’s beliefs, practices, and values (Eck, 2002).

Ethical Considerations.

Avoid imposing one’s own beliefs onto clients.

Avoid directly challenging religious values.

A shared belief system does not necessarily result in a shared understanding.
Ethical Considerations.

Stereotyping

Trivializing R&S

Consult and collaborate.

Boundaries: Psychotherapists are not clergy.

Know when to refer.
Ethical Considerations.

Professionals are also encouraged to:

- Read books,
- Attend workshops, trainings and seminars,
- Seek out supervision and consultation,
- Learn more about the religious traditions of the clients they typically work with.
The Take Home Message.

- Essential to incorporate this integral component of the human experience into therapy.
- Important to ask oneself why one hasn’t in the past and then take necessary steps to do so.
- Monitor and assess ourselves during the process.
- Approach this sacred topic with respect.
- Be patient with clients – this is a deeply personal topic.
- Be open and curious
- Let the client lead and teach.
For Further Learning.

Thank You.

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