A GUIDE TO LEADING SPIRITUALITY SUPPORT GROUPS IN BEHAVIORAL HEALTH CARE SETTINGS

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INTRODUCTION:

Spirituality is an essential element of human experience. It represents the part of us that searches for meaning, seeks out transcendent experiences, and recognizes that a force exists beyond the material world. Spirituality encourages hope and purpose. It can help foster positive emotions, coping skills and recovery in the face of behavioral health challenges. Although many important spiritual resources come from religious practices, spirituality and religion are not the same. Research has shown a multitude of connections between having faith and living well with behavioral health challenges, yet most professionals have little training in the area of spirituality.

A Guide to Leading Spirituality Support Groups in Behavioral Health Care Settings enables behavioral health professionals to offer truly holistic care by providing a place for participants to explore spirituality as part of their overall recovery. Spirituality support groups foster the connection between spirituality and recovery by helping people with behavioral health challenges to identify their existing spiritual resources and use their belief systems as a source of strength.

This guide provides concrete tools for group facilitators to use as they help participants understand their own spiritual beliefs, make meaning out of life’s losses, and foster an awareness of the spiritual dimension of life. Facilitators will learn how to assist group participants to identify unhealthy belief systems, resolve spiritual dilemmas, and embrace supportive spiritual practices.

Why should we talk about spirituality?
Research has demonstrated significant positive associations between spiritual practice and involvement and a wide range of behavioral health indicators. In summarizing current research on spirituality and behavioral health, Dr. Larry Culliford suggests that religious and spiritual beliefs and practices “help prevent many physical and [behavioral health challenges], reducing both symptom severity and relapse rate, speeding up and enhancing recovery, as well as rendering distress and disability easier to endure... Furthermore, psychiatric patients have consistently identified spiritual needs as an important issue, and spiritual care as contributing to symptom relief and general well-being.”

In the realm of addiction treatment, twelve-step programs put belief in a Higher Power at the center of their recovery model. Exploration and understanding of one’s spirituality can be important to people with both addictions and behavioral health struggles.

What is spirituality?
Spirituality is that which gives people meaning and purpose in life, leads to the development of a personal value system, and connects one to something larger than the self. It encourages one to seek the best relationships with ourselves, others, and what lies beyond. “Spirituality emphasizes the healing of the person, not just the disease. It views life as a journey, where
good and bad experiences can help you to learn, develop and mature. For many, this takes the form of religious observance, meditation, prayer, belief in a Higher Power, or a personal relationship with the Divine. For others, it can be found in nature, art, music, and secular community.

Each person has a unique form of spiritual expression and can benefit from help in identifying their spiritual type. It is important to remember that one’s personal spirituality may change over time in response to life experiences. These changes can lead to a crisis of faith which can in turn lead to behavioral health challenges.

Spirituality can be characterized not only by beliefs and practices, but also by the “fruits of the spirit,” comprised of unique spiritual values and skills. Dr. Culliford identifies spiritual values, such as: “kindness, compassion, generosity, tolerance, patience, honesty, creativity, joy, humility, and wisdom.” He identifies spiritual skills, such as: “being able to create a still, peaceful state of mind (as in meditation), developing above-average levels of empathy, discernment and courage, having the capacity to witness and endure distress while sustaining an attitude of hope, being self-reflective and honest with oneself, and being able to grieve appropriately and let go.”

**Are spirituality and religion the same?**

Spirituality and religion are similar, but not the same. Spirituality is the innate human connection to something greater than the self. Religion is the particular structures, rituals, and beliefs that are created in response to the spiritual dimension of life. Spirituality is universal and personal; religion is particular and communal. Spirituality is experiential and in the moment; religion provides continuity, accumulated wisdom, morals, and ethics. Each has a shadow side as well; spirituality can become too self-oriented, and religion can become rigid and dogmatic.

For some, religion provides spiritual experiences and for some, it does not. People who are disengaged from religious traditions may find it difficult to connect to their spirituality, because they view it as synonymous with the religion they have rejected. In a spirituality group, an important role for the group leader is to clarify the difference between religion and spirituality in order to help participants identify and access their own spiritual experiences, beliefs, and resources. Participants should be encouraged to explore what has heart and meaning for them, whether or not there is a belief in God or not. Several of the handouts at the end of the guide have been designed to help participants identify their spiritual inclinations and the practices that nurture their spirit.

**What difference can spirituality make?**

In Dr. Harold Koenig’s research on religion and mental health, he has identified ten ways in which spirituality helps to reduce stress, improve coping, and strengthen recovery:

1. Promotes a positive world view
2. Helps to make sense of difficult situations
3. Gives purpose and meaning
4. Discourages maladaptive coping
5. Enhances social support
6. Promotes other-directedness
7. Helps to release the need for control
8. Provides and encourages forgiveness
9. Encourages thankfulness
10. Provides hope.

**Can spirituality be harmful?**

“Spiritual distress and spiritual crisis occur when individuals are unable to find sources of meaning, hope, love, peace, comfort, strength and connection in life, or when conflict occurs between their beliefs and what is happening in their life. This distress can have a detrimental effect on both physical and mental health.”

Sometimes spiritual beliefs and activities can be unhelpful or damaging. They can “induce excessive guilt, shame, and fear with [their] prohibitions on unacceptable behaviors. They can foster social isolation and low self-esteem in persons... behaving in ways not sanctioned by the religious community.” At times, spirituality can lead to excessive rigidity and dogmatic thinking. At its worst, spiritual or religious authority can be manipulated for personal gain and used to abuse others.

Here are some areas for a facilitator to keep in mind to assess healthy and unhealthy beliefs. These are just the beginning of a dialogue that takes into account the wide variety of spiritual, religious, and cultural norms.

- Do beliefs cause pain, suffering, and stress, or peace and acceptance?
- Do beliefs help one connect to community, hope, justice, or morals?
- Do beliefs foster a sense of interconnectedness?
- Do beliefs reinforce self-centeredness or connection to other people?

**What are the differences between spirituality and therapy groups?**

Although taking place in a behavioral health setting, spirituality groups differ from therapy groups in several ways. Unlike in a therapy group, the goal of the group is not psychological improvement, rather it is the acceptance of the person as they are. Group leaders do not need to know particular diagnoses, and they should allow participants to describe and define their own sense of spirituality. Spirituality groups can also be led by a member of the clergy with clinical training in chaplaincy.

However, in many ways the group norms are the same as in other types of support groups. Facilitators are responsible for creating a safe, open environment for personal exploration, encouraging participants to learn from one another, and maintaining clear boundaries.


**HOW TO USE THIS GUIDE**

**Who should be a group leader?**

This guide is designed to be used by trained behavioral health care professionals and assumes prior clinical experience. It will address the best ways to engage participants in an exploration of spirituality and common issues that may arise on that journey. It will assume understanding of group dynamics, working with challenging participants, and other typical aspects of group work.

Clergy are also excellent guides for spirituality support groups. Although anyone with interest and ability can facilitate a spirituality group, clergy have the added benefit of transference, as for better or worse, clergy are often seen as God’s emissaries. A clergy person provides a “safe” way to be angry with God or to find healing with a religious tradition that has been harmful. When a spiritual crisis is at the heart of someone’s problem, clergy are prepared to address it.

Clergy have different levels of education and professional development. It is strongly suggested if clergy are engaged to lead spirituality support groups that they be clergy who have clinical training; ideally clinical pastoral education training (CPE). CPE trains clergy of any religious denomination to work with people of ALL belief systems and religious backgrounds and also provides clergy with a basic education in counseling.

**One-time or ongoing groups:**

One-time groups can successfully educate, demystify the topic of spirituality, develop spiritual self-understanding, and provide a different way for participants to relate to one another. When possible, on-going groups with the same members meet weekly to encourage greater depth, insight, and group cohesion.

**Group resources:**

The following pages provide resources that may be beneficial to the group leader and include:

**A model group outline** – An example of a group outline is provided for group leaders to use; especially when just beginning.

**A group exercise** – A guided reflection on a spiritual experience and follow up discussion is especially useful with groups that are hesitant to express themselves.

**Handouts** – This guide was developed in an inpatient treatment facility, and the handouts are intended to be used for one-time discussions; although the materials can be used with an ongoing group. Each of the handouts is meant to be used as the focus of a 45-60 minute session. There is a brief summary of each handout with suggestions on how to use them.
GETTING READY TO LEAD A GROUP

Self-preparation:
Know thyself - As a facilitator, it is important to know your own beliefs, biases and limitations. Just as it is important to have self-knowledge in other arenas, it is helpful to reflect on your own religious or spiritual journey.

- Does spirituality play a role in your life today? If so, what is it? And if not, why?
- Are there spiritual expressions that you do not understand or about which you feel judgmental?
- Has religion ever caused you suffering?

Self-care - Take time to attend to your own spiritual needs before and after the group. This does not need to be long; a few minutes will work. Some leaders spend time in meditation, personal prayer, repetition of a meaningful phrase, or journaling. Taking time to tend to your spiritual needs is not only good self-care, but also better prepares you to understand the group participants.

Allow others to teach you – You don’t need to know everything about spirituality and religion. It is okay to ask respectfully.

Go with the flow - Prepare ahead of time, but be willing to follow the conversation.

Supervision – Group leaders should have good clinical support and supervision to address and learn from the issues that arise for them in the group experience.

How to begin a discussion of spirituality
While formal programs offer structure, any of the following questions can be used as an opening for discussion. These questions are divided into questions about spiritual background, creating meaning, and understanding the impact of one’s behavioral health challenges on spirituality.

Spiritual background:
- What role, if any, does religion or spirituality play in your life?
- Has belief or faith been important in your life?
- Have you ever felt connected to something beyond yourself, a moment of transcendence?
- What religious or spiritual traditions were you exposed to growing up?
- Would you say you are spiritual or religious in any way?

Creating meaning:
- What gives your life meaning?
- From where do you draw strength and solace?
- When have you felt peace?
• What gives you hope?
• What nourishes your spirit?
• Why does your life matter?

Impact of behavioral health challenges:
• How do you understand your illness in light of what’s most important in your life?
• How does your struggle relate to faith?
• How has your experience of your illness changed your relationship to God?
• Is there a religious or spiritual practice that would be helpful?
• When have you had a spiritual moment? What did you learn from it?
• Do you feel there is a spiritual aspect to your current problem?

LEADING THE GROUP

Set a tone of openness and respect:
When beginning a group about spirituality, it is important to set a tone of openness and inclusion. Because religion and spirituality are such emotionally-charged topics, it may be helpful to address the challenges directly about what the group is and is not. Group leaders may need to pay special attention to participants for whom evangelizing is a part of their faith tradition and help contain their comments while guiding them to speak about their personal experience. Here are some general points for a facilitator to cover in the introduction:

Spirituality vs. Religion – “This is a spirituality discussion group; not a religious discussion group. For some of you, spirituality is found within religion and for some of you it is not. In a moment, we’ll discuss several definitions of spirituality. However, let’s be clear that some of you will have a personal relationship with a Higher Power, and some of you will not. Some of you have found great comfort in religion and some of you have had painful religious experiences. Everyone is welcome in this group and no one will try to convert you or tell you what you should believe.”

Acknowledge wide variation of spiritualities – “I want to acknowledge that there are a wide variety of spiritualities. In this room, there may be Christians, Jews or Muslims. There may be atheists or agnostics. Many of you may find spirituality outside of religion. Some of you may have a personal relationship with the Divine and some of you may not. Some of you may find meaning in science and some in nature. For the purpose of this group, they are all meaningful experiences and we will not judge or debate each other’s beliefs.”

Tolerate different beliefs - “As tempting as it is, we will not debate theology. Let’s assume there are many different beliefs in this room and they all will be respected. When you speak, please talk about your own beliefs. If someone says something that is against your beliefs, you can discuss what it raises for you. The purpose of this group is for you to understand your own spiritual nature and learn how to strengthen it to support your recovery.”
When to intervene:
Many people feel strongly about spirituality and religion. If the conversation gets too intense, the group leader will need to intervene. Here are some typical scenarios that may arise.

Telling others what to believe - “Thank you for your words, it sounds like your beliefs are very important to you. However, for the purpose of this group, you must speak only for yourself. We are not going to tell others what to believe, even if we think it will help them.”

Denigrating another’s beliefs – “For the purpose of this group, we are going to respect each other’s beliefs. You’ve told us what you don’t believe in; now tell us what you do believe in.”

Feeling attacked - “It seems that what was just said was very upsetting to you. However, we aren’t going to debate our beliefs right now. Let’s stay focused on what this brings up for you.”

Being abstract - Sometimes a group member will talk about religion in the abstract and begin to discuss all the things s/he has learned about different religions, often as a way of pointing out how inconsistent and fantastical religion can be. In these situations, the leader will need to stop the participant and ask what s/he does believe in.

Some responses you may encounter:
“How can I believe in something that I can’t see?” or “How can you prove there is a God?” Sometimes participants struggle with the intangible nature of faith. In response, the leader can affirm the challenge of believing in something that can’t be seen or touched, compare to other abstract beliefs such as love or justice, and refocus on what they do believe in.

“God has abandoned me.” For someone who believes in God, but feels all alone, the leader should affirm this feeling as a common experience. It is often called the “dark night of the soul” and reflected throughout the psalms and other sacred literature. It may be helpful to focus on smaller moments of God’s presence in their lives and even the experience of one’s own longing. It can also be helpful to ask if other people in the group have ever felt this way.

“It is not okay to be angry at God.” Many people have been taught that they can’t be angry at God. The group leader can reflect on the many Biblical expressions of arguments with God in Psalms, Job, and the story of Abraham. A personal relationship with a Higher Power should include all of ourselves, not just the easy parts.

“If there really is a God, then why do good people suffer?” In some ways there is no answer to this question. It is the struggle at the heart of most religious traditions. The group leader can affirm the power of this question and ask the group how they respond. It is sometimes helpful to reflect on the ways a Higher Power can be present in the midst of suffering.

“There must be something wrong with me, why else is God punishing me?” It is common for people who are suffering to feel that they are being punished by God. The leader can help participants focus on God’s unconditional love.
GROUP RESOURCES:

Model outline:
Set the stage (10 minutes) – Leader introduces topic, reviews group rules, and describes the purpose of the group. These will be the same as for a psychotherapy group (respect, boundaries, confidentiality, etc.) and will not be elaborated on here. It is important to review the areas identified above under “Setting a tone of openness and respect.”

Begin with definitions (10 minutes) - As mentioned above, it is useful to start the group with a definition of spirituality and a discussion of the differences between religion and spirituality. Ask group members for definitions and build on their responses. Often there is a lot of wisdom among participants and what begins as a brief opening exercise becomes an engaging conversation. Use the handout “What Is the Difference between Spirituality and Religion?”

Share spiritual histories (10-20 minutes) - After a discussion of group norms and definitions, new groups should begin with participants sharing their religious or spiritual histories. For this exercise, it is go around the room so everyone has a chance to speak (or pass). Expect all types of responses: some people will simply state the religion they grew up with, others may describe their evolution in or out of a religious tradition, and some may share moving stories of revelation. This is also the point in the conversation where participants may begin to express anger or pain about religious experiences.

Discussion (10-20 minutes) – Use this time to delve into the issues already raised by participants about their spiritual experiences. If a number of people have shared meaningful experiences, it may be useful to ask: “What did you learn from that experience? How did it change you?” or any of the questions listed above under “How to begin a discussion of spirituality.”

If the group needs more structure, the leader may choose from the group exercise or group discussion handouts listed below. Leaders can also choose from any of the quotations listed in this guide or found elsewhere to spark conversation.

Wrap up (10 minutes) – Summarize the topics covered in the discussion and underscore a few highlights. Conclude group with another go-around and ask everyone to answer one of the following questions:
“How can you use what you’ve learned about your own spirituality to help your recovery?”
“What is one idea that you are going to take away from this discussion?”
“Mention something for which you feel grateful in this moment.”

Conclude with your wish for the participants. Although not a prayer, it can be powerful to acknowledge the pain and hope that arose in the discussion and hold it with compassion and hope. You may want to look around the room and simply wish everyone strength and healing on their journey.
**Group Exercise:**

This guided reflection on a spiritual experience can be a helpful way to engage a reticent group. After a discussion of the definition of spirituality, ask people to think of a spiritual moment.

“Think of a moment in your life that you would describe as:
  A powerful experience,
  A moment of transcendence,
  A time of connection to a Higher Power.”

“Close your eyes (if you want) and remember the moment:
  What was the setting?
  Were you sitting or standing?
  What did your body feel like?
  Were you alone or with others?
  Were you standing still or moving?”

“Choose three adjectives to describe your experience. Once you have those three words, let’s go around the circle and I would like everyone to tell us the three words you have chosen.”

Some participants will want to share their experiences and the leader can ask them to wait until after everyone has had a chance to share.

The group leader should summarize, mentioning as many of the words as s/he can remember, then open the group up to discussion of how they can foster these feelings in their lives.
**Handouts for discussion groups:**

*Each of the following handouts can be used as the basis for a discussion in a spirituality support group. Below you will find a summary of each handout and suggestions for their use.*

**What is the Difference between Spirituality and Religion?**

Many people see spirituality and religion as the same thing. Each of us has a spirit and spirituality is our personal experience and expression of that aspect of our being. Religion is a cultural and historical construct based on a common understanding of spirituality. For some religion provides spiritual experiences and for some it does not. For those alienated or disconnected from religious traditions, it may be difficult to connect to their spirituality, because they view it as synonymous with the religion they have rejected. This handout provides a way to begin a discussion about the difference between spirituality and religion to help participants identify and access their own spiritual types.

**Spiritual Types: Where Do You Belong?**

For participants struggling to understand their own spirituality, this handout offers a way to begin the exploration. Many people received strong messages about what spirituality should or should not be. For those who have rejected or moved away from the spirituality of their youth, it may be particularly challenging to find ways to see themselves as spiritual beings. This handout presents four different types of spiritual expressions and offers participants an opportunity to understand their own spiritual natures in order to find additional means of support. Especially helpful for people in recovery from addiction using the twelve-step program that are struggling to make sense of their “higher power.”

**A Tool Box of Spiritual Practices**

Spiritual expression can take many forms. This handout helps participants identify spiritual practices that speak to them and explore how to incorporate them into their lives. The list includes both traditional spiritual practices like prayer, worship services, or rituals, as well as non-traditional practices such as nature, creativity, and dance. Through discussion, participants may gain ideas from others, as well as support for integrating spirituality conscientiously into their lives. Facilitators should encourage realistic goal setting (i.e. three hours of silent meditation a day may not be possible for a busy single parent) and discussion of what gets in the way of incorporating these into one’s life. This list is not meant to be definitive, only a starting point.

**Powerful Words: A Vocabulary of Spiritual Life**

There are so many words that can be used to describe one’s spirituality. This handout can be used to begin an open discussion with participants about their spiritual interests and questions through an initial exercise in free association. Participants take several moments of quiet reflection (length dependent on your group) to make notes on their thoughts and associations with each word. Ask participants to identify words that feel important to them and use this as the beginning of the group discussion.
Spiritual Treatment Plan
After a group has had the opportunity to explore concepts of spirituality, this handout helps focus participants on realistic and actionable goals. Based on the phrase “reaching in, reaching out, reaching up,” the handout encourages participants to look at what nurtures their spirituality internally, in relationship to others, and in connection to the Divine. After spending time in personal reflection and journaling on the initial questions, participants can be invited to share with the group their plan. For ongoing groups, participants can periodically check in about their goals, receive support, and make changes as necessary.

True or False?
Sometimes religious aphorisms can sound false to a person living with behavioral health challenges. Although offered with the best intentions, they can interfere with one’s relationship with the Divine. Reverend Caroline Cupp, developed this list of commonly used religious statements for discussion in spirituality groups. After reading each statement, participants can describe times when they have heard these statements and whether they were helpful or harmful. When facilitating the discussion, it is important to note that while one statement might be deeply meaningful for one participant; it could also be very problematic for another participant. Special attention should be paid to encouraging participants to speak for themselves and through their own experience.

What Does It Mean for Prayer to “Work?”
Prayer is an integral part of most religious traditions. Therefore it may be useful to consider the topic directly, especially when someone has expressed frustration with prayer. Many people believe that prayer only “works” when we get what we’ve asked. If their prayers have gone unanswered, then people may feel that their higher power isn’t listening, has abandoned them, or doesn’t exist. The following list, created by Rabbi Amy Eilberg, offers alternative understandings of what makes prayer “work.” Read out loud and ask participants to identify which description best reflects their experience.
WHAT IS THE DIFFERENCE BETWEEN SPIRITUALITY AND RELIGION?

*Developed by Rabbi Elisa Goldberg*

<table>
<thead>
<tr>
<th>SPirituality</th>
<th>Religion</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Universal</td>
<td>• Particular</td>
</tr>
<tr>
<td>• Awareness of relationship with all of creation</td>
<td>• Cultural</td>
</tr>
<tr>
<td>• Sense of purpose and meaning</td>
<td>• Communal</td>
</tr>
<tr>
<td></td>
<td>• Material expression</td>
</tr>
<tr>
<td></td>
<td>• Rituals</td>
</tr>
<tr>
<td></td>
<td>• Provides: continuity, wisdom, morals/ethics</td>
</tr>
</tbody>
</table>

**Forms of Spiritual Expression**

- **Behaving** - actions- rituals, lifecycles, holidays, charity, “doing good”
- **Belonging** - community, culture, history
- **Believing** - faith, meaning, theology
- **Being** - experience of transcendence, life is a blessing
SPIRITUAL TYPES – WHERE DO YOU BELONG?

Developed by Rabbi Elisa Goldberg

Physical/ Body

“This is the day that God has made, let us rejoice and be glad in it.” (Psalm 118:24)
  o Find the presence of a higher power in the world around you
  o Appreciate the wonders of Creation
  o Enjoy rituals and liturgy
  o Values hands on activities

Intellect/ Mind

“The fear of God is the beginning of knowledge.” (Proverbs 1:7)
  o Interest in truth, justice, theology, law, covenant and logic
  o Meditate on principles and teachings
  o Find meaning in intellectual activities (i.e. text study)
  o Seek clarity, need beliefs to “make sense”

Emotion/Heart

“How good it is to dwell together as brothers and sisters.” (Psalm 113:1)
  o Prize harmony and warmth
  o Find sacred in relationships
  o Seek joy, love, and compassion
  o Value goodness and devotion

Meaning/Soul

“Where there is no vision the people perish.” (Proverbs 29:8)
  o Look for meaning, purpose, and hope
  o Contemplate the mystery of the Divine
  o Interest in symbol, metaphor, and transcendent experiences
  o Value imagination, creativity, and visions for the future
A TOOL BOX OF SPIRITUAL PRACTICES

Below is a partial list of practices that may help you cultivate spirituality in your life. Take a look at the list and see what speaks to you. Ask what nourishes your spirit? How would you incorporate these practices into your life? What would you add to the list?

- Belong to and participate in a faith community
- Take part in rituals, symbolic practices, and other forms of worship
- Read sacred and inspirational literature
- Practice forgiveness of yourself and others
- Listen to or make music
- Spend time in deep reflection, meditation, or prayer
- Participate in groups that involve trust and cooperation (i.e. sports)
- Observe the Sabbath – stop doing and enjoy being
- Engage in dance or other types of physical expression
- Involve yourself in acts of kindness to others
- Spend time in nature
- Appreciate the arts
- Be creative – painting, knitting, cooking, gardening...
- Share your spiritual journey with others
- Keep a journal
What comes to mind when you read each of these words? Take a few minutes to write down your thoughts and associations with each word. Circle any words that seem important to you and that you would like to discuss more.

- Faith
- Awe
- Meaning
- Wholeness
- Healing
- Gratitude
- Connection
- Forgiveness
- Compassion
- Peace
- Hope
- Love
- Purpose
- Acceptance
- Grace
SPIRITUAL TREATMENT PLAN

**Identify your spiritual resources**
*List what helps you move from:*

Vulnerability -> Resilience ________________________________
Helplessness -> Agency ________________________________
Despair -> Hope ________________________________
Emptiness -> Purpose ________________________________
Isolation -> Communion ________________________________
Resentment -> Gratitude ________________________________
Sorrow -> Joy ________________________________

**Threefold Path: In/Out/Up**
*Spiritual healing involves nurturing a relationship with yourself, others, and the Divine. Write the practices that support you in each of these areas below.*

**Reaching In (Self)**

**Reaching Out (Others)**

**Reaching Up (Higher Power)**

**The Plan**
*Choose three activities that you will to commit to trying for a month:*
1) 
2) 
3)
True of False?
Developed by Reverend Caroline Cupp

Sometimes religious statements can be harmful to a suffering person and prevent the development of a relationship with the Divine. Discuss the following statements below and see if they are helpful or harmful to you.

1) God doesn’t give you more than you can handle.

2) If I’m suffering, I must have done something to deserve it.

3) Forgiveness has its limits – You can’t be forgiven for something wrong you do over and over again.

4) Evil and pain are part of God’s plan for the world.

5) It’s not ok to pray for things I want.

6) If I really trusted God, I wouldn’t need medicine.

7) If I never prayed before, it’s wrong to start when things are going badly.

8) God is good all of the time.
What Does It Mean for Prayer to “Work”?
Adapted from list created by Rabbi Amy Eilberg

Prayer is an integral part of most religious traditions; therefore it may be useful to consider the topic directly, especially when someone has expressed frustration with prayer. Often we may believe that prayer only “works” when we get what we’ve asked. The following list offers alternative understandings of what makes prayer “work.” Read out loud and ask participants to identify which one best reflects their experience.

1) Prayer may “work” in that one may have asked God for something which indeed came about.

2) Prayer may “work” by invoking a greater sense of God’s presence.

3) Prayer may “work” by way of distraction, momentarily pulling the one who is ill out of his or her pain and suffering into a place of beauty or transcendence.

4) Prayer may “work” by way of focusing more deeply on the pain or discomfort in the suffering person’s life; in this way, prayer can be deeply grounding and clarifying.

5) Prayer may “work” by quieting or centering the self.

6) Prayer may “work” by significantly connecting the one praying or being prayed for with their community and tradition.

7) Prayer may “work” by helping the one praying or being prayed for to connect to a deep level of the self which is already healed and whole, reminding the person of his or her essential wholeness.

8) Prayer may “work” in focusing the pray-er on the blessings in his or her life, enabling him or her to magnify his or her sense of gratitude.

9) Prayer may “work” by helping to focus on what really matters in life.

10) Prayer may “work” by connecting people to each other.

SPIRITUAL ASSESSMENT TOOLS
The following sample of Spiritual Assessment Tools are presented here to give the facilitator greater understanding of concepts and language to address spiritual issues. Some of these take the form of questionnaires and others delineate areas for explorations. Each of these could also be used as a worksheet for individual or group discussion.

The Minister as Diagnostician (Pruyser, 1976)
1. Awareness of the holy
2. Providence - how does trust or hope function?
3. Faith - to what does one commit oneself?
4. Grace or gratefulness - for what is the client grateful?
5. Repentance - how does this person manage transgression and guilt?
6. Communion - where is this person’s sense of community?
7. Vocation - what purpose is found in this person’s life and work?

FICA (Puchalski & Romer, 2000)x
F – Faith, Belief, Meaning: “Do you consider yourself spiritual or religious?” or “Do you have spiritual beliefs that help you cope with stress?”

I – Importance or Influence of religious and spiritual beliefs and practices: “What importance does your faith or belief have in your life? Have your beliefs influenced how you take care of yourself in this illness? What role do your beliefs play in regaining your health?”

C – Community connections: “Are you part of a spiritual or religious community? Is this of support to you and how? Is there a group of people you really love or who are important to you?”

A – Address/Action in the context of medical care: “How would you like me, your healthcare provider, to address these issues in your healthcare?”

HOPE (Anandarajah & Hight, 2001)x
H – Sources of hope, meaning, comfort, strength, peace, love, and compassion: What is there in your life that gives you internal support? What are the sources of hope, strength, comfort, and peace? What do you hold on to during difficult times? What sustains you and keeps you going?
O – Organized religion: Do you consider yourself as part of an organized religion? How important is that for you? What aspects of your religion are helpful and not so helpful to you? Are you part of a religious or spiritual community? Does it help you? How?

P – Personal spirituality/practices: Do you have personal spiritual beliefs that are independent of organized religion? What are they? Do you believe in God? What kind of relationship do you have with God? What aspects of your spirituality or spiritual practices do you find most helpful to you personally?

E – Effects on medical care and end-of-life issues: Has being sick (or your current situation) affected your ability to do the things that usually help you spiritually? (Or affected your relationship with God?) Is there anything that I can do to help you access the resources that usually help you? Are you worried about any conflicts between your beliefs and your medical situation/care decisions? Are there any specific practices or restrictions I should know about in providing your medical care?

FAITH (King, 2002)\(^{xi}\)
F – Do you have a Faith or religion that is important to you?

A – How do your beliefs Apply to your health?

I – Are you Involved in a church or faith community?

T – How do your spiritual views affect your views about Treatment?

H – How can I Help you with any spiritual concerns?

The 7 x 7 Model for Spiritual Assessment (Fitchett, 2002)\(^{xii}\)

1) Belief and Meaning — What beliefs does the person have which give meaning and purpose to their life? What major symbols reflect or express meaning for this person? What is the person’s story? Do any current problems have a specific meaning or alter established meaning? Is the person presently or have they in the past been affiliated with a formal system of belief (e.g., church)?

2) Vocation and Obligations — Do the persons’ beliefs and sense of meaning in life create a sense of duty, vocation, calling or moral obligation? Will any current problems cause conflict or compromise in their perception of their ability to fulfill these duties? Are any current problems viewed as a sacrifice or atonement or otherwise essential to this person’s sense of duty?
3) **Experience and Emotion** — What direct contacts with the sacred, divine, or demonic has the person had? What emotions or moods are predominantly associated with these contacts and with the person's beliefs, meaning in life and associated sense of vocation?

4) **Courage and Growth** — Must the meaning of new experiences, including any current problems, be fit into existing beliefs and symbols? Can the person let go of existing beliefs and symbols in order to allow new ones to emerge?

5) **Ritual and Practice** — What are the rituals and practices associated with the person's beliefs and meaning in life? Will current problems, if any, cause a change in the rituals or practices they feel they require or in their ability to perform or participate in those which are important to them?

6) **Community** — Is the person part of one or more, formal or informal, communities of shared belief, meaning in life, ritual or practice? What is the style of the person's participation in these communities?

7) **Authority and Guidance** — Where does the person find the authority for their beliefs, meaning in life, for their vocation, their rituals and practices? When faced with doubt, confusion, tragedy or conflict where do they look for guidance? To what extent does the person look within or without for guidance?

**FACT (LaRocca-Pitts, 2008)**

**F – Faith (or Beliefs):** What is your Faith or belief? Do you consider yourself a person of Faith or a spiritual person? What things do you believe that give your life meaning and purpose?

**A – Active (or Available, Accessible, Applicable):** Are you currently Active in your faith community? Are you part of a religious or spiritual community? Is support for your faith Available to you? Do you have Access to what you need to Apply your faith (or your beliefs)? Is there a person or a group whose presence and support you value at a time like this?

**C – Coping (or Comfort); Conflicts (or Concerns):** How are you Coping with your medical situation? Is your faith (your beliefs) helping you Cope? How is your faith (your beliefs) providing Comfort in light of your diagnosis?

**T – Treatment plan:** If patient is coping well, then either support and encourage or reassess at a later date as patient’s situation changes. If patient is coping poorly, then 1) depending on relationship and similarity in faith/beliefs, provide direct intervention: spiritual counseling, prayer, Sacred Scripture, etc., 2) encourage patient to address these concerns with their own faith leader, or 3) make a referral to the hospital chaplain for further assessment.
**Brief RCOPE (Pargament, 2010)**

*Rate on a scale of 1 to 4 (1 - not at all, 4 – a great deal)*

1) Looked for a stronger connection with God
2) Sought God’s love and care
3) Sought help from God in letting go of my anger
4) Tried to put my plans into action together with God
5) Tried to see how God might be trying to strengthen me in this situation
6) Asked forgiveness of my sins
7) Focused on religion to stop worrying about my problems
8) Wondered whether God had abandoned me
9) Felt punished by God for my lack of devotion
10) Wondered what I did for God to punish me
11) Questioned God’s love for me
12) Wondered whether my church had abandoned me
13) Decided the devil made this happen
14) Questioned the power of God

*1-7 Measures Positive Religious Coping*
*8-14 Measures Negative Religious Coping*
QUOTES, PRAYERS AND STORIES TO USE IN SPIRITUALITY GROUPS

Each of the following can be used as a jumping off point for group discussion. Read out loud in the group and then ask people to respond. Do they agree or disagree? Does it remind them of something they’ve experienced?

“God cannot promise us happy endings in a world where laws of nature and human cruelty take their daily toll. God’s promise is not that we will be safe, but that we will never be alone. And this is the way the psalmist would teach us to see the world, without illusions that nothing will ever happen, but without fear that we will be utterly destroyed by the things that do happen. We will hurt, but we will heal. We will grieve, but we will grow whole again.”
Harold Kushner

“Spirituality is life lived in the continuous presence of the divine.”
Abraham Joshua Heschel

 “[Spirituality] is man’s sense of wonder and adoration, an ever anew becoming... his longing to establish a living communion... For God does not want to be believed in, to be debated and defended by us, but simply to be realized through us.”
Martin Buber

“Courage is not the absence of fear, but rather the judgment that something else is more important than fear.”
Ambrose Hollingworth Redmoon

“It does not matter how deep you fall, what matters is how high you bounce back.”
Unknown

“We are not human beings having a spiritual experience. We are spiritual beings having a human experience.”
Pierre Teilhard de Chardin

“There are many paths up the Mountain, but the view from the top is the same.” Ancient Japanese saying.

“A human being is a part of the whole, called by us Universe, a part limited in time and space. He experiences himself, his thoughts and feelings as something separated from the rest—a kind of optical delusion of his consciousness. This delusion is a kind of prison, restricting us to our personal desires and to affection for a few persons nearest to us. Our task must be to free from this prison by widening our circle of compassion to embrace all living creatures and the whole nature in its beauty.”
Albert Einstein
Hope
Hope is the thing with feathers
That perches in the soul,
And sings the tune - without the words,
And never stops at all,
And sweetest in the gale is heard;
And sore must be the storm
That could abash the little bird
That kept so many warm.
I’ve heard it in the chilliest land,
And on the strangest sea;
Yet, never, in extremity,
It asked a crumb of me.
by Emily Dickinson

The Guest-House
This being human is a guest-house.
Every morning a new arrival.
A joy, a depression, a meanness,
some momentary awareness comes
as an unexpected visitor.
Welcome and entertain them all!
Even if they’re a crowd of sorrows,
who violently sweep your house
empty of its furniture,
still, treat each guest honorably.
He may be clearing you
out for some new delight.
The dark thought, the shame, the malice,
meet them at the door laughing,
and invite them in.
Be grateful for whoever comes,
because each has been sent
as a guide from beyond.
Rumi

The Peace of Wild Things
When despair for the world grows in me
and I wake in the night at the least sound
in fear of what my life and my children’s lives may be,
I go and lie down where the wood drake rests in his beauty on the water, and the great heron feeds.
I come into the peace of wild things who do not tax their lives with forethought of grief. I come into the presence of still water. And I feel above me the day-blind stars waiting with their light. For a time I rest in the grace of the world, and am free.
_Wendell Berry_

**The Summer Day**
Who made the world?
Who made the swan, and the black bear?
Who made the grasshopper?
This grasshopper, I mean—the one who has flung herself out of the grass, the one who is eating sugar out of my hand, who is moving her jaws back and forth instead of up and down—who is gazing around with her enormous and complicated eyes.
Now she lifts her pale forearms and thoroughly washes her face.
Now she snaps her wings open, and floats away.
I don't know exactly what a prayer is.
I do know how to pay attention, how to fall down into the grass, how to kneel down in the grass, how to be idle and blessed, how to stroll through the fields, which is what I have been doing all day.
Tell me, what else should I have done?
Doesn't everything die at last, and too soon?
Tell me, what is it you plan to do with your one wild and precious life?
_Mary Oliver_

**Serenity Prayer**
God, grant me the serenity to accept the things I cannot change, The courage to change the things I can, And wisdom to know the difference.
- *Reinhold Niebuhr*
Prayer (attributed to Mother Teresa)
People are often unreasonable, irrational, and self-centered. *Forgive them anyway.*
If you are kind, people may accuse you of selfish, ulterior motives. *Be kind anyway.*
If you are successful, you will win some unfaithful friends and some genuine enemies. *Succeed anyway.*
If you are honest and sincere people may deceive you. *Be honest and sincere anyway.*
What you spend years creating, others could destroy overnight. *Create anyway.*
If you find serenity and happiness, some may be jealous. *Be happy anyway.*
The good you do today, will often be forgotten. *Do good anyway.*
Give the best you have, and it will never be enough. *Give your best anyway.*
In the final analysis, it is between you and God. It was never between you and them anyway.

We Are Loved
We are embraced by arms that find us even when we are hidden from ourselves.
We are touched by fingers that soothe us even when we are too proud for soothing.
We are counseled by voices that guide us even when we are too embittered to hear.
*We are loved by an unending love.*

We are supported by hands that uplift us even in the midst of a fall.
We are urged on by eyes that meet us even when we are too weak for meeting.
*We are loved by an unending love.*

Embraced, touched, soothed, and counseled,
ours are the arms, the fingers, the voices;
ours are the hands, the eyes, the smiles;
*We are loved by an unending love*
*Rami Shapiro*

“Trust in the Lord”
A man is sitting on his porch as flood waters rise. A woman floats by in a boat, asking if the man needs help. "No, thank you," says the man, "I'm trusting in the Lord." The waters rise higher, sending the man upstairs. A raft full of people floats by his second story window. Get in," they say, "there's plenty of room." "No thanks," says the man, "I'm trusting in the Lord." The flood waters keep rising, pushing the man up to the roof. A helicopter swoops in, lowering its ladder for the man. "Thanks anyway," shouts the man, "I'm trusting in the Lord." Finally, the man is swept away in the torrent and drowns. At the gates of Heaven, the man asks God, "Why didn't you save me?" "What do you mean?" replies God, "I sent two boats and a helicopter."
RESOURCES FOR FURTHER EXPLORATION

There is a growing field of research on the intersection of Spirituality and Behavioral Health and readers are encouraged to explore what speaks to them. Below is a brief list of books, articles, and websites that have been of interest to the author.

BOOKS


WEBSITES

Duke’s Center for the Study of Religion/Spirituality and Health
www.spiritualityandhealth.duke.edu

The Royal College of Psychiatrists – Spirituality and Psychiatry Special Interest Group.
www.rcpsych.ac.uk/workinpsychiatry/specialinterestgroups/spirituality

National Alliance on Mental Illness (NAMI) Faith Net
www.nami.org

HealthCare Chaplaincy, Inc.
www.healthcarechaplaincy.org

JOURNALS

Journal of Mental Health, Religion, and Culture

Journal of Spirituality in Mental Health (Formerly known as American Journal of Pastoral Counseling)
About the Author:

Rabbi Elisa Goldberg, M.A.H.L., has been the Director of Chaplaincy Services at Jewish Family and Children’s Service (JFCS) since 2001. She supervises JFCS’ professional and volunteer chaplains and provides individual spiritual counseling to JFCS clients facing challenging life transitions. She offers bereavement support groups, provides consultation to the clinical programs throughout the agency, and developed a para-chaplaincy training program and rabbinic internship program. She also leads spirituality support groups at the Horsham Clinic.

Rabbi Goldberg has been an ordained Reconstructionist rabbi since 1999. In addition to her rabbinic studies, she completed 1600 hours of Clinical Pastoral Education, a non-denominational, nationally accredited clinical training program for chaplains. She has worked as a chaplain in acute and long term care for fifteen years providing pastoral care to people with life-threatening and life-limiting illnesses, and their families. In addition, she serves as a spiritual director to students at the Reconstructionist Rabbinical College.

Rabbi Goldberg is currently President of the Board of Rabbis of Greater Philadelphia, a member of the Philadelphia Religious Leaders Council, and active with the Faith and Spiritual Affairs Advisory Board at the Department of Behavioral Health & Intellectual disAbility Services of Philadelphia.

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1 Several studies have highlighted a gap between the religious beliefs of psychiatrists and their patients. A 2004 survey in Canada reported that 54% of psychiatrists reported belief in God as compared with 71% of patients. Psychiatrists in the study were significantly less likely than patients to attend religious services or engage in private spiritual or religious activity. Baetz et al (2004).

2 Koenig et al, 2001


4 Royal College of Psychiatrists UK, website


6 Koenig, Faith and Mental Health, p.139


8 Koenig, Faith and Mental Health, p.143

9 Puchalski, Christina and Anna L. Romer “Taking Spiritual History Allows Clinicians to Understand Patients More Fully,” Journal of Palliative Medicine, Volume 3, Number 1, 2000 Pgs 129 – 137


