SPRITUALITY AND RELIGION IN CLINICAL PRACTICE:
HOW PSYCHOLOGISTS IN AOTEAROA NEW ZEALAND INTEGRATE SPIRITUALITY AND RELIGION IN THERAPY

DANA LEE

SUPERVISORS: DR SONJA GOEDEKE & A.PROF. CHRIS KRÄGEOH

OUTLINE

• SPIRITUALITY AND RELIGION
• LITERATURE REVIEW
• THE PRESENT STUDY
• RESULTS
• Q&A
SPIRITUALITY AND RELIGION

• Importance of religion and spirituality
  • “Religion constitutes an influential and important role in all cultures” (Taylor, 2003)
  • “Religion has survived and thrived for more than 100,000 years. It exists in every culture, with more than 85% of the world’s population embracing some sort of religious belief” (Azar, 2010, p. 52)
  • “Spirit is unique - the life force - I can’t describe it, but it drives all people the way we ‘do’” (Hopkirk & Wilson, 2014, p. 161)

• Quick NZ Statistics (Statistics New Zealand, 2016)
  • Over 50% of the NZ population identifies with at least one religion
    • Over 50% of the Māori population (tangata whenua) (1 in 7 people in NZ)
    • 83% of the Pacific population (7% of NZ)
    • 70% of the Asian ethnic group (12% of NZ; fastest growing population in NZ – 33% increase from 2006 to 2013)
  • Christianity remains the largest religion in NZ. More diversity of faiths emerging e.g. steady rise of other religions such as Sikh and Hinduism. Increase in reports of no religion (30% in 2001 -> 42% in 2013)

SPIRITUALITY AND RELIGION: MĀORI SPIRITUALITY

• Wairua (spirituality) is an important concept for Māori
  • It is 1 of 4 cornerstones of Hauora (Māori health)
  • Māori have always recognised the importance of wairua (spirituality) for health and many Māori consider it to be the most significant requirement for wellbeing (Tāne Ora Alliance, 2016)
  • For Māori, spirituality is also intimately connected with issues of empowerment, threatened identity and life purpose (Abbott & Durie, 1987)
LITERATURE REVIEW

• Religion and spirituality can have a positive impact on mental health (Bein, 2014; Chai, Krägeloh, Shepherd & Billington, 2012; Krägeloh, Henning, Billington & Hawken, 2015; O’Brien, Denny, Clark, Fleming, Teevale & Robinson, 2013)

• Spirituality and religion in psychology
  - Religion was seen as pathological and irrational (Azar, 2010; Bartholomew & O’Dea, 1988)
  - Should be kept outside of therapy because it would be problematic (Gerson, Allen, Gold & Kose, 2000)
  - Increased awareness and acceptance (Atan & Hernandez, 2004; Eck, 2002)
  - However, negative attitudes still exist. A national sample of 258 APA psychologists that half of those who reported having no religious affiliation did not believe religion can be beneficial to mental health. (Delaney, Miller & Bisonó, 2013)
  - Lack of confidence to integrate spirituality and religion (Begum, 2012; Rosemarin, Green, Pirutinsky & McKay, 2013) and lack of training (Begum, 2012; Everts & Agee, 1995; Florence, 2009; Kilmer, 2012; Mueller, 2012; Rosemarin et al., 2013)
  - Research suggests the inclusion of spirituality and religion in clinical practice produces positives results for clients (Worthington, Hook, Davis & McDaniel, 2011)
  - Clients want it too (Aten & Hernandez, 2002; Bergin & Jensen, 1990; Rose, Westefeld & Ansley, 2001)

THE PRESENT STUDY: RATIONALE

• Update research
  - “The world has changed dramatically, creating a different climate within which to see the role and future of research on religion and counselling” (Worthington, Kunisu, McCullough & Sandage, 1996, p. 480)

• New Zealand context
  - Inclusive of Māori spirituality
  - Studies are predominantly US and UK based

• Focus on psychologists
  - Greater body of literature in counselling

• Qualitative research
  - Survey-based studies vs. rich data

• Increase awareness, understanding and confidence to approach religious and spiritual content in therapy
THE PRESENT STUDY

• Six psychologists in New Zealand
• Qualitative
  • Semi-structured interviews
  • Inductive, interpretative thematic analysis
• Research question
  • “What are the experiences of psychologists in integrating spirituality and religion into clinical practice?”

RESULTS:
THEMES & SUB-THEMES

1. The meaning of spirituality
   • Māori: being held by ancestors, including whakapapa
   • Values, beliefs, religion
   • Holistic view of person

2. The importance of spirituality and religion for therapy
   • Relevant in therapy (loss, grief, guilt, meaning in life) – the foundation; holistic view
   • Beneficial
     • Psychological outcomes/positive impact on mental health
     • Therapeutic relationship

3. Integrating religion and spirituality into practice
   • Flexible (integrating spirituality and religion into multiple modalities such as CBT, DBT and ACT)
   • How to: acknowledgement, acceptance, assessment, godly qualities etc; using karakia, myths and stories; involving kaumatua, kuis and kaitiaki

4. Barriers
   • Lack of knowledge (training, workshops…etc.)
   • Negative attitudes around spirituality and religion
     • Resistance and shame
     • Anxiety (both clients and psychologists)
   • Clients harmed by spirituality and religion
     • Need for discernment (psychosis vs. spiritual experience)
     • Challenging dysfunctional spiritual and/or religious beliefs
1. THE MEANING OF SPIRITUALITY

Māori: being held by ancestors, including whakapapa

• “There’s a way of being held by an essence of your ancestors… the spiritual stuff about the way we thought about it as Māori was much more about balance and harmony with nature and it makes sense in terms of our whakapapa.”

• “The Māori and Pacific community… have worked so hard to have recognition of the fact that spirituality and religion are really closely intertwined with culture and that they’re very significant in people’s lives.”

• “[Spirituality] just comes if they are Māori… I think it’s really easy for Māori because it’s embedded into our culture.”

1. THE MEANING OF SPIRITUALITY

Values, beliefs, religion

Spirituality is…

• “the bigger picture in terms of the spirit world and the spirit realm”

• “so broad and unique from person to person”

• “a broad term. It could include specific religious beliefs… for me personally, it would be related to Christianity.”
1. THE MEANING OF SPIRITUALITY

Holistic view of person

• "[Spirituality] is a crucial part, especially if one comes from a more holistic approach.”

• “[Spirituality] means everything. It contains every other aspect of my life rather than being another aspect of my life. So it’s the core of who I am and gives meaning to everything I do.”

2. THE IMPORTANCE OF SPIRITUALITY AND RELIGION FOR THERAPY

Relevant in therapy (loss, grief, guilt, meaning in life) – the foundation; holistic view

• “There’s a lot of questions, too, that come up around death. You know, people are facing their own mortality; not just people who might be unwell, but when you start looking at yourself and doing therapy, often you end up with existential type of questions, and so I really enjoy having those conversations with people… a lot of people are interested in spirituality.”

• “Many people are looking for meaning… that’s a really human pursuit.”

• “Some of them, are doing a lot of questioning about the meaning of life… ‘what if I get a good job, make some money, I make a difference in people’s lives but then I die? Why not just kill myself now?’ … ‘What’s the point of all this running around, being busy, having families, doing things that you love but at the end of the day, you’re going to die? So what is the ultimate value?’ And I feel like those questions are placed in everyone’s heart… all of them so far that I have seen, they’ve been non-religious, they’ve been atheists, the kids who fit into that category.”
2. THE IMPORTANCE OF SPIRITUALITY AND RELIGION FOR THERAPY

Beneficial
For psychological outcomes/positive impact on mental health
• “I’ve worked with clients whose spirituality has been the most crucial factor in their recovery.”
• “It was like once she reconnected with God, a whole lot of other things seemed to fall into place a lot faster in therapy.”

For the therapeutic relationship
• “It can allow the client to feel understood, empathised with, they know that you get it. And that’s a huge part of the therapeutic relationship.”
• “When clients know that they are really safe to talk about their faith and that you have a base-level understanding and you feel so comfortable talking about it you can check out the things where you might see differently and when they know you are not just going to tolerate them talking about it but you’re interested genuinely. I think that helps build rapport and trust and openness.”

3. INTEGRATING RELIGION AND SPIRITUALITY INTO PRACTICE

Flexible (integrating spirituality and religion into multiple modalities e.g. CBT, DBT and ACT)
• “For instance, why they feel so guilty and then it’s about asking them ‘okay in terms of your beliefs what would be helpful in this situation?’ When people feel guilty… ‘could someone who has similar beliefs to what you have… what would they recommend you actually do?’”
• “So, the wise mind, Christians call the voice of God. It’s that voice within that when you’re still and quiet, tells you what is the thing that is going to be effective for you. So, it ties very well.”
3. INTEGRATING RELIGION AND SPIRITUALITY INTO PRACTICE

How to: acknowledgement, acceptance, assessment

• “It all starts from a better, more thorough assessment, so having part of the assessment that explores spirituality. ‘Does the person have a spirituality?’ , ‘How important is it to them?’, ‘What part of life does it contain?’ , ‘How would they like it integrated in therapy?’”

• “Allowing those various dimensions to be able to come into the process if that’s relevant and important, not cutting off or denying those realities.”

• “It opens the door because then they know it gets acknowledged then people are more free to talk about it. Otherwise they do tend to be quiet about it.”

• “Clients generally are pretty good at reading us as clinicians, and if they perceive that the clinician would be open to that, then they would share it. But if they perceived they didn’t, they wouldn’t.”

3. INTEGRATING RELIGION AND SPIRITUALITY INTO PRACTICE

How to: godly qualities, using karakia, myths and stories, involving kaumatua, kuia and kaitiaki

• “It’s more about spirituality and the essence of that and being able to help clients to see that they were and are descended from these godly beings and they will have those godly qualities, all those nice qualities and they’ll also have some of the not-so-nice qualities. And so, really for me, it’s about a balancing up of which of those ancestors are you most listening to and I’ve used it almost like a self-analysis. If I’m working with young people, ‘which of the gods from your area, Ngāpuhi or wherever do you know about who were either acknowledged for those qualities or who have a particular relevance for you?’”

• “I’ve had young kids write their own karakia for certain bits where they felt they needed more strength… it creates what we call whakawātea, that space… a clean, cleansing space where you can bring into it what you need to bring into it and the end it will be clean and cleansing again.”
4. BARRIERS

Lack of knowledge (training, workshops…)

• “One thing that struck me… is just how much more need there is for training on integrating spirituality in clinical practice and how much our clients need it… there was a research… showed that people really wanted their spirituality integrated.”
• “And I think including spirituality a bit more in training would really be helpful as well because… it's not always so clear how you actually do it in your practice.”

4. BARRIERS

Negative attitudes around spirituality and religion

Resistance and shame

• “For some reason, spirituality is less tolerated than other issues. Abuse, trauma all seems to be tolerated. Even anger, discontent, all of those kinds of stuff, but I think spirituality is less well acknowledged”

Anxiety (both clients and psychologists)

• “The spiritual stuff is often the stuff that's left behind. Even though for Māori we have great models which says it's there, but I will tell you that a lot of Māori clinicians leave it out because either they don't believe it themselves or they are worried that it might be off-putting for the young person.”
• “There can be a lot of fear in practising… spirituality or integrating a spirituality… people are really scared of prayer or asking those questions because they may impose values or they may do the wrong thing.”
4. BARRIERS

Clients harmed by spirituality and religion

Need for discernment (psychosis vs. spiritual experience) and challenging dysfunctional spiritual and/or religious beliefs

• “Being able to be discerning about when somebody’s faith or the way their faith is being practised is actually problematic, when to challenge it and when to support it, and to be able to have confidence in that discernment.”

• “Things like a client who prays regularly to God having that put under the box of disorder or disease and especially if clients say that they hear back from God. That’s usually not viewed positively in mental health services, whereas for most of us that’s (laughs), you know, part in parcel of a relationship with God.”