Defining Spirituality/Religion

Spirituality/Religion and its role in promoting physical and behavioral health has been embraced in many public health settings as an important tool to promote wellness. Harold Koenig (2009), a well known researcher in spirituality and health, writes that "religion" involves the beliefs, practices, and rituals related to the sacred; and that "spirituality" is more difficult to define, but is generally considered more personal and something "people define for themselves that is largely free of the rules, regulations, and responsibilities associated with religion." The use of the term spirituality in healthcare has grown from attempts to be more inclusive in pluralistic healthcare settings, and to address the needs both of religious and non-religious people (Koenig, 2009). Researchers working on this important topic often use the terms religion - where religion is a multidimensional construct not limited to institutional forms of religion - and spirituality synonymously (Koenig, McCullough, & Larson, 2001).

Spirituality/Religion in the Lives of People with Behavioral Health Disorders: Why is it Important for Providers to Consider?

There are a number of reasons why providers should consider talking about spirituality with individuals with behavioral health disorders. Most importantly, studies have shown that individuals with higher spirituality and religiosity levels had an 18% reduction in mortality rates (Lucchetti, Lucchetti, & Koenig, 2011).
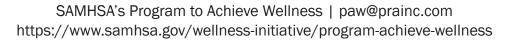
Symptom Management

Individuals who identify as being religious or spiritual report lower rates of psychiatric conditions such as depression and anxiety. Not only that, individuals who identify as being religious or spiritual report experience improved health outcomes with chronic conditions such and cardiovascular disease and type-2 diabetes (George, Larson, Koenig, & McCullough, 2000), which decreases risk of premature mortality.

Spirituality and Recovery from Serious Mental Illness

Spirituality/religion is an important part of recovery for individuals with serious mental illness; and many persons would like treatment providers to be made aware of their spiritual beliefs and have this information considered as a part of their treatment planning (D'Souza, 2002). To date, the systematic research published in the mental health literature does not support the argument that religious involvement usually has adverse effect on mental health and recovery. Rather in general, studies find that religious involvement is related to better coping with stress and less depression, suicide, anxiety, and substance abuse (Koenig, 2009).

Spirituality and Social Support

A significant number of individuals living with psychiatric disabilities report that they have used religion to help them cope (Harvey & Silverman, 2007). Religious beliefs can provide a sense of meaning and purpose during difficult life circumstances. Unlike many other coping resources, religion is available to anyone at any time, regardless of financial, social, physical, or mental circumstances (Koenig, 2009). Accessing religion can also create opportunities for building support networks, which may be helpful in dealing with the stressors individuals living with behavioral health conditions encounter (Corrigan et al., 2003).

Spirituality and Culture

Cultural factors may influence how individuals seek support and access services. For example, individuals experiencing a behavioral health crisis may be more likely to seek support from faith-based organizations. Consequently, it is important to consider religious and faith-based organizations as valued partners. In other words, considering cultural factors such as spirituality/religion can improve engagement and retention.

Strategies for Talking About Spirituality/Religion with Individuals with Serious Mental Illness

Focus on Meaning

As noted earlier, people may use terms such as Spirituality and Religion interchangeably. Relying on a particular definition may not be the most successful strategy for engaging individuals with serious mental illness. However, engaging people in conversations about the strategies they use to find a sense of meaning and purpose in life and maintain a sense of hope when faced with adversity (overlapping concepts in spirituality, religion, and faith) can create an opportunity for more open dialogue between individuals being served and providers.

Make Use of Existing Resources

Tools such as *Cultural Activation Prompts* (CAPs) can help. Created by the Nathan Kline Institute Center of Excellence in Culturally Competent Mental Health, CAPs is a tool for promoting cultural activation. It includes a list of 15 cues for consumers to use to convey information to caregivers on what culturally matters to them in receiving care. Through the use of CAPs, individuals receiving services can learn strategies for starting a cultural conversation with their caregivers and providers, including but not limited to their religious/spiritual beliefs. Providers can explore the CAPs, too, and actively work to integrate the tool into service provision. To learn more, stream the Cultural Activation Training Series from SAMHSA's Program to Achieve Wellness.

Be Understanding and Communicative

When talking with the individuals you serve about spirituality, it's important to be understanding. Understanding entails knowing that the spiritual beliefs of the individual you're working with may not be in alignment with your own, while also understanding the myriad of different belief systems that exist. Not only are there a number of belief systems, religions, and faiths, but people exist at different developmental stages of their own spiritual journeys. You may meet an individual who has never considered spiritual wellness as a component of their well-being, whereas another may be a lifetime follower of a particular faith. Be mindful and understanding of these differences and strive to make recommendations or suggestions that meet the individual where they are. This communication can help foster a sense of inclusion. Even if you do not share the same beliefs as the individual you're working with, listen to them share and cooperate to make relevant treatment plans or goals for achieving optimal health and well-being. Clinicians need to be aware of the religious and spiritual activities of the individuals they serve, and appreciate their value as a resource for healthy mental and social functioning.

For technical assistance related to the role of spirituality and religion in wellness, please contact SAMHSA's Program to Achieve Wellness at paw@prainc.com.

References

Corrigan, P., McCorkle, B., Schell, B., & Kidder, K. (2003). Religion and spirituality in the lives of people with serious mental illness. Community Mental Health Journal, 39(6), 487–499.

D'Souza, R. (2002). Do patients expect psychiatrists to be interested in spiritual issues?. Australasian Psychiatry, 10(1), 44-47.

George, L. K., Larson, D. B., Koenig, H. G., & McCullough, M. E. (2000). Spirituality and health: What we know, what we need to know. Journal of Social and Clinical Psychology, 19(1), 102.

Harvey, I. S., & Silverman, M. (2007). The role of spirituality in the self-management of chronic illness among older African and Whites. Journal of Cross-Cultural Gerontology, 22(2), 205-220.

Koenig, H.G. (2009). Research on religion, spirituality, and mental health: A review. The Canadian Journal of Psychiatry, 54(5), 283–291.

Koenig, H.G., McCullough, M.E., & Larson, D.B. (2001) Handbook of religion and health. Oxford University Press, New York. doi:10.1093/acprof:oso/9780195118667.001.0001

Lucchetti, G., Lucchetti, A.L.G., & Koenig, H.G. (2011). Impact of spirituality/religiosity on mortality: Comparison with other health interventions. EXPLORE: The Journal of Science and Healing, 7(4), 234-238.

Pantell, M., Rehkopf, D., Jutte, D., Syme, S. L., Balmes, J., & Adler, N. (2013). Social isolation: A predictor of mortality comparable to traditional clinical risk factors. American Journal of Public Health, 103(11), 2056–2062. https://doi.org/10.2105/AJPH.2013.301261

Pargament, K. (2013). What role do religion and spirituality play in mental health? Retrieved from http://www.apa.org/news/press/releases/2013/03/religion-spirituality.aspx