

Talking with Clients about Spiritual Issues and Concepts

Holly Sapp, MA, LPC

Concepts from Spiritual Competence Training in Mental Health facilitated by
Dr. Ken Pargament and Dr. Michelle Pearce

About Holly

- 2011: Master of Arts in Marriage and Family Therapy, Southern Nazarene University
- 2014: Licensed Professional Counselor
- 2014-2016: Private Practice—children, adults, couples, families
- 2016: LPC Board Approved Supervisor
- 2016-2021: Director, Deer Creek Public Schools Health and Wellness Program
- 2021-Present: Executive Clinical Director, Renew Counseling Center, Southern Nazarene University



Spiritual Competence

- “a form of cultural competence that deals with spirituality and religion, specifically clients’ individually constructed spiritual worldviews” (Hodge, 2016)

3 Activities of Multicultural (and therefore spiritual) competence

Attitude (engage in process of becoming aware of own assumptions, biases, etc)

Knowledge (attempt to understand clients' worldview without judgement)

Skills (implement relevant and sensitive intervention strategies with culturally different clients)

Attitudes

Respect and empathy

Appreciating diversity

Aware of how my own
background influences
my clinical practice

Knowledge

DIFFERENCE
BETWEEN
SPIRITUALITY AND
RELIGION

DIFFERENCE
BETWEEN
SPIRITUALITY AND
PSYCHOPATHOLOG
Y

HOW/WHY
SPIRITUALITY CAN
BE A RESOURCE

HOW/WHY
SPIRITUALITY CAN
BE HARMFUL

Skills

01

ASSESSING
RELIGION/SPIRITUALITY IN
REFERENCE TO MENTAL
HEALTH

02

HELPING MOBILIZE
RESOURCES

03

HELPING IDENTIFY AND
RESOLVE
SPIRITUAL/RELIGIOUS
PROBLEMS AFFECTING
MENTAL HEALTH

04

RECOGNIZING AND
ACKNOWLEDGING LIMITS
AND KNOWING WHEN TO
MAKE REFERRALS—TO
CLERGY, RELIGIOUS
LEADERS, AND SPIRITUAL
CAREGIVERS

Why Integrate Spirituality and Therapy???

It's a fact, and it's a cultural part of who someone is. It really can't be separated from the therapy process.

Believe it or not, spirituality is linked to positive physical and mental health outcomes. Life satisfaction, less anxiety, lower suicide rates, faster recovery from depression, less delinquency/criminal activity, greater marital stability/satisfaction

Also, it actually can be harmful sometimes, so we need to deal with that in therapy!

A lot of clients ARE spiritual and want to incorporate their beliefs into their therapy.

It's ethical.

Ethical Challenges

Dual Relationships (therapist/religious leader OR therapist as part of same religious community)

Denigrating Religious Authority

Imposing Religious Values

Violating Work Setting Boundaries

Practicing outside boundaries of competence

So—how and when do we talk about spirituality in therapy?

- When we can incorporate spiritual resources that will be helpful to the client
- When the client brings up a spiritual problem
- When we notice that a client is being hindered by a “life limiting form of spirituality.”

Bringing it into the room

- Some great questions to ask in intake and while building rapport:
 - Do you see yourself as a religious or spiritual person? If so, in what way?
 - Are you affiliated with a religious or spiritual community? If so, which one?
 - Has your problem affected you religiously or spiritually? If so, how?
 - Has your religion or spirituality been involved in the way you have dealt with your problem? If so, in what way?

Utilizing Spiritual Resources in Therapy

- You have permission!
- Be Specific and Client Focused.
- Be Patient
- Be Respectful.
- Stay In Your Professional Boundaries
- Let Your Client Be the Expert

Life-Limiting Forms of Spirituality

- Unresolved Spiritual Struggles
- Spiritually-based "Over-Scrupulosity"
- Religious Passivity
- Religiously-based abuse and extremism

Addressing Spiritual Problems

1. Listen
2. Mindfulness
3. Broaden Narrow Expressions of Spirituality
4. Don't be afraid to approach spiritually-based resistance to change.
5. Collaborate with Spiritual Leaders.

Life-Affirming Spiritual Resources

- Social support from client's religious community (e.g., sharing a meal or having someone to talk with)
- Volunteering opportunities, civic involvement, and/or participation in social change
- Religious services (e.g., prayer, worship, Bible study, retreats, etc.)
- Using role models from religious and spiritual communities (e.g., figures from religious literature and history, such as Jesus, Muhammad, Buddha, Mother Teresa, Gandhi, Martin Luther King, the Dalai Lama, etc.)
- Engaging in activities with one's spiritual community (e.g., bingo, quilting, seminars)
- Functional support from one's spiritual community, such as meals, clothing, and financial support
- Encouraging client personal prayer
- Meditation/Mindfulness
- Spiritual rituals
- Reading Holy Scriptures
- Chanting or drumming
- Almsgiving
- Journaling
- Religious bibliotherapy (i.e., religious texts, stories, metaphors, etc.)
- Affirming client confession/repentance
- Labyrinth walking
- Yoga, Tai Chi, or Qigong
- Spending time in nature
- Visiting a sacred space
- Making a pilgrimage
- Helping clients find a sense of meaning
- Using spiritual coping methods (e.g., finding strength and comfort from God, viewing oneself as in partnership with God, reappraising a situation in a benevolent way, seeking spiritual purpose, active spiritual surrender)
- Cultivating spiritual virtues, such as forgiveness, gratitude, hope, and humility