

**RELIGIOUS AND SPIRITUAL ISSUES
IN CLINICAL AND COUNSELLING PSYCHOLOGY MASTERS
TRAINING PROGRAMMES IN SOUTH AFRICAN UNIVERSITIES:
AN EXPLORATORY STUDY**

Rosalind Jean Lee

204511664

University of KwaZulu-Natal

B. Soc Sci (Hons)

Submitted in partial requirement for the degree of

Master of Social Science

School of Psychology

Faculty of Humanities, Development and Social Sciences

University of KwaZulu-Natal

Howard College

August 2007

Abstract

Religion and spirituality are universal concepts which provide significant platforms of meaning for many people (Pargament, 1999). However, traditional psychology training programs have typically omitted these issues (Brawer, Handal, Fabricatore, Roberts and Wadja-Johnston, 2002; Shafranske, 2001), thus neglecting an important dimension of human experience. The present study involved sending a survey questionnaire to all lecturers, coordinators and directors involved in psychology masters programmes within South Africa. This study explores the extent to which religious and spiritual issues are currently included in masters programmes, the perceptions of those involved regarding religious and spiritual issues, and possible ways of integrating these issues within the existing program. Within an integrative framework, results are analysed descriptively, using content analysis for the qualitative responses. Current inclusion of religious and spiritual issues within psychology training programs is varied between modules and universities, and the perceptions of those involved regarding inclusion is ambivalently in favour. Integrating religious and spiritual issues into existing modules is generally favoured.

Preface

This study represents original work by the author and has not otherwise been submitted in any form for any degree or diploma to any University. Where use has been made of the work of others, it has been duly acknowledged in the text.

Acknowledgements

I would like to express my gratitude to the following people who have assisted in the completion of this dissertation:

My supervisor, Ms Cynthia Patel, for her valuable support, extreme patience and expertise.

The participants who volunteered and participated in the survey questionnaire, without whom this work would not be possible.

My friends and family for their encouragement and support.

To David Newmarch, for helping me with editing and input.

Table of Contents

Abstract	ii
Preface	iii
Acknowledgements	iv
Chapter 1 Introduction	1
1.1. Introduction and background to the study.....	1
1.2. Context of the study.....	3
1.3. Aims of the study.....	4
Chapter 2 Theoretical Framework	6
2.1. Integrative psychology.....	6
Chapter 3 Empirical Review	9
3.1. Religious and spiritual issues in psychology	9
3.2. Multiculturalism	9
3.3. Defining religion and spirituality	10
3.4. The role of spirituality and religion in psychology: History and present	13
3.5. Increase in spirituality.....	16
3.6. Religion/ spirituality and mental health.....	17
3.7. Religious and spiritual issues in practice and training.....	19
3.8. Training programmes.....	23
3.9. Integrating religion and spirituality in training programmes	26
Chapter 4 Methodology	29
4.1. Sample.....	29
4.2. Instruments.....	31
4.3. Procedure.....	34
4.4. Analysis.....	35
4.5. Ethical Considerations	35
Chapter 5 Results	37
5.1. Religion and spiritual issues in Masters training programmes	37
5.2. Trainers' views on including religion/spirituality in Masters programmes.	42
5.3. Integrating religion and spirituality in Masters programmes.....	45
5.4. Summary	47

Chapter 6 Discussion	49
6.1. Introduction	49
6.2. Current inclusion of religious and spiritual issues in Masters programmes	49
6.3. Inclusion of religious and spiritual issues in specific modules	52
6.4. Staff attitudes towards inclusion of religious and spiritual issues.....	56
6.4.1 Ambivalence around manner of inclusion.....	57
6.4.2 Meaning for the client.....	58
6.4.3 Existential concerns	59
6.4.4 Importance for the therapist.....	60
6.5. Integration into Masters Programmes.....	60
Chapter 7 Recommendations, Limitations and Conclusions	63
7.1. Recommendations	63
7.2. Limitations of the study and directions for future research	64
7.3. Conclusion.....	65
References	67
Appendix 1: Informed Consent Form	75
Appendix 2: Head of Department form	77
Appendix 3: Questionnaire	78

Chapter 1

Introduction

1.1. Introduction and background to the study

Even though, for so many individuals, religion and spirituality may seem such universally present aspects of existence (Sadock & Sadock, 2004), they remain dimensions of human experience which traditionally receive limited attention in psychology training programmes (Brawer, Handal, Fabricatore, Roberts, & Wadja-Johnston, 2002; Hill, 1999; Shafranske, 2001). Historically, psychology has approached the religious and the spiritual with a mixture of disparagement and dismissiveness (Plante & Sherman, 2001), thereby failing to acknowledge the value and support these aspects of experience may provide for many who seek therapeutic help (Pargament, Murray- Swank, & Tarakeshwar, 2005). Neglecting to take account of religious and spiritual concerns in training may in turn perpetuate feelings of incompetence and reluctance to engage with these aspects of experience when they are subsequently encountered in therapeutic practice (Genia, 1994).

Several of the helping disciplines have, however, seen a resurgence of interest recently in the link between religion/spirituality and mental health (Patel & Shikongo, 2006), with an emerging awareness about the significance of these issues in psychology in particular, as evidenced by current research and publications (Belzen, 2005). In the South African context it nevertheless remains the case that very little is to be found in the literature that

sheds any light on the possible extent of engagement with these issues in psychology training.

Revitalisation of interest in religion and spirituality within the general population, to the degree that it has been termed the “new zeitgeist” (Hill, 1999, p. 232), is indeed a call for psychologists to heed what this may reflect about the needs of the population. As MacDonald (2004) notes, religion or spirituality is part of the individual’s worldview, and both are vital aspects in seeking to understand and attribute meaning to the cosmos and the life that individuals experience.

Importantly, the universality of religion and spirituality highlights the necessity of creating awareness of these issues in psychology. As Sadock & Sadock (2004) state,

From the psychological point of view, perhaps the most striking feature of religion is its universality. There are few societies in which religion plays no significant role, and there are relatively few people who, at one time or another, have not experienced some religious stirring (p. 380).

With an abundance of theories to account for this commonality (Corey, 2005; Fenchel, 1999; Seybold, 2005), to simply pass over these issues would leave unexamined a proportionately very considerable dimension of human experience.

Consideration of religious and spiritual aspects of human experience is linked to a burgeoning movement within psychology that acknowledges the importance of a multicultural approach (Pedersen, 1999), complementing established psychological paradigms, but also taking psychological understanding further into the context of the culture (ibid).

1.2 *Context of the study*

In South Africa, the multicultural paradigm is vividly exemplified in the notion of the “rainbow nation”. Religion and spirituality are by no means the only aspect of diversity, but addressing them certainly constitutes an important part of multicultural practice (Richards, Keller, & Smith, 2004). Many of the diverse cultures that populate South Africa draw profoundly on religious/spiritual beliefs in their everyday life (Herselman, 2001; Mkhize, 2004). Religion and spirituality are plainly very significant for understanding the way in which many South Africans attribute meaning to their lives and acquire their worldview. Formal clinical training is the ideal and appropriate arena for incorporating an awareness of this dimension among psychology practitioners, yet international literature suggests that it has rarely been implemented (Genia, 2000; Shafranske, 2001).

Promotion of a multicultural approach highlights the need for integrative psychology training programmes which incorporate all aspects of experience. Duncan, Stevens, and Bowman (2004) contend that some South African universities have attempted to incorporate more contextually appropriate models of training that acknowledge the psychosocial needs of diverse populations. However, as Mkhize notes (2004), a western worldview is still rendered as the paradigm of choice in psychology, with marginalisation of afro-centric ways of perceiving the world. This state of practice is perpetuated in the training of psychologists, which still tends to be guided by European and North American models that are not always congruent with the perspective of a large part of the South African population (Duncan et al., 2004).

Some international literature has sought to uncover the extent to which religion and spirituality are included in masters psychology training programmes (Kelly, 1994; Shafranske, 2001). The degree to which these issues are addressed in South African masters training programmes is unclear, with very little to be found on this point in the literature. One exception is a study (Patel & Shikongo, 2006) which highlights the neglect of these issues as felt by Muslim trainees in their masters clinical and counselling programmes. But very little seems to be known about any corresponding perceptions (for example- towards the possible inclusion of such issues in the programme) on the part of those involved in delivering the courses – a significant gap, since the scope of training is determined by those who provide it. Similarly, there does not appear to be much discussion, at least within the South African context, of how religion and spirituality might actually be incorporated in training programmes.

1.3 Aims of the study

This study aims to explore the extent to which religious and spiritual issues are dealt with in masters clinical and counselling psychology training programmes in South African universities. It endeavours to uncover the perceptions of those involved in the programmes regarding the inclusion of these issues and also how trainers might envisage such an integration.

The literature survey in the next chapter considers the value of raising awareness of religion and spirituality within psychology programmes, evaluating the importance of such awareness and its implications for both the training and the future practice of those

involved in the psychological field. The benefits and drawbacks of such inclusion are considered, along with an investigation of general perceptions regarding these issues on the part of trainers.

The assessment in this study of the status of religion and spirituality as they apply to current masters psychology training programmes leads on to discussion of implications and meanings for the South African context, followed by conclusions and recommendations.

Chapter 2

Theoretical Framework

2.1. *Integrative psychology*

This study considers an integrative framework of human functioning that incorporates all aspects of the human experience, of which religion and spiritual issues are considered to be an important part (Corey, 2005). This paradigm acknowledges the validity of all human practice and views the individual in a holistic light.

An integrative approach takes into account the full diversity of human experiences, including those which extend beyond empirical, scientifically-driven psychology. This avoids undue isolation of different facets of experience from one another (Tan & Dong, 2001), giving recognition to the interrelatedness and interconnectedness of all dimensions within a bio-psycho-social-spiritual holism. As Corey (2005) maintains, this approach provides for interdisciplinary agreement and acceptance rather than narrowing in on a single psychological realm of being, and embraces a broader view than single school approaches would permit. In this paradigm the scientific dimension can merge with the mystical or unproven, giving recognition to experiences that have traditionally been neglected by a measurement-driven psychology.

Psychology is expanding to meet the needs of diverse multicultural populations, and it is therefore necessary that the worldviews and values of these differing cultures are

incorporated into the field (Norcross, Hedges, & Prochaska, cited in Corey, 2005). In South Africa, these worldviews and values often tie into religious systems of belief (Herselman, 2001; Swartz, 1998). Adopting an integrative framework thus endorses the value system of a large majority of the population. Moreover, as Mkhize notes, the African perspective is consistent with a holistic worldview that understands the interdependence of all things and in which “everything is interconnected in such a way that elements of the whole are contained in each part” (2004, p. 43).

Spirituality and religion are often ways that certain individuals attempt to make sense of their existence and to find a purpose for their lives. There are, furthermore, goals that they have in common with psychological therapy (Corey, 2005), and the interrelatedness of spirituality with psychology is apparent in the way that they both provide methods for “exploring, deepening and expanding consciousness” (Sperry & Mansager, 2004, p. 154).

Frankl contends that the relationship between religion and psychotherapy is linked by the outcome which both may provide. In this, religion provides the individual with “a spiritual anchor, with a feeling of security such as he can find nowhere else. But to our surprise, psychotherapy can produce an analogous unintended side-effect” (1986, p. xxi). The relationship between religion and psychology can thus also be measured by the results they both yield.

William James maintained that the individual is made up of “constituents of self” (Hart, 1983, p. 37) which encompass “the material self, the social self, *the spiritual self* and the pure ego” [italics added]. Frankl concurs to an extent in stating that man lives on the following three dimensions: the somatic, the mental and the spiritual, and he maintains

that human existence is characterised by man's *spirituality*, freedom and responsibility [italics added]. It is significant to note that these two key figures in the history of psychology make reference to the spiritual side of being human, drawing attention to an aspect of individuals' lives which can be integrated into a psychological framework.

The following study is undertaken in an integrative framework that considers religious and spiritual issues to be important aspects of the human experience which should consequently be incorporated into the field of psychology. This signifies a shift from more traditional western psychology, which it can be argued has a tendency for reductionism (Moore, 2004; Viljoen, 1997) and, historically, has drawn heavily on observed empirical evidence which can be readily measured. This process begins, importantly, in psychology training programmes since they are the ideal environment for sensitising and promoting awareness of these issues (Genia, 1994).

Chapter 3

Empirical Review

3.1. *Religious and spiritual issues in psychology*

This chapter reviews literature which relates to definitions of religion and spirituality, and to the significance these aspects assume within the paradigm of multicultural approaches that the field of psychology is increasingly adopting. Research highlighting the value of including perspectives on religion and spirituality in training and practice is also considered, particularly in light of their potential contribution to a more holistic and integrative approximate of the human experience (Corey, 2005).

3.2. *Multiculturalism*

In advocating a multicultural approach in psychology training programmes the American Psychological Association has signalled its support for a more encompassing perspective of human experience in the professional discipline (APA, 2000). In this approach, the standards set for graduate school accreditation place an emphasis on diversity that includes a focus on religion. The APA accreditation guidelines stipulate that “The program has and implements a thoughtful and coherent plan to provide students with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena as they relate to the science and practice of professional psychology” (APA, 2000).

Nowhere is the value of a multicultural approach more apparent than in South Africa, with its diverse and varied population whose non-western attitudes to issues of mental health frequently incorporate notions of the supernatural. Explanations for sickness draw on the religious system of those concerned, with a central tenet of many traditional religions being a belief in ancestor spirits who have the power to bring misfortune to an individual or group they feel wronged by (Herselman, 2001). Witchcraft, sorcery, gods and spirits are prominent themes in these cultures, which consequently regard the causality of illnesses quite differently from the western biomedical model and put far more emphasis on the spiritual dimension in the healing process (Swartz, 1998).

Richards, Keller and Smith stress the need to locate the client in his or her own cultural context and to understand the client's phenomenological worldview, which is often profoundly affected by religious and spiritual beliefs: "People's beliefs about the big questions of life – such as the origin and purpose of life, nature of deity, morality and ethics, death and life after death, and ways of knowing – are often heavily influenced by the teachings of their religious tradition" (2004, p. 278).

3.3. *Defining religion and spirituality*

Definitions of religion and spirituality have typically been beset by the difficulty of distinguishing between the terms (Miller, 2004; Plante & Sherman, 2001). The general consensus appears to be that religion and spirituality are overlapping constructs, both with multidimensional natures. While arriving at absolute classifications in this regard is not an objective of this study, the definitions that have variously been offered nonetheless

provide a rich background for a more comprehensive disciplinary appreciation of religion and spirituality.

Interpretations of what is meant by the concept of spirituality continue to evolve, but there is a clear tendency at present for it to be differentiated from and set in contrast to the concept of religion (Pargament, 1999; Russinova & Cash, 2007). As Pargament (1999) notes, spirituality is usually depicted as a more personal experience which involves a greater potential for individual expression, while religion is generally associated with institutions and formalised beliefs more inclined to burden the individual with prescriptive conditions.

Crossley and Salter (2005) describe spirituality as used in a consistently wider and more inclusive sense than religion. They note that attempts to define these concepts vary greatly within psychological literature. Russinova and Cash (2007) agree, and make the point that the issue generally involves consideration of the inclusivity of one or the other concept, the overlap between them, and a contrast between public expression and private experience.

In the international literature there have been attempts to assess the perceptions of the general population with respect to these constructs. An empirically based study (Zinnbauer et al., 1997) demonstrates that participants perceived religion and spirituality as different concepts, but not independent of each other. Religion was associated with “higher levels of authoritarianism, religious orthodoxy, intrinsic religiousness, parental attendance, self-righteousness, and church attendance”

(p. 557). Spirituality, on the other hand, was framed as more mystical and New Age.

However, religion and spirituality were both tied to the concept of the sacred, meaning that these notions were embedded in a concept of holiness – relating but not limited to a belief in higher powers (Pargament, 1999).

Pargament (1999) attributes the diverging evolution in meaning of the two terms as a reflection of large-scale socio-demographic changes. With the dissolution of boundaries between countries and cultures, eastern religion and alternative religious beliefs have become more accessible to western societies. Moreover, a greater trend of deinstitutionalisation and increasing individualisation may be mirrored in the move towards a more personal spirituality. Meanwhile, a growing discontent with institutions at large has affected the position that institutional religion traditionally held and people are searching for their own subjective meanings, selectively choosing from various religious offerings.

It is interesting to note the origin of the word *psychology*, particularly in light of a discussion of religious and spiritual issues. Stemming from the two Greek words, *psyche* (soul) and *logos* (study), psychology literally means “the study of the soul” (Elkins, 1995). Moreover, the word therapist originally meant *servant* or *attendant*, and thus in the original framework of meaning a psychotherapist is a “servant or attendant of the soul” (Elkins, 1995, p. 78). Furthermore, psychoanalysis was historically known in Europe as *Seelenkunde* (consultation with the soul), even while not connected to organised spiritual belief (Fenichel, 1999).

In summary, there is a sense, as reflected in the literature, that once religion and spirituality can be defined (as to whether or not these concepts are overlapping, distinct, private or public, sacred), then these aspects of human experience will be more readily accessible and therefore more available for operationalisation in psychology. Meanwhile the debate over spirituality and religion and the differences and similarities between the two may never be resolved; but it is apparent that religion and spirituality are multifaceted and entwined constructs (Plante & Sherman, 2001) and the two will have various meanings for different people. To simplify discussion, in the present study the two terms will be considered simultaneously, with no distinction made between them, in the interests of maximal inclusiveness (see Schulte, Skinner, & Claiborn, 2002).

3.4. *The role of spirituality and religion in psychology: History and present*

Psychology has evolved as a secular profession in which its Freudian protagonists have often considered or portrayed religion as a form of obsessional neurosis (Thorne, cited in Feltham & Horton, 2000), thereby pathologising the issue. Freud believed that in religion God was modelled after the physical father and that the relationship with God was dependent on the relationship with a parental figure.

Because Freud was more concerned with why people believed in a deity, he neglected the anxiety reducing benefits that such beliefs play in the lives of many individuals (Fenichel, 1999).

Understandably, Freudian theory therefore did not promote religion and spirituality as areas that could be positively related to psychology. Important figures in psychological

history such as Skinner and Watson held similar contentions with regard to religion and spirituality (Patel & Shikongo, 2006) and it would appear that many present-day psychologists may still regard religion and spirituality in a similarly negative light (Genia, 2000).

Freud's reaction towards religion and spirituality was not mirrored by his dispossessed disciple Jung and in fact culminated in the split between the two, which was allegedly "deep-rooted in Jung's concern about the mysterious nature of the soul" (Hyde & McGuinness, 1997, p. 39). While Freud grounded himself in the empirical, Jung was cautious about an entirely scientific and logical approach. Balancing together the unempirical and the scientific, he advocated the integration of the spiritual realm and the mysterious into human experience (Wikipedia, 2007). As Jung tells us, "I began my introduction with wholeness as the goal to which the psychotherapeutic process ultimately leads. This question is inextricably bound up with one's philosophical or religious assumptions" (Jung, 1983, p. 276). It is interesting to note that according to the Wikipedia, Jungian ideas are not typically included in psychology curriculums of major universities.

Other key figures in the history of psychology such as William James and Viktor Frankl have regarded the religious and the spiritual as important elements in the human experience. Frankl believed that "the spiritual dimension cannot be ignored, for it is what makes us human" (Frankl, 1986, p. xvi). He created logotherapy which encompasses the spiritual – *logos* signifying spiritual, and beyond that, meaning. Frankl considered the

spiritual dimension to be a uniquely human aspect in which one encounters meanings and values, often guided by religion (Das, 1998).

While Freud's disillusionment with religion served to isolate the relationship between religion and psychology, this severance was intensified by attempts in the new field of psychology to establish itself as a science (Brawer et al., 2002). In this field of contention science and faith were regarded as distinct entities with very little common ground (Plante & Sherman, 2001). When religion and spirituality did become the subject of attention, much of the research was negative and associated with "emotional distress, irrational thinking, lower intelligence, anxiety, emotional rigidity, defensiveness, and prejudice" (Brawer et al., 2002, p. 203).

Present-day attitudes towards religious and spiritual issues draw attention to the apathetic approach adopted by many of those practising in the psychological field (Hill, 1999). It would appear that psychologists are the least religious or spiritual beings among the general population (Genia, 2000; Jones, 1994), creating a religiosity gap between the profession and the population at large (Faller, 2001). As Genia (2000) notes, many secular practitioners still assume that traditional religious involvement is a liability.

Recently, however, several attempts have been made from within the helping professions to address religious and spiritual issues in training (Brawer et al., 2002). Where psychology is concerned, some programmes in the United States have attempted to explicitly integrate the religious and spiritual with the clinical psychology curriculum (Johnston & McMinn, 2003). These initiatives appear to stem primarily from theological institutions, but nevertheless represent a development for more integrative programmes.

There does appear to be an emerging awareness of the importance of religious and spiritual issues, particularly in relation to physical and mental health (Russinova & Cash, 2007). Crossley and Salter (2005) note that there have recently been several psychological publications related to these issues, along with the introduction of religious and spiritual problems in the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*. Although they conclude that in mainstream academic psychology literature there is still only a limited focus on religious and spiritual issues and very little research in this field, their assessment is contradicted by other authors who do see increasing attention to these issues in psychological research and publications (Russinova & Cash, 2007; Belzen, 2005).

3.5. *Increase in spirituality*

Just one token of a revitalisation in the spiritual dimensions of life among the general population would be the escalating numbers of best-selling popular psycho-spiritual books on the shelves of just about any bookstore (Prest, Russel, & D'Souza, 1999). To judge from the quantity of popular literature on the topic, it appears that individuals are searching for ways to incorporate spirituality in their daily lives (Sperry, 2001). Fenchel (1999) agrees with the idea that society is moving to a more psycho-spiritual paradigm, citing the reasons for this shift as a "hunger to escape from ever mounting pressures" (p. 2).

Thoresen, Harris, and Orman (2001) reflect on the recent increase of popular and scientific interest in religious and spiritual issues, maintaining that this may be related to

growing empirical evidence which links religious and spiritual factors to enhanced health. These authors similarly examine social and cultural factors which may account for this upsurge, and posit that it may be attributed to a rapidly accelerating pace of life which diminishes opportunity and ability to maintain intimate and fulfilling relationships with others.

3.6. *Religion/ spirituality and mental health*

Research into the relationship between religion/spirituality and health is increasingly demonstrating a positive association (Brawer et al., 2002), although the negative effects of religion/spirituality have also been noted (Pargament & Ano, 2006).

Several authors contend that religiously minded people are more likely to lay claim to higher levels of happiness and joy, and reported lower levels of depression (Genia, 2000; Myers, 2000; Reinert & Bloomingdale, 1999). For example, in a 1984 U.S. Gallup poll those responding with the highest scores on a spiritual commitment scale were twice as likely to declare themselves “very happy” (Myers, 2000).

Religion and spirituality frequently provide valuable resources for coping with life’s stressful events (Pargament et al., 2005). In a meta-analysis study (Ano & Vasconcelles, 2005) which examines the relationship between religious coping and psychological adjustment, it was found that “a moderate positive relationship exists between positive religious coping strategies and positive outcomes to stressful events” (p. 473). Moreover, those individuals who used positive religious coping strategies generally experienced less depression and anxiety.

The Alcoholics Anonymous organisation (AA) has adopted a spiritual slant to working with individuals with an addiction problem (Faller, 2001). Quite contrary to the self-determining concept many psychological theories offer (Lee & Marshall, 2003), AA predicated on surrender to and belief in a high power to guide healing. However, as Faller points out, “It is ironic that most psychologists acknowledge the efficacy of the AA and utilise it in treating clients, yet they ignore the relevance of faith and spirituality in sustaining change” (2001, p. 26).

While the benefits of religion have been elucidated to paint a picture of harmony and balance, there is an acknowledgement that the converse may also be true, where religious/spiritual issues may in fact perpetuate incidence of child abuse, prejudice and discrimination (Hill, 1999). Pargament, Murray-Swank & Tarakeshwar (2005) note that negative religious coping in a sample of hospitalised medical patients predicted mortality over a two-year period despite adequate medical intervention.

Problematic religious coping appears to be related to perceptions of punishment by God and anger at God: “feelings of anger and alienation from congregations; perceptions of sacred loss and sacred violation and making attributions of personal troubles to the devil” (Pargament et al., 2005, p. 158).

Other points of view have been offered on the potentially negative role of spirituality, in that it may serve to propagate a circumscribed point of view. In their critique of transpersonal psychology, Lee and Marshall (2003) argue that the spirituality on which the field is founded has perpetuated the idea of individualism as divine, and promotes the idea that the individual is able to surpass any limitations in the environment. This, they

contend, ignores important economic, structural and political means that “oppress, denigrate or otherwise create an impoverished way of life” (p. 26).

While several authors concede the potentially harmful and negative role that religion may play, it would seem from a survey of the literature that religion and spirituality have the potential to provide valuable resources for clients attempting to find a place that holds them in the world – a place of meaning.

3.7. *Religious and spiritual issues in practice and training*

An understanding of religious processes and beliefs will help professionals to develop competence when addressing these issues in their work (Prest et al., 1999; Richards et al., 2004). Moreover, openness to and respect for others’ religious and spiritual beliefs is likely to increase client trust in the therapist. Richards et al. (2004) note that religiously devout people often shun mental health services for fear that secular therapists will not understand their beliefs and may even seek to invalidate their concerns in this area.

Literature on the practice of engaging in spiritual/religious issues in the therapy room, suggests that this is rarely done. According to Shafranske (2001), it was demonstrated that the majority of psychologists involved in clinical work were not likely to actively initiate spiritual or religious interventions without the client’s request to do so. Crossley and Salter (2005) agree, stating that research continues to show that issues related to spirituality are frequently overlooked in the therapeutic setting, possibly related to client and therapist collusion.

Shafranske (2001) found that religious and spiritual interventions were more likely to be employed if they did not require active and directive clinician involvement. If a religious or spiritual intervention required actions such as praying for/with the client, endorsement and performance of religious and spiritual interventions were liable to decrease. If the intervention appeared more value-free and technical in nature then clinicians were more amenable to adopting strategies in this direction. Shafranske (2001) offers the suggestion that this may have something to do with the minimal exposure acquired in formal clinical training, and this being the case it is usually only when the clinician holds a personal religious orientation that such interventions are typically used. Genia (1994) concedes this point, noting that psychology professionals may be more open to the religious experience of their clients than is generally presumed, but the “religiosity gap” (p. 396) between the mental health provider and the client remains rather significant.

According to Schulte et al. (2002), the personal perspectives of counsellors regarding religion and spirituality are linked to their perceptions of and approaches to counselling spiritual matters. A secular therapist may strongly emphasise the more rational and explicable aspects of human experience, unconsciously communicating that this is the only path for any rational human being. As Thorne states,

The danger for the secular therapist who does not work within the context of a clearly defined faith community is that, through training and experience, he or she becomes wedded to a view of self which becomes as dogmatic as that of the fundamentalist Christian or Muslim. Buttressed by ‘science’ and empirical research or simply through ‘clinical’ experience, the therapist forgets that his or her theory is no more than an elaborate metaphor and probably has less claim to providing the key to life than a religious view of reality which has survived many centuries and may well still be in the process of development (cited in Feltham & Horton, 2000, p. 59).

In their research, Crossley and Salter (2005) uncover further reasons related to the reluctance of the therapist to engage with these issues. They report that their [therapist] participants found the concept of spirituality to be elusive, its fundamental nature difficult to grasp, thereby creating confusion for them. Furthermore, the respondents felt that its elusiveness was perpetuated by the absence of active engagement with these issues in their training programmes, compounded by an inadequacy of language for discussing spirituality. Personal factors, such as the therapist's background and individual discomfort concerning the subject were also implicated in the neglect of religious and spiritual issues in the therapy room.

Corey (2005) argues that a religious and spiritual perspective has much in common with the goals of therapy: "Both emphasize learning to accept oneself, forgiving others and oneself, admitting one's shortcomings, accepting personal responsibility, letting go of hurts and resentments, dealing with guilt, and learning to let go of self-destructive patterns of thinking, feeling and acting" (p. 467).

Awareness of religious and spiritual aspects sensitises the therapist to the needs of the client (Genia, 1994), should these issues emerge. It is not, however, appropriate for therapists to convince clients to accept religious solutions to their problems (Genia, 2000). Implicit integration of these aspects into therapy calls for a non-directive approach which allows the therapist to "respectfully and sensitively respond to religious themes as they emerge in therapy" (p. 214). Moreover, consciousness and understanding of these issues can guide the therapist in the appropriateness of a specific referral source (ibid), should it exceed the limits of therapist competence and knowledge.

Genia (2000) outlines a psychodynamic perspective of the value of exploring these issues as they emerge. She maintains that religious material may inform the clinician of important psychological struggles. The client's personal images of God provide insight into the quality of the client's formative relationships and level of psychological development. Moreover, "religious doubts and uncertainties, desires to disaffiliate, interest in divergent faiths, and spiritual identity confusion suggest that the client may be struggling with issues concerning separation and individuation" (p. 214).

Chirban (2001) maintains that psychological problems are frequently manifestations of existential angst, and he links religion and spirituality to the healthy expression of these existential needs. He considers it appropriate for the clinician to explore religious and spiritual concerns where the client articulates his or her values in this area. In this way, clients are able to determine and integrate their goals, thereby providing meaning and purpose to their lives. By exploring these areas, important clinical information may be revealed, particularly in the areas of values, relationships, personality, goals and emotional responses.

Faiver, Ingersoll, O'Brien, and McNally (2001) suggest five categories for specific spiritual interventions in therapy:

- in-session versus out-of-session
- religious versus spiritual
- denominational versus ecumenical
- transcendent versus non-transcendent
- affective, behavioural, cognitive, and interpersonal.

Within this framework, the therapist may thus intervene with methods such as prayer either during the session with the client or outside of the counselling session.

Furthermore, distinguishing between religion and spirituality may help determine whether the therapist uses aspects of the client's "exoteric religious path" (Faiver et al. 2001, p. 119), examples of which might be referral to sacred texts or encouragement of attendance at religious gatherings. The more spiritual interventions are directed towards a "focus on transcendence, subjective meaning and spontaneous experiences" (ibid).

While many professionals in psychology may not agree with the notion of these interventions, it is noteworthy that dealing with concerns about religious and spiritual issues is gaining increasing attention, this being evident by the popular literature surrounding the topic.

3.8. *Training programmes*

An American national study by Kelly (1994) revealed that a minority of psychology training programmes include religious and spiritual issues, even while the respondents in the study (predominantly programme heads) generally considered these issues to be important in the counselling situation. However, fewer than 25 percent of the programmes offered such courses, primarily dealing with religious and spiritual issues.

A comparable study by Schulte et al. (2002) found that religious and spiritual issues were often included as part of other courses rather than dealt with in a specific course. The study demonstrated significant curriculum gaps with regard to the religious and spiritual aspects of psychological development and disorder. Nevertheless, participants in this

study felt that there were opportunities within the programme to explore religious and spiritual issues. The authors note, however, that “religious and spiritual knowledge tends not to be seen as important to counselling psychologists’ expertise in their roles as faculty, supervisors, and therapists” (p. 130). The results of this study indicate that in the area of research, opportunities exist to investigate topics relating to religious and spiritual issues. They attribute this to “a certain degree of understanding, on the part of those involved in training, of the relevance of religion and spirituality to psychology in general, at least as a science” (p. 131). Overall, it appears that while the trainers may not see religious and spiritual issues as essential areas of knowledge, they tend to be open to such issues as they arise during the course, whether in research or in practice.

Similar results were found in a study conducted by Brawer et al. (2002) addressing the extent to which religious and spiritual issues were incorporated into clinical psychology programmes in the United States and Canada. Most of the participants in this study indicated that religion and spirituality were covered as part of another course, but would most likely be addressed in clinical supervision, albeit – for the most part – inconsistently.

Inadequate training may contribute to the reluctance of many psychologists to engage with religious and spiritual issues in the therapeutic context (Shafranske, 2001). This deficiency in training means that many clinicians may feel ill-equipped to deal with such issues (Patel & Shikongo, 2006), thereby perpetuating a reluctance to do so. Moreover, a clinical psychologist’s personal orientation towards spirituality or religion may be determinant in dealing with these issues in professional practice (Shafranske, 2001).

Genia (1994) agrees that failure to deal with religious/spiritual issues may represent a realistic response to the limited training received in these areas. Traditional psychology programmes typically focus on training in the spheres of psychodynamic, client-centred and behavioural approaches, characteristically ignoring religious and spiritual issues, when not openly antagonistic to them (Genia, 1994).

In the United States, a number of integrative training programmes have been established, using a predominantly Christian platform (Johnston & McMinn, 2003). However, the exclusion of religious and spiritual issues in clinical psychology training programmes in a substantial number of international tertiary institutions is confirmed by other American research (see Brawer et al., 2002; Kelly, 1994; Schulte et al., 2002).

In South Africa, the situation is unclear. But considering that religious and spiritual issues are influential aspects in the lives of a significant proportion of the South African population (Herselman, 2001), graduate education and clinical training would benefit from including religious and spiritual issues as components of the diversity that psychology strives for (Schulte et al, 2002; Shafranske, 2001).

Traditional psychology has often failed to meet the needs of religiously/spiritually committed clients, excluding a significant portion of the population who have secular as well as religious/spiritual concerns (Genia, 1994). As Schulte et al. (2002) note, it is useful to examine how and to what extent religious and spiritual issues are to be addressed in training programmes, and it is worth highlighting the point that training programmes influence the acceptability and nature of applied learning in the clinical environment. Exactly what should be included in these programmes, and how, remains in

question. While it is relevant that religious and spiritual issues should be incorporated in psychology post-graduate programmes, a broad and generalised approach contributes nothing to the practicalities of such an inclusion.

3.9 Integrating religion and spirituality in training programs

Sensitising students to religion and spirituality as important aspects of some individuals' experience is part of integration (Brawer et al., 2002; Genia, 2000). This creates awareness of the significance of these issues for many people and the possible effect this may have on therapeutic interactions. Religious and spiritual issues can be incorporated into pre-existing modules, while research in the area should be encouraged, and supervision used as a potential source for systematic consideration of religious/spiritual issues (Brawer et al., 2002). Developing knowledge and competence in these areas in training programmes may involve discussing available assessment measures, while information provided could include religious systems and the traditions and practices associated with them. The use of guest speakers, mentors and a general overview of religious counselling are all considered appropriate to include (Brawer et al., 2002; Genia, 1994).

Genia (1994) notes that the course should include a section on self-exploration, specifically in an attempt to create awareness of how trainees' personal feelings and worldviews concerning religious and spiritual values may impact on their clinical work.

Ingersoll (1997) considers the intricacies of delivering a course dealing with religious/spiritual issues in the counselling situation. Potential goals of the course are outlined as follows:

- exploration of spirituality as an element possible for all people as part of the focus when working with clients
- offering descriptions of spirituality and religion and distinctions between the two
- presenting role plays of interventions when dealing with the client's religious/spiritual issues
- presenting models for discerning the quality of a client's spiritual path. Within this, trainees are taught to weave basic counselling skills with spiritual dialogue.

Including religious and spiritual issues in psychology training programmes appears to have enormous benefits for the psychologist in training. Importantly, by raising awareness of these issues, it creates a framework for the clinician to understand the client's worldview in a more fundamental way (MacDonald, 2004).

A significant portion of the literature reveals that while psychologists, those in clinical practice and others who provide training, theoretically acknowledge the importance of religious and spiritual issues there appears to be little practical implementation of this (Shafranske, 2001). While it has been noted that traditional psychology has, historically, obscured the role that religion and spirituality may play in the role of human experience, recent empirical evidence has highlighted that it is a beneficial and pertinent part of the therapeutic context (Pargament & Ano, 2006). As Genia (1994) notes, secular mental health providers need to revise dated views of religion and spirituality, and reconsider the awareness of such issues in therapy.

Training provides the clinician with the adequate skill to address and deal with religious and spiritual issues in psychology (Prest et al., 1999), and it is within this framework that standards are set for future practice. By including religious and spiritual issues in training, an improved base for client resources is provided (Corey, 2005), as well as an awareness of the impact of such on psychosocial functioning (Brawer et al., 2002).

Moreover, an integrative approach to psychology acknowledges all aspects of the client's experience, including those not readily amenable to the scientific observation. The spiritual dimension is entwined with other spheres of influence and change in one area is likely to invoke movement in other aspects of human experience. A "spiritually-integrated" approach to psychotherapy (Pargament et al., 2005, p. 161) need not be considered a replacement for other forms of therapy but could weave itself with the biological, social and physical dimensions of being.

In South Africa, it is unclear to what extent religious and spiritual issues are included in psychology training programmes, but the importance of a multicultural approach in the country makes it a highly relevant question to investigate, particularly in regard to post-graduate training. Equally relevant to consider are the perceptions of those involved in designing and delivering the programmes, as these are the people most likely to sanction or veto the inclusion of religious and spiritual issues. Similarly, the educators may provide important information on how to include these issues in coursework in a manner that is relevant to the South African population.

Chapter 4

Methodology

4.1. Sample

Academics involved in the masters programmes at South African universities were invited to partake in the study. This was to ensure that participants would have first-hand knowledge of the content of the masters programmes, including a broad overview of the course itself.

A total of 197 questionnaires were sent to masters lecturers, coordinators and directors at the following 15 South African universities: University of Cape Town, University of the Free State, Rhodes University, University of Zululand, University of the Western Cape, University of Pretoria, Northwest University, University of Fort Hare, University of Transkei, University of KwaZulu-Natal, Stellenbosch University, Nelson Mandela Metropolitan University, University of the Witwaterstrand, University of South Africa and University of Johannesburg.

The nature of the research topic suggested that a purposive sampling strategy would be most suitable, as it allowed the research to be directed to a particular segment of the population (namely those involved in masters courses), and the limited sample size allowed for “better purchase on the research question” (Robson, 1993, p. 155). In addition, directors, coordinators and lecturers in masters programmes presumably have a

suitable knowledge base regarding the course content in their respective clinical and counselling programmes (Kelly, 1994).

Sample size is also limited by the circumscribed number of universities in the South African context and by the number of directors, coordinators and lecturers involved in the clinical and counselling psychology masters programmes.

In some cases it was difficult to identify staff who were involved in the masters courses, despite several attempts made either telephonically or electronically. In these instances questionnaires were sent to all lecturers in that specific psychology department, requesting returns only from those participating in the masters course as director, coordinator or lecturer.

Completed questionnaires were received from 46 lecturers, coordinators and directors involved in masters courses in South African Universities. The 23 percent return which this represents does not give an accurate measure of the return rate, as out of the 197 recipients of questionnaires it was unclear which lecturers were actually involved in the masters programmes.

Only 29 respondents completed the brief voluntary biographical descriptions regarding gender and age, while even fewer completed the details of their ethnic background. Of the participants, almost two-thirds were female (n=17). Forty five percent of the respondents who filled in the biographical details fell within the 40–50 age range, with 31% (n=9) in the 30–40 age group, four between 50–60 years and two between 60–70. With regard to ethnicity, of those who responded to this detail, more than 70% described

themselves as white (n=21). Three others described themselves as Xhosa, Asian-Hindu and Zulu.

4.2. *Instruments*

As this was a national study, mail surveys were deemed appropriate for easier access and because of the relatively low cost involved. Moreover, anonymity of responses could be maintained (Fife-Shaw, 2000). In addition, mail surveys are often regarded as a suitable procedure for descriptive studies of large populations and the gathering original data, and even though the present survey involved a relatively small sample, similar objectives were sought (Babbie & Mouton, 2001).

Self-administered questionnaires were used, with both structured and semi-structured questions. Following a survey of the literature, a questionnaire was developed by the researcher designed to focus on eliciting descriptive information around religious and spiritual issues in psychology training programmes – more specifically, information on the extent to which religious/spiritual issues are currently addressed in masters training programmes and the perceptions regarding such issues of those involved in the course. The questionnaire also sought to elicit ideas of how these trainers could envisage inclusion of religious and spiritual issues in the existing course.

In total, the questionnaire was comprised of 13 questions, with the structured section containing primarily five-point Likert scales. The scales were complemented by four open-ended questions which provided the opportunity for richer depth of data to be collected (Howitt & Cramer, 2000), including an allowance for responses not included in

the scales. No distinction was made between religion and spirituality. This was partly because the aim of the study is not to arrive at a conclusive distinction of these concepts, and in other part based on the assumption that both have potential and related influences on counsellor education (Kelly, 1994).

Questions were loosely adapted from the national survey by Kelly (1994) in the United States on the role of religion in religion and spirituality in counsellor education. The initial survey draft was given to two retired psychology senior lecturers for comment. Both had lectured in clinical and counselling psychology programmes at masters level for a number of years. They commented that the questionnaire was clear and simple to complete.

Information was requested regarding position in the department (lecturer; coordinator, director, other) and number of years at university.

The questionnaire (Appendix 3) firstly aims to explore the extent to which religious and spiritual issues are currently incorporated into existing modules. In addition, it seeks to investigate the degree to which the respondents regard such issues as appropriate or important in this respect. This allows for the gathering of information on current practice and implementation, while simultaneously providing a window into the perceptions of those involved in the masters programmes.

Further questions are directed at finding out whether any lectures in the programmes are specifically devoted to religious and spiritual issues, and then in a more general sense, to what extent these topics arise across all lectures, if at all. The latter, more generalised

probe is an attempt to uncover whether religious and spiritual issues *are* of concern when discussing psychological theory and practice, thereby invoking the response both of those being taught and of those teaching. In addition, the questionnaire aims to discover whether students spontaneously raise these issues, where the presence or absence of such response may respectively indicate a need for or a lack of attention to this area.

The perceptions of those involved in the masters training programmes regarding the importance of religious and spiritual issues within such a course involves a direct request for their personal opinion, with both a Likert scale response and allowance for a qualitative perspective. In addition, questions aim to uncover whether the respondents feel that the masters training programme is an important preparation arena to help students to understand and deal with religious and spiritual issues in counselling.

Another area that the questionnaire focuses on is the respondents' knowledge of current or recent practice concerning religious and spiritual issues within their departments. This incorporates possible future implementation of modules or lectures dealing with these issues, as well as knowledge of research and publications within this area.

Lastly, the questionnaire aims to explore ways in which the respondents could envisage an inclusion of religious and spiritual issues within the existing psychology training programme. Addressed as it was to professionals with experience in the field and first-hand knowledge and understanding of established courses, it was considered appropriate that the project should also afford them the opportunity to offer constructive input.

4.3. *Procedure*

The proposal for this project was presented to the University of KwaZulu-Natal School of Psychology research panel, after which permission to conduct the study was obtained from the University's Ethics Committee.

A listing of directors, coordinators and lecturers involved in counselling and clinical psychology masters programmes was obtained, using both telephonic and electronic methods. Where a list of trainers who were specifically involved in the masters course was unobtainable, departmental psychology staff lists were investigated on the given university's website and questionnaires sent to all staff, requesting that only those involved in the masters programmes respond.

A survey questionnaire and stamped, addressed return envelope with a covering letter detailing the purpose of the study was posted to each individual. In addition, a covering letter was addressed to the head of each department explaining the nature of the study, and requesting permission for lecturers in the department to participate in the survey.

Assurances of anonymity for both the individual and the university were included in the covering letters, with all participants receiving a written informed consent form.

Approximately two months after the initial mailing, follow-up e-mails were sent to potential respondents requesting completion of the questionnaire.

4.4. *Analysis*

As the aim of the study is to describe and summarise data for a specific group of individuals (see Huysamen, 1998), descriptive statistics are used to analyse the collected data. The software employed is the Statistical Package for the Social Sciences (SPSS, version 13.0).

The qualitative responses are analysed descriptively, using content analysis. Descriptive content analysis of these responses was deemed most appropriate for the study, as the aim is simply to describe and explore the extent to which religious and spiritual issues arise, together with the perceptions of those involved in masters level training. The results were analysed according to commonalities as well as diversities in response, allowing for an integrative and holistic overview of the perceptions of the participants. The conclusions are accordingly limited to the content being studied, allowing for clarity and parsimony (Neuendorf, 2002). For the most part, analysis is approached by focusing on univariate descriptors.

Chi square analysis was considered, but deemed inappropriate in view of the small cell sizes.

4.5. *Ethical Considerations*

Informed consent was offered in this study, with a transparent explanation of the purpose and scope of the research (Barrett, 2002). This study did not invite participants who were minors or mentally impaired, and it was not expected that any impairment in physical or

psychological functioning would occur as a result of participating in this research (ibid). Anonymity of participants is maintained through the absence of identifiable data, thus insuring the welfare and protection of participants. In addition, respondents were informed that they had a right to withdraw from the study at any stage without any negative consequences, thus preserving their autonomy and consent to volunteer for this study. Participants were invited to receive the results of the study should they so wish.

Chapter 5

Results

The data collected from the 46 masters lecturers, directors and coordinators was analysed according to the aforementioned method. The Likert scale questions were summarised using descriptive statistics (frequencies), while the qualitative responses were analysed using content analysis. These qualitative responses were listed according to the emerging common themes. The four tables are arranged according to the current status of inclusion of religious and spiritual issues in masters training programmes, future conception of the inclusion of such issues, and the perceptions of those involved in masters training with regard to these issues.

5.1. Religion and spiritual issues in masters training programmes

This section addresses the extent to which religious and spiritual issues are currently included in masters training programmes by examining the existence of specific courses and lectures dedicated to these issues. It aims to uncover the extent to which the issues arise spontaneously in the lectures and the degree to which staff and students raise the issue of incorporating such aspects. There is also an investigation of research and publications concerning these issues, as well as exploration of the perceived appropriateness and importance of addressing these issues in specific modules.

Table 1

Current inclusion of religious and spiritual issues in masters programmes							
<i>specific courses</i>		<i>specific lectures</i>		<i>arises in lectures</i>		<i>issue raised by s/s</i>	
yes	5	0	36	never	7	never	13
no	39	1	3	occasionally	26	occasionally	27
unknown	2	2-3	5	f. often/often	12	f. often/often	6
		4+	2	missing	1		

Note: f. often = fairly often

s/s = staff and students

Table 1 deals with the current inclusion of religious and spiritual issues in the masters programmes in which the respondents are involved. Only five participants confirm the existence of a course which is specifically devoted to these issues. This question involved an account of the *title* of the course which dealt specifically with religious and spiritual issues, as well as a description of the *content* of the course. Of the five, only two responded with a very basic description of course content. One response included a description which encompassed an African perspective:

African cosmology, worldview, traditional healing – this covers the African view of spirituality (P41).

Another participant highlighted the course content from a different perspective:

Philophonetics counselling – dealing with Steiner's work of psychology – sounds, gestures and movement (P10).

Information offered by other participants included a title, simply – “Spirituality and psychology (optional)” – and mention of a one day introductory course on the “Psychology of religion”, while the “unknown” responses could mean that respondents were aware of specific courses but had no knowledge of what these courses entailed.

A large number of the participants (n=36) indicate that there are no specific lectures devoted to religion and spirituality, while a few participants (n=3) indicate that there is at least one lecture dedicated to this topic. Over half of the participants (n=26) indicate that these issues arise only occasionally in the class. On the question of whether incorporation of religion and spiritual issues into the masters programmes is raised by either the staff and the students, a greater part of the respondents (n=27) indicate that this occasionally occurs. However, a large number of participants (n=13) indicate that staff and students never raise the inclusion of religious and spiritual issues.

Table 2

Knowledge of current and future practice with regard to religious and spiritual issues					
	<i>recent publications</i>		<i>recent research</i>		<i>future inclusion</i>
none	18	none	13	never	4
1	14	1	11	mod. imp.	8
2	7	2	12	don't know	20
3	2	3	4	mod. poss.	13
4+	1	4+	3	missing	1
don't know	3	missing	3		
missing	1				

Note: mod. imp. = moderate impossibility
mod. poss. = moderate possibility

Table 2 deals with current and future practice with regards to religious and spiritual issues within the area of training, focusing on the areas of publication and research within

the past five years. Under half of the respondents (n=18) indicate that they have no knowledge of recent published articles by members of their faculty that deal with religious and spiritual issues as related to psychology. Similarly, 13 of the participants indicate that they are unaware of any research conducted by Honours, Masters or PhD students in this area. However, 23 respondents are aware of at least one or two research undertakings in this area. As to the future possibility of implementing specific Masters modules or lectures dealing with religious and spiritual issues within the psychological context, less than half (n= 20) of the respondents did not know if this would be likely to occur, while some (n=13) feel that it might be a moderate possibility.

Table 3

Inclusion, perceived appropriateness and importance of religious and spiritual issues in specific modules			
<i>modules</i>	<i>Included</i>		
	never	occasionally	fairly often/often
interventions	14	16	11
assessment	5	4	-
psychopathology	-	4	1
community psych	-	2	4
ethics	-	3	1
neuropsychology	2	1	-
research methods	2	1	-
<i>Appropriateness</i>			
	disagree	neutral	agree
interventions	7	11	23
assessment	3	3	3
psychopathology	-	-	5
community psych	1	1	4
ethics	1	-	3
neuropsychology	1	1	1
research methods	2	1	-
<i>Importance</i>			
	disagree	neutral	agree
interventions	9	8	23
assessment	4	2	4
psychopathology	-	2	3
community psych	-	2	4
ethics	1	-	3
neuropsychology	1	1	1
research methods	2	1	-

Table 3 deals with specific modules and the inclusion, appropriateness and importance of inclusion of religious and spiritual issues within each module. Overall, more than half of the respondents (n=31) indicate that these issues are included occasionally. Exactly half

(n=23) responded that religious and spiritual issues are never included in the modules they participate in. Twenty-two of the respondents indicated that these issues are often or fairly often included.

As to whether it is appropriate to address these issues within the modules, most of the respondents (n=39) agreed that it would be appropriate. More than half of those agreeing to the appropriateness of including religious and spiritual issues are involved in a psychological interventions module. Some participants remained neutral on the subject (n=11), with the remainder (n=7) disagreeing that addressing religious and spiritual issues within their modules would be suitable.

Incorporating religious and spiritual issues into training modules was deemed to be important by most respondents (n=38), with these respondents indicating a predominant involvement in a psychological interventions module. Under half disagreed with the importance of including these issues (n=17).

5.2. Trainers' views on including religion/spirituality in Masters programmes

This section of the survey deals primarily with the respondents' perceptions regarding the inclusion of religion and spiritual issues, thus drawing on their understanding of the relevance of such issues in psychology courses. Similarly, these questions sought to uncover opinions on the importance of preparing students for understanding and dealing with these issues in the therapeutic context. It also aimed to explore ideas of how integration into existing programmes could be conducted.

Table 4

Respondent's perceptions concerning religious and spiritual issues in Masters programmes					
<i>personal opinion</i>		<i>preparation important</i>		<i>how to include</i>	
agree	24	very much	9	specific module	2
neutral	9	much	15	integrated	16
disagree	10	somewhat	15	as it arises	8
missing	3	not much	2	not to be included	2
		not at all	2	don't know	2
				other	7
				missing	9

Table 4 deals with the respondents' views regarding the inclusion of religious and spiritual issues in psychology training programmes. More than half (n= 24) are of the opinion that overall, it is important to include religious and spiritual issues in the training programme. However, about a quarter (n=10) disagree that these topics should be so included. In terms of preparing the students for dealing with religious and spiritual issues in the therapeutic context, 30 of the participants agree that it is 'much/ to somewhat' important to do so, and nine feel that it is 'very much' important. The remaining seven participants do not pay much heed to preparation for students.

The questionnaire invited commentary on why respondents considered inclusion of religious and spiritual issues important or not important in any of the modules where they were involved. Respondents who considered that inclusion was important offered various comments in support of their view, with some consensus that concerns of religion and spirituality should feature in training programmes because of the way they inform the

individual's worldview and are therefore an intrinsic part of the human condition. As one participant states:

as an intrinsic part of life these issues emerge all the time in therapy and training – they are critical to understand African and Western worldviews and need to be covered (P41).

Also highlighted is the need for the therapist to be aware of both the client's and their own personal beliefs in this area as these may impact on the therapeutic relationship. Moreover, an increase in awareness of religious and spiritual issues is felt to be important as these may be pertinent to the dynamics of a particular case, and the therapist would require the skills for assessing and addressing this particular topic. For example, religious and spiritual issues may become of concern for clients during a time of crisis:

I believe that psychotherapeutic work, and particularly psychotherapy for traumatic stress, may bring up existential issues for clients that warrant discussion (P13).

In addition, training in religious and spiritual issues should deal with exploration of the potential meaning that these aspects may have for clients, rather than focusing on a specific type of religious or spiritual counselling that one would expect of pastoral counselling. Thus, religious and spiritual issues should be dealt with in a psychological manner.

Agreeing to the inclusion of religious and spiritual issues in the masters psychology programme is ambivalent for some of the participants. One concern is that religion and spirituality are no more important than other areas, as this represents only one aspect of human experience. Therefore this should not receive any privileged attention in an already over-inclusive course. Hesitancy about inclusion also appears to be related to

unease that the platform for addressing these issues in the training programmes may emanate from a specific doctrine, rather than a broader perspective:

This is a very sensitive topic and one should be very careful not to conduct lectures from one specific perspective, as many religious/spiritual people tend to do... Students should not be indoctrinated – they should be trained (P25) [original emphasis].

Similarly, there is a concern that such an inclusion may encourage masters students to adopt a form of religious or pastoral counselling in therapy, and that students may feel that it is acceptable to counsel from a biased religious/spiritual perspective.

Those participants who completely disagree with inclusion of religious and spiritual issues in training programmes feel that the issues of religion and spirituality should not be included because psychology is a secular course, while the place for religious/spiritual issues is in the separate domain of pastoral work:

Religion should be kept out of the course as it interferes in the professionalism and training and principles of psychology. This is a psychology course not a religious studies course. If students want religion, then they should do a religious degree or/and pastoral counselling and the like. Religion means different things to people. In psychology it can be seen as a defensive mechanism against anxiety, or a system of judgements and moral teachings (P19).

5.3. *Integrating religion and spirituality in masters programmes*

Participants' (n=16) most common response as to how the inclusion of religious and spiritual issues should take place is to favour their integration into existing modules, when applicable. This integration could then be shaped according to the relevancy of religion and spirituality to the topic. For example,

As relevant sections in relation to particular aspects of courses – e.g. in my course, perhaps it can/ should be related to bereavement and coping around HIV/AIDS diagnosis/ death (P1).

Some suggestions were that the introduction of religious and spiritual issues could focus on contextualising the client's experience, and there was also support for maintaining a general awareness of these themes in all modules.

Some participants (n=8) feel that religion and spirituality should only be dealt with as the topic arises. For example,

I think it should be integrated into modules where questions arise from theories that are taught. I'm not in favour of a module on its own – too much overlapping with pastoral counselling (P42).

Other respondents (n=2) feel that religious and spiritual issues could be included as a separate module. A specific suggestion proposes a two-fold mode of inclusion:

The inclusion could occur on two levels. First, as a separate module that examines theoretical and philosophical aspects relating to spirituality and psychology. Second, through inclusion (in seminars, readings and discussion) in existing modules to the extent that spirituality is related to the module in question (P5).

Another suggestion is to include a separate module dealing with religious and spiritual issues that takes the form of dialogue with significant role-players, such as pastors, spiritual healers, and traditional healers. Other proposals include introducing religion and spirituality as an optional elective: an introductory module or a one-week workshop, although it is not stated what should be included in these modules.

Another suggestion includes introducing a broad overview of different religious systems, focusing on dealing with religious and spiritual issues as they relate to therapeutic competence:

Inclusion should be in the broadest possible sense and only as these issues relate to the competence of the therapist to appropriately (and without bias) use them to the benefit of the client (P24).

Psychopathology, assessment, psychotherapy, personality, life skills and psychological practice are some of the suggestions as to which modules would be most appropriate for inclusion of religious and spiritual issues.

5.4. Summary

This study was conducted among participating universities in South Africa and considered the current and future inclusion of religious and spiritual issues within the masters psychology training programme. It also sought to uncover the perceptions of those educators involved in these programmes regarding such issues, as well as a consideration of how educators envisage integration of religious and spiritual issues in the programme.

The results indicate that religion and spirituality are rarely dealt with as separate modules, lectures or courses. For the most part, these issues arise only occasionally within existing course content. There appears to be very little knowledge of recent publications and research around religion and spirituality as they relate to psychology. Most of the participants were unaware of the possibility of incorporating these issues into masters programmes in the future. While most participants agree that it is appropriate and

important to include religion and spirituality, it appears that at present this is only occasionally done.

Perceptions of those involved in the masters programmes towards religious and spiritual issues vary. While most agree to inclusion, there is some concern around the doctrine and bias that these issues could potentially introduce. Moreover, some participants felt that religion and spirituality should not receive any more attention than other aspects of human experience, particularly in light of already full programmes. The value of introducing religion and spirituality in training programmes is highlighted in the impact that it may have on the therapeutic setting, both in terms of therapist beliefs and the functioning of the client. Participants (20%) feel that religion and spirituality should be dealt with in a psychological manner, particularly in terms of the meaning that it holds for the client.

With regard to envisaging inclusion of religious and spiritual issues within the existing programme, most participants feel that incorporation should occur as an integration into existing course content rather than as a separate module.

Chapter 6

Discussion

6.1. *Introduction*

In this chapter the results obtained from the survey are discussed. The aims of the study were to identify the current and future inclusion of religious and spiritual issues within masters psychology programmes, the perceptions of the educators involved, and possible implementation of these aspects.

6.2. *Current inclusion of religious and spiritual issues in Masters programmes*

The findings in this study do not necessarily represent the views of all staff involved in the academic training of future psychologists, but rather those of the respondents who participated. The results of this descriptive study of a cross-section of masters psychology training programmes in South African universities, indicate that religion and spirituality occur as a specific course component in fewer than 11 percent of the programmes (n=5). Similarly, the majority of the programmes (n=36) do not have specific lectures devoted to religious and spiritual issues. While over half of those participating in the study agree that it is important to include these issues in training, it would appear that this is not reflected in current practice in South Africa psychology masters programmes. This mirrors the findings of Kelly's 1994 American study, Kelly (1994), where those involved in the training programmes considered these issues to be important in the counselling process

yet implementation of addressing these issues in the appropriate arena of the training programmes was somewhat neglected.

The findings of this present South African study confirm that there is some approval in principle for including religious and spiritual issues in training programmes, but that this is for the most part not put into practice. This highlights a notable gap in the curriculum, where a significant aspect of the human experience may be overlooked (Genia, 2000; Shafranske, 2001). In the context of South Africa this signifies a substantial omission, considering that a large portion of the population draw heavily on religious and spiritual explanations for many of their experiences (Herselman, 2001; Swartz, 1998).

These results indicate that for the most part it is only occasionally that religious and spiritual issues arise in lectures and then usually informally or spontaneously. A limitation of the questionnaire is that it did not seek to explore in what particular context these issues arise, which might have provided valuable background information. The limited attention given to religious and spiritual issues may be due to an implicit or explicit assumption in training programmes that religion and spirituality fall outside the realm of scientific enquiry and are therefore not considered appropriate areas of review in training (Crossley & Salter, 2005; Shafranske, 2001). A South African study by Patel and Shikongo (2006) confirms this may partly be the reason why issues of religion and spirituality are not raised. Student participants in this study felt reluctant to raise these issues either in the lecture room or in the practical therapy they were undertaking, as they sensed an inherent disapproval from those involved in their masters training programmes.

A large portion of the masters educators (n=21) in this current study are not aware of any recent publications in the past five years that deal with religious and spiritual issues. However some of the participants (n= 14) do have knowledge of at least one academic publication in this area, while fewer (n=10) had knowledge of two or more such publications. These results suggest either that psychological publications are not being produced due to a certain lack of interest in this field amongst South African academics, or that publications which deal with religious and spiritual issues relating to psychology do not enjoy a high level of awareness. This does not appear to be in keeping with interest among the general public, where an expanding body of popular psycho-spiritual literature is evident in most mainstream book stores (Prest et al., 1999).

Knowledge of recent research in the areas of religion and spirituality displays a similar paucity. Only seven of the participants are aware of three or more research undertakings in this area, suggesting that religion and spirituality are not considered an important field for academic review. This accords with findings in international literature, where the general consensus considers religious and spiritual issues to be “perhaps the most unexamined issue of diversity within the field of mental health” (Gutsche, cited in Crossley & Salter, 2005, p. 297).

As for the future possibility of implementing specific modules or lectures dealing with such issues, most of the participants were rather noncommittal. Although most agree that it is important to include these issues, and to prepare students to understand and deal with them, this is not reflected in envisagement of future practice in training programmes. This

may in part be due to uncertainty about how this can be done, since little previous training has been received in this area (Genia, 2000).

6.3. *Inclusion of religious and spiritual issues in specific modules*

The following discussion explores the extent to which religious and spiritual issues are included in specific modules which form the core of the masters psychology training programme. It will also examine the appropriateness and importance of including religious and spiritual issues within the following modules: psychological intervention, psychological assessment, psychopathology, community psychology and ethics.

Psychological intervention is one of the key modules of a masters psychology training programme, and it is at this level that religious and spiritual issues would presumably play a significant part if these were to be incorporated into the training. The study responses indicate that these issues are occasionally included (n=16), and in some cases often (n=11). But a significant number of responses (n=14) indicate that they are never included. This is supported by Genia (2004), who notes that discussion of how to deal with religious and spiritual issues in the therapeutic consultation is to some extent neglected, leading to a lack of knowledge and feelings of incompetence in dealing with religion and spirituality in the therapeutic context. International literature argues that one of the reasons why clinicians do not engage with these issues in the therapy room is because of the lack of adequate training in this area, leading to a deficit in skill (Crossley & Salter, 2005; Shafranske, 2001).

Psychological assessment is another core module of a masters psychology training programme, and could possibly provide a fertile backdrop to introducing psychometric evaluation [empirical] of individuals' religious and spiritual quotients. The results of this study indicate that religious and spiritual issues are included either just occasionally (n=4) or never (n=5). Only four participants agreed that it would be important to include religious and spiritual issues in this module. So, while religion and spirituality have in the past been dismissed on the grounds that they lie outside the realm of science (Shafranske, 2001), the results of this study suggest that there is still little attempt being made to address these issues empirically. As Pargament et al.,(2005) note, an empirically-based rationale for a spiritually-integrated psychotherapy is necessary, so that this aspect of human experience can be incorporated into psychology. This research indicates that it is largely neglected in current psychological assessment modules in the South African context.

The recent inclusion of religious and spiritual problems in the DSM-IV (Crossley & Salter., 2005) suggests a recognition that these issues may impact on an individual's psycho-social functioning. In South Africa, where many of the population subscribe to traditional religious and spiritual explanations for human experience and where causation of some of life's difficulties is frequently attributed to the supernatural (Swartz, 1998), it would seem to indicate that a psychopathology module should provide a space for these issues. The results of this study indicate that these issues are occasionally included (n=4), and all of those involved in this module (n=5) agree that it is appropriate that they should be.

Community psychology has recognised the significance that religion and spirituality have within the community. In this, a sense of community is fostered by shared values: Hill argues that “it is hard to speak of shared values without discussing religious values” (2000, p. 144). These shared values are then central to understanding communities.

A large folk sector in South Africa practices religious and indigenous healing, and these ceremonies are often conducted publicly and with an emphasis on community participation (Swartz, 1998). One would presume therefore that the challenges of dealing with religious and spiritual issues would be raised in a module dealing with community psychology, especially in the South African context. The results of this study indicate that religious and spiritual issues are in some cases included in such modules, either occasionally (n=2) or often (n=4). Most (n=4) of those involved in a community psychology module agree that it is appropriate and important to include these issues. In summary, it would seem that adequate attention is currently paid to the religious and spiritual dimensions of the community in this module, although the particular focus on these issues is not clear, and is perhaps an area for further review.

This leads us to the question of the value of incorporating religious and spiritual issues within an ethical framework. Inclusion of religious and spiritual issues within Ethics modules occurs occasionally (n= 3), while most (n=3) involved in this module agree that it is an appropriate and important arena to address these issues. Ethical consideration of religious and spiritual beliefs which perpetuate problematic behaviour could provide a rich and insightful means in dealing with ethical dilemmas raised within this context. For instance, the prevalence in South Africa of witchcraft/sorcery murders, ritual killings and

medicine murders raises interesting and complex ethical questions. These events are frequently related to supernatural cosmic philosophies and inform particular worldviews (Conradie et al., 1999). Dealing with clients whose beliefs stem from these philosophies may pose personal and moral predicaments for the therapist.

Exclusion of religious and spiritual issues from certain modules in the current system of training may be underpinned by several factors. Traditionally, psychology has attempted to immerse itself within scientific and secular fields in order to maintain a respectable eligibility in a biomedical framework (Plante & Sherman, 2001). Using this scaffold, human experience is approached from a rational perspective, with an emphasis on the empirical and observable (Thorne, cited in Feltham & Horton, 2000). In South Africa this western psychological viewpoint has typically been applied to other cultures and psychology continues to put the accent on objective knowledge (Mkhize, 2004).

“Indigenous psychologies” (Mkhize, 2004, p. 28), with their metaphysical explanations for understanding a vast array of human experiences, have for the most part been observed and studied within a western paradigm (ibid), and while there is a burgeoning interest within psychology in a multicultural approach (Pedersen, 1999), it would appear that training programmes continue to adopt a secular, measurement-based approach, which excludes the experiences of those South African communities where religion and spirituality offer fundamental meaning.

Neglect of religious and spiritual issues in psychology training programmes may be further perpetuated by the lack of adequate knowledge in these areas (Shafranske, 2001), while some educators may believe that religious and spiritual knowledge falls outside

their roles of expertise (Schulte, Skinner, & Claiborn, 2002). Bergin and Jensen (cited in Jones, 1994) found that in comparison to the general public, psychologists were the least religious, which perhaps explains to some extent the lack of concern regarding religious and spiritual matters on the part of those delivering the training. Empirical research is needed to assess whether these international findings also hold true for South Africa.

6.4. *Staff attitudes towards inclusion of religious and spiritual issues*

Over half of the respondents in this study (n=24) are of the opinion that religious and spiritual issues are important to include in masters training programmes. The results suggest, broadly, that respondents' differing individual perceptions of the meaning of religion and spirituality influence their opinions about the value of including discussion of these issues in the masters programme. Respondents inclined to focus on religion as dogmatic tended to be less accepting of inclusion than those whose focus was on a softer notion of spirituality. The following exploration is based upon information gathered from the open-ended questions.

What emerges is some ambivalence among respondents about the implications of introducing these issues, such as the importance of exploring them with the focus on the meaning they have for the client rather than resorting to a form of pastoral counselling. There were also concerns about how religion and spirituality relate to existential issues, and the impact which therapist beliefs may have on the counselling process.

6.4.1 Ambivalence about manner of inclusion

While in agreement on the importance of incorporating religious and spiritual issues, participants express concern that this may produce some form of indoctrination.

Similarly, they indicate that engagement with religious and spiritual issues in training programmes may be perceived as promoting the idea amongst students that it is acceptable to counsel as one would in a religious setting.

This seems to indicate that reluctance to engage with religion and spirituality is partly linked to a belief that this might shift the emphasis from the psychological to the religious, with the former being marginalised by a doctrinal perspective. However the converse may have already established itself, where the secularity of psychology has excluded consideration of the religious and encourages the view that it is the only valid lens through which to see the world (Thorne, cited in Feltham & Horne, 2000).

Religion has been associated in particular with rigid and unyielding restrictions (Pargament, 1999), which possibly accounts for the sense of dogma surrounding it. Yet, the literature suggests that there is a move towards a more private, deinstitutionalised spirituality, mirroring a growing dissatisfaction with traditional religiosity (ibid). The perception may nonetheless persist of a canon of principles which inhibit and confine human potential.

There also seems to be ambivalence about whether religious and spiritual issues are any more or less important than other areas of human functioning. The literature frequently highlights the universality and significance of religion and spirituality for many people

(Pargament, 1999; Sadock & Sadock, 2005; Shafranske, 2001), but the responses in this study suggest that religion and spirituality continue to be perceived as separate issues in human functioning, rather than underlying or compatible with other psychological realms of being. This speaks to a reductionistic and mechanistic view which disconnects the parts of the individual, rather than merging them within a holistic framework (Tan & Dong, 2001).

6.4.2 Meaning for the client

Those respondents who agree with the inclusion of religious and spiritual issues in therapist training cite the importance in therapy of acknowledging the meaning these may have in the client's own worldview. Mkhize describes worldview as an underlying set of assumptions that people develop in order to understand the world and their place in it, and he invokes the example of an African perspective and the importance of religion and spirituality within this framework, where "metaphysical ontologies are central to traditional African understandings of the world" (2004, p. 38). This relates to a system that is concerned with subjective views of reality, an individual's perceived place in the universe and their relation to others and the environment.

International authors have acknowledged the psychotherapeutic value that religious and spiritual concerns may uncover. Genia (2000) notes that these can provide important insight into the individual's developmental relationships, as well as knowledge of the level of psychological growth, and goes on to observe that religious confusion may suggest separation and individuation issues. Desires to move away from one's established faith, interest in other faiths and spiritual identity confusion may be indicative of this

developmental task. Fromm (1985) concurs with this, believing that a developing relationship with God is an important function in maturation.

While acknowledging the value in exploring the meaning that religious and spiritual issues may have for clients, participants in this study did not for the most part offer suggestions on how these issues could be related to specific developmental and healing processes. This might be in part because, as Crossley and Salter (2005) noted, the concept of spirituality is perceived as elusive – possibly due to a lack of examination of its nature within the psychological field. This lack of attention feeds into an absence of language and conceptualisation of how spiritual and religious concerns may be utilised in the therapy room.

6.4.3 Existential Concerns

As one participant in the study notes, religious and spiritual issues may also present themselves in times of crisis, raising existential dilemmas in which meaning and trust have been shattered for the patient on various levels. As Herman (1992) notes, traumatised people often feel that their unheard cry for comfort and protection in the moment of trauma creates a feeling of complete abandonment by God and significant others. A deep sense of alienation and disconnection emerges from the collapse of a basic trust in the human and divine systems which are previously believed to sustain and protect the individual.

6.4.4 *Importance for the therapist*

In this study participants highlighted the need for the therapist to be aware of both the client's and their own personal beliefs. As Younggren states (cited in Corey, 2005), the personal beliefs of the clinician have been demonstrated to directly and indirectly influence the course of therapy. Genia (2000) suggests that a course in self-exploration related to students' views and beliefs concerning religious and spiritual values is helpful in examining how these may impact on the therapeutic relationship.

Moreover, as one participant in this study notes, awareness of the role that religion and spirituality can frequently play in the lives of individuals may help to increase therapeutic skill in addressing the client's problem. These skills may include an increased understanding of spiritual development and sensitisation to these issues (Ingersoll, 1997); available assessment measures (Brawer et al., 2002); conceptualising impact on clients' psychosocial functioning and increased knowledge of normative spiritual and religious functioning (Genia, 1994). Techniques which integrate standard counselling skills with spiritual dialogue are also helpful in increasing trainee's proficiency in dealing with these issues (Ingersoll, 1997).

6.5. *Integration into Masters Programmes*

A number of the participants (n=16) felt that religious and spiritual issues should be integrated into already existing modules where applicable and germane. It was suggested by a participant that religious and spiritual issues should constitute a continual theme in all modules, while others (n=8) felt that these should only be dealt with as they arise.

Brawer et al. (2002) propose an integrative approach where training is used to foster an environment which sensitises the students' awareness of religious and spiritual issues, and where supervision can be used to systematically consider these issues in a holistic framework. Consideration of different religious systems and practices may also be helpful in addressing the impact of these on the client's functioning as well as the effects they have on therapeutic interactions.

Two participants felt that it would be appropriate and relevant to engage with these issues as a separate module, and offered some suggestions on how to attend to incorporation into the programmes. This incorporation could involve dialogue with the key people who play a role in these issues, such as pastors and spiritual/traditional healers, as well as examining the relationship to western psychotherapy. One participant suggested a separate module at masters level, but with a basic course at undergraduate level which begins the introduction to these issues. This suggests that perhaps the absence of religious and spiritual issues from masters programmes is perpetuated by lack of attention in undergraduate courses.

Delivering spirituality and religion as a separate module may have the benefit of highlighting awareness of these issues. Genia (1994) feels that a separate module could examine the effects these issues may have on the therapeutic relationship and on client functioning. She also advocates knowledge of normative religious functioning for that particular faith, which is advantageous in distinguishing between healthy and maladaptive modes of religious behaviour. Self-exploration of the students' own religious beliefs is also considered important.

Ingersoll (1997) adds to this by suggesting that religion and spirituality be introduced as an important element for the therapist to learn to work with. The training may include descriptions and knowledge of the constructs. He also proposes role-plays in training to encourage exposure to possible interventions when dealing with these issues, in conjunction with integrative counselling techniques that incorporate spiritual discourse. Also considered valuable is discussion of assessment measures and instruments.

This study deliberately did not provide definitions of religion and spirituality, accepting instead that the two are commonly perceived as connected and overlapping constructs. It is interesting to note how various participants interpreted these concepts. Some automatically focused on a more generalised and softer spirituality while others focused on a perceived rigidity of religion and its negative effects. The range of perceptions of religion and spirituality may influence acceptance of these concepts and affect how they are engaged with in training programmes. As Genia notes (1994), historically religion has often been associated with impaired functioning and negative connotations. This highlights a need to define the concepts of religion and spirituality, which in turn may reduce neglect of these issues as a clearer and more succinct theory of spirituality and religion is developed, along with the implications for psychology (Pargament et al., 2005). This is especially important for future research.

Chapter 7

Recommendations, Limitations and Conclusions

7.1. *Recommendations*

Religious and spiritual concerns psychology training have received very little attention in the South African literature. Increasing attention to multiculturalism and the distinctive cultural diversity of South Africa reinforce the strong case to be made for future South African psychologists to be exposed to prevalent cultural belief systems which are often intimately bound to a metaphysical worldview (Swartz, 1998). The results of this study indicate that while it may be considered important to address these issues they are in fact given relatively little attention, which has implications for future practice. Considering the unique South African population, further research concerning ways of addressing the religious and spiritual needs of the population would be of benefit. In addition, research which considers the relationship between mental health and religion, specifically within the South African context, may assist psychologists in uncovering resources which aid the therapeutic process.

In order that post-graduate psychology courses deliver comprehensive and holistic programmes, it is recommended that an awareness of religious and spiritual issues and their impact on the therapeutic setting be addressed. With an increase of interest in the popular sphere, and an emerging awareness within the helping professions of the importance of these aspects of experience (Patel & Shikongo, 2006), psychology training

programmes would benefit from a more holistic approach which considers this facet of the human condition.

The diversity of the South African population is reflected by the diversity of the staff and students in the masters psychology programmes. Yet most programmes still approach the discipline through a European/ Western lens (Mkhize, 2004) and religious and spiritual beliefs are left largely unheeded (Patel & Shikongo, 2006). Discussion around the systems of belief which govern the everyday life of psychologists-to-be and trainers alike could valuably highlight how these in turn influence the course of therapy.

7.2. *Limitations of the study and directions for future research*

In weighing up the usefulness of these findings, it may be helpful to keep in mind certain limitations in what the study set out to investigate:

- Other in-depth data could have provided richer background to the findings: for example, interviews with the educators involved in training programmes might have provided a more profound view of perceptions of religious and spiritual issues by permitting deeper investigation of personal experiences and background. This suggests an area for future research which could extend these findings.
- The study sample was confined to a sample of educators involved in psychology masters programmes, excluding those involved only in undergraduate training. Since the content of undergraduate training presumably also informs post-graduate training, this is another area that remains to be investigated for further insight into the treatment of religious and spiritual issues in psychology.

- The study did not attempt to investigate either the religious and spiritual orientations of the participants themselves, or the possible correlation between years of experience in training and a respondent's perceptions of religious and spiritual issues, both of which are questions which could present a further useful dimension of data in approaching these concerns in the design of training programmes.
- The study did not attempt to include any consideration of clinical experience on the part of respondents themselves, which it can be presupposed would have an additional, if unquantifiable, effect on their responses. Furthermore, the variables taken into account included only masters course work, and did not extend to other forms of training involvement such as supervision and additional practical work.

7.3. *Conclusion*

There are very few South African universities which offer a specific course or specific lectures dealing with religious and spiritual issues in masters counselling and clinical psychology training programmes. For the most part these issues tend to arise spontaneously and only occasionally across the spectrum of the universities. Underlying this there may be an implicit assumption that it is undesirable or inappropriate to raise the subject in psychological discussion in the training context (Shafranske, 2001). Moreover, it may not be considered a significant area for academic review and for that reason, too, is overlooked in the coursework. A limitation of this study is that it did not seek to explore in what context these issues did arise and how they were specifically dealt with when they did.

Any future integration of religion/spirituality issues in training programmes does not appear to be of primary concern to trainers. While agreeing that these issues are important to consider, most are uncertain as to whether or not this topic will be introduced in the future in a deliberate attempt to address the issues. Paradoxically, most of trainers in this sample do agree that it is important to prepare students to deal with these issues in their practical therapy, but the gap that appears here in the curriculum would seem to perpetuate a circle of neglect of religious/spiritual concerns in training and a consequent lack of knowledge and awareness about how to approach them in the therapeutic context.

Overall, apart from a few dissenting voices explicitly opposed to the introduction of these issues into the programmes, most trainers that participated in the survey appear to be moderately accepting of inclusion of religious and spiritual issues. Ambivalence mostly concerns the misgiving to include them could encourage counselling with a pastoral stance from a specific doctrinal position. There is a general sense that religion and spirituality should be explored in terms of the meaning they hold for the client rather than as knowledge of particular systems of belief.

The majority of the educators in this study envisage the inclusion of religious and spiritual issues as an integrative collaboration with existing modules. However, most of those who advocated this approach did not explain how this integration could be implemented. This is perhaps an area for future review, and represents one of the limitations of this study.

References

- American Psychological Association. (2000). Retrieved May 10, 2007, from American Psychological Association Website, <http://www.apa.org/ed/gp/2000.html>.
- Ano, G. G., & Vasconcelles, E. B. (2005). Religious coping and psychological adjustment. *Journal of Clinical Psychology*, 61 (4), 461–480.
- Babbie, E., & Mouton, J. (2001). *Surveys: The practice of social research*. Oxford: Oxford University Press, 230–267.
- Barrett, M. (2002). Practical and ethical issues in planning research. In G. M. Breakwell., S. Hammond., & C.F. Fife Shaw (Eds.), *Research Methods in Psychology*. London: Sage Publications.
- Belzen. J. A. (2005). In defense of the object: On trends and directions in psychology of religion. *The International Journal for the Psychology of Religion*, 15 (1), 1–16.
- Brawer, P. A., Handal, P. J., Fabricatore, A. N., Roberts, R., & Wadja-Johnston, V. A. (2002). Training and education in religion and spirituality within APA-accredited clinical psychology programmes. *Professional Psychology: Research and Practice*, 33 (2), 203–206.
- Chirban, J. T. (2001). Religious and spiritual concerns in psychotherapy. In T. G Plante., & A. C. Sherman (Eds.), *Faith and Health: Psychological Perspectives*. New York: The Guildford Press.
- Conradie, H., Joubert, S. J., Naude, C. M. B., Nesor, J. J., Van Der Hoven, A. E., & Snyman, H. F. (1999). *Introduction to criminology: The crime, offenders and victims*. Pretoria: University of South Africa.

- Corey, G. (2005). *Theory and practice of counseling and psychotherapy* (7th Ed.). California: Thomson/ Brooks Cole.
- Crossley, J. P., & Salter, D. P (2005). A question of finding harmony: A grounded study of clinical psychologists' experience of addressing spiritual beliefs in therapy. *Psychology and Psychotherapy: Theory, Research and Practice*, 78, 295–33. The British Psychological Society.
- Das, A. K. (1998). Frankl and the realm of meaning. *Journal of Humanistic Education and Development*, 36 (4), 199–212.
- Duncan, N., Stevens, G., & Bowman, B. (2004). South African psychology and racism: Historical determinants and future prospects. In D. Hook (Ed.), *Critical Psychology* (pp 24–55). Lansdowne: UCT Press.
- Elkins, D. N. (1995). Psychotherapy and spirituality: Toward a theory of the soul. *Journal of Humanistic Psychology*, 35 (2), 78–98.
- Faiver, C. R., Ingersoll, R. E., O'Brien, E., & McNally, C. (2001). *Explorations in counseling and spirituality: Philosophical, practical and personal reflections*. Belmont: Brooks/Cole.
- Faller, G. (2001). Psychology versus religion. *Journal of Pastoral Counselling*, 36, 21–34.
- Feltham, C., & Horton, J. (2000). (Eds.), *Handbook of counselling and psychotherapy*. London: Sage Publications.
- Fenichel, G. (1999). *Can Psychoanalysis accept spirituality?* Paper presented to conference of International Council of Psychologists.

- Fife-Shaw, C. (2002). Surveys and sampling issues. In G.M. Breakwell, S. Hammond, & C.F. Fife Shaw (Eds.), *Research Methods in Psychology*. London: Sage Publications.
- Frankl, V. E. (1986). *The doctor and the soul: From psychotherapy to logotherapy*. New York: Vintage Books.
- Fromm, E. (1985). *The art of loving*. London: Harper Collins
- Genia, V. (1994). Secular psychotherapists and religious clients: Professional considerations and recommendations. *Journal of Counseling and Development*, 72 (4), 395–399.
- Genia, V. (2000). Religious issues in secularly based psychotherapy. *Counseling and Values*, 44 (3), 213–222.
- Hart, J. (1983). *Modern eclectic therapy: A functional orientation to counseling and psychotherapy*. New York: Plenum Press
- Herman, J. L. (1997). *Trauma and recovery: From domestic abuse to political terror*. London: Pandora.
- Herselman, S. (2001). *Anthropology and health care*. Pretoria: University of South Africa.
- Hill, J. (2000). A rationale for the integration of spirituality into community psychology. *Journal of Community Psychology*, 28 (2), 139–149.
- Hill, P. C. (1999). Giving religion away: What the study of religion offers psychology. *The International Journal for the Psychology of Religion*, 9 (4), 229–249.

- Howitt, D., & Cramer, D. (2000). *First steps in research and statistics: A practical workbook for psychology students*. London: Routledge.
- Huysamen, G. K. (1998). *Descriptive statistics for the social and behavioural sciences*. Pretoria: Van Schaik.
- Hyde, M., & McGuiness, M. (1997). *Introducing Jung*. Cambridge: Icon Books.
- Ingersoll, R. E. (1997). Teaching a course on counseling and spirituality. *Counselor Education and Supervision*, 36 (3), 224–233.
- Johnston, W. B., & McMinn, M. R. (2003). Thirty years of integrative doctoral training: Historic developments, assessment of outcomes, and recommendations for the future. *Journal of Psychology and Theology*, 31 (2), 83–96.
- Jones, S. L. (1994). A constructive relationship for religion with the science and profession of psychology: Perhaps the boldest model yet. *American Psychologist*, 49 (3), 184–199.
- Jung, C. (1983). Introduction to the religious and psychology problems of alchemy. In Storr, A (Ed), *Jung: Selected Writings*, (pp 253–286). London: Fontana.
- Kelly, E. (1994). The role of religion and spirituality in counselor education: A national survey. *Counselor Education and Supervision*, 33 (4), 227–235.
- Lee, H., & Marshall, H. (2003). Divine individualism: Transcending psychology. In Lisa Blackman (Ed.), *The International Journal of Critical Psychology*. (8) (pp 13–33).
- MacDonald, D. (2004). Collaborating with students' spirituality. *Professional School Counseling*. 7 (5), 293–301.

- Miller, E. D. (2004). The Development and validation of a new measure of spirituality. *North American Journal of Psychology* 6 (3), 423–431.
- Mkhize, N. (2004). Psychology: An African perspective. In D. Hook (Ed.), *Critical Psychology* (pp 24–55). Lansdowne: UCT Press.
- Moore, D. T. (2004). *What is holistic psychology?* Retrieved April, 12, 2005, from file://A:\Holistic Psychology.htm
- Myers, D. (2000). The funds, friends, and faith of happy people. *American Psychologist* 55 (1), 56–67.
- Neuendorf, K. A. (2002). *The content analysis guidebook*. Thousand Oaks: Sage Publications:
- Pargament, K. (1999). The psychology of religion and spirituality? Yes and no. *International Journal for the Psychology of Religion*, 9 (1), 3–17.
- Pargament, K. I., Murray-Swank, N. A., & Tarakeshwar, N. (2005). An Empirically-based rationale for a spiritually-integrated psychotherapy. *Mental Health, Religion and Culture*, 8(3), 155–165.
- Pargament, K. I., & Ano, G. G. (2006) Spiritual resources and struggles in coping with medical illness. *Southern Medical Journal*, 99 (10), 1161–1162.
- Patel, C. J., & Shikongo, A. E. E. (2006). Handling spirituality/religion in professional training: Experiences of a sample of Muslim psychology students. *Journal of Religion and Health*. 10943, 1–20.

- Pedersen, P. (1999). Culture-centered interventions as a fourth dimension of psychology. In Pedersen, P (Ed.) *Multiculturalism as a fourth force*. (pp3–18). Philadelphia. Taylor and Francis.
- Plante, T. G., & Sherman, A. C. (2001). *Faith and Health: Psychological Perspectives*. New York: The Guildford Press.
- Prest, L. A., Russel, R., & D' Sousa, H. D. (1999). Spirituality and religion in training, practice and personal development. *Journal of Family Therapy*, 21, 60–77.
- Reinert, D., & Bloomingdale, J. (1999). Spiritual maturity and mental health: Implications for counseling. *Counseling and Values*, 43 (3), 211–224.
- Richards, P. S., Keller, R. R., & Smith, T. B. (2004). Religious and spiritual diversity in counseling and psychotherapy. In T. B. Smith (Ed), *Practicing Multiculturalism: Affirming Diversity in Counseling and Psychology*. (pp 276–279). Boston: Pearson.
- Robson, C. (1993). Designing case studies. *In Real World Research*. Oxford: Blackwell.
- Russinova, Z. & Cash. D. (2007). Personal perspectives about the meaning of religion and spirituality among persons with serious mental illness. *Psychiatric Rehabilitation Journal*, 30 (4), 271–284.
- Sadock, B., & Sadock, V. (2004). *Kaplan and Sadock's concise textbook of clinical psychiatry*. Philadelphia: Lippincott, Williams and Wilkins.
- Schulte, D. L., Skinner, T. A., & Claiborn, C. D. (2002). Religious and spiritual issues in counseling psychology training. *The Counseling Psychologist*, 30 (1), 118–134.
- Seybold. K. S. (2005). God and the brain: Neuroscience looks at religion. *Journal of Psychology and Christianity*, 24 (2), 122–129.

- Shafranske, E. P. (2001). The religious dimension of patient care within rehabilitation medicine. In T. G. Plante., & A. C. Sherman. (Eds.), *Faith and Health: Psychological Perspectives*. New York: The Guildford Press.
- Sperry, L. (2001). *Spirituality in Clinical Practice: Incorporating the spiritual dimension in psychotherapy and counselling*. Philadelphia: Brunner-Routledge.
- Sperry, L., & Mansager, E. (2004). Holism in psychotherapy and spiritual direction: A course correction. *Counseling and Values*, 48 (2), 149–162.
- Swartz, L. (1998). *Culture and mental health: A Southern African view*. Cape Town: Oxford University Press.
- Tan, S. Y., & Dong, N. J. (2001). Spiritual interventions in healing and wholeness. In T. G. Plante., & A. C. Sherman (Eds.), *Faith and Health: Psychological Perspectives*. New York: The Guildford Press.
- Thoresen, C., Harris, A., & Oman, D. (2001). Spirituality, religion and health: Evidence, issues and concerns. In T. G. Plante., & A. C. Sherman. (Eds.), *Faith and Health: Psychological Perspectives*. New York: The Guildford Press.
- Viljoen, H. J. (1997). Eastern and African perspectives. In W. F. Meyer., C. Moore., & H.G. Viljoen (Eds). *Personology: From Individual to Ecosystem*. Johannesburg: Heinemann.
- Wikipedia (2007). Retrieved 13 March 2007 from http://en.Wikipedia.org/wiki/William_James

Zinnbauer, B. J., Pargament, K. I., Cole, B., Rye, M. S., Butfer, E.M., Belavich, T. G.,

Hipp, K. M., Scott, A. B., & Kadar, J. L. (1997). Religion and spirituality:

Unfuzzifying the fuzzy. *Journal for the Scientific Study of Religion*, 36 (4), 549–564.

Appendix 1: Informed Consent Form



Department of Psychology
Howard College Campus
University of KwaZulu-Natal
Durban
4041

Dear Participant

I am a Masters Counselling Psychology student at the University of KwaZulu-Natal. I am currently doing research which explores the inclusion of religious and/or spiritual issues in Masters Clinical and Counselling psychology training programmes. I am interested in the extent to which these issues do or do not arise in the Masters modules that you teach or co-ordinate, as well as your views on whether or not religious and spiritual issues should be included in the Masters training programmes of which you are part. This is an exploratory study and results shall be considered from a descriptive point of view.

I would be grateful if you could take ten minutes of your time to complete the attached questionnaire. Please be assured that all responses shall remain anonymous and treated in a confidential manner, including your name and the name of the University to which you are attached. Should the results of this study be published, anonymity of participants and the institutions to which they are attached will be maintained. Participation in this study is voluntary, and you may withdraw from this study at any stage.

Should you be interested in receiving a copy of the research findings, please send your details to the contact details provided below and I shall be happy to oblige.

Thank you for your time and cooperation

Yours Sincerely,

Rosalind Lee

Contact Details: Rosalind Lee

Telephone: (031) 260 7423

Facsimile: (031) 260 2618

E-Mail: 204511664@ukzn.ac.za/ rosalindjeanlee@yahoo.co.uk

PTO

Address:

Department of Psychology
Howard College Campus
University of Kwa-Zulu Natal
Durban
4041

Supervisor of project: Ms Cynthia Patel
(031) 260 7423

Having read the previous information, I hereby agree to participate in this study.

Signed _____

BIOGRAPHICAL DETAILS:

Please tick the relevant answer

1) GENDER:

Male	Female
------	--------

2) AGE RANGE:

20-30 Years	
30-40 Years	
40-50 Years	
50-60 Years	
60-70 Years	
70- 80 Years	
80 and above	

3) ETHNIC BACKGROUND (Optional):

Appendix 2: Head of Department form

HEAD OF DEPARTMENT



Department of Psychology

Howard College Campus
University of KwaZulu-Natal
Durban
4041

To The Head of Department

I am a Masters Counselling Psychology student at the University of KwaZulu-Natal. I am currently conducting research which explores the inclusion of religious/and or spiritual issues in clinical and counselling psychology training programmes. I am interested in the extent to which these issues do or do not arise in the modules within the Masters course curriculum. I am also interested in the views of those involved in the Masters Programme regarding the inclusion of these issues.

I would be grateful if permission for conducting the research within your department could be granted so that members of staff are enabled to complete the questionnaire. Please would you be so kind as to provide your signature below, indicating your consent for members of staff to participate in this research project.

Should you have any queries regarding the above, please do not hesitate to contact me at the contact details provided below.

Thank you for your co-operation.

Yours Sincerely,

Rosalind Lee

Contact Details: Rosalind Lee

Tel: (031) 260 7423

Facsimile: (031) 260 2618

E-Mail: 204511664@ukzn.ac.za

I hereby grant permission for members of staff to participate in this research project.

Name _____

Signed _____

Supervisor: Cynthia Patel

Appendix 3: Questionnaire

PERSONAL DETAILS:

A) Please circle your position(s) in the Masters program

- lecturer
- coordinator
- director
- if other, please specify _____

B) Number of years/months lecturing _____

QUESTIONNAIRE:

1) Does your Masters program offer a course dealing primarily with religion/spirituality in counselling?

- i) Yes ii) No

2) If yes, please provide the title of the course and a description of the course content

3) Title and description of the Masters modules in which you are involved.

Please include the course content and circle the most appropriate answer on the right-hand scale provided.

Module 1) _____

1) Religious and spiritual issues are included in this module

i) All the time ii) Often iii) fairly often iv) occasionally v) never

2) It is appropriate to address religious/spiritual issues in this module

i) strongly agree ii) agree iii) Neither iv) disagree v) strongly disagree

3) It is important to address religious/spiritual issues in this module

i) strongly agree ii) agree iii) neither iv) disagree v) strongly disagree

Module 2) _____

- 1) Religious and spiritual issues are included in this module
 - i) All the time ii) Often iii) fairly often iv) occasionally v) never
 - 2) It is appropriate to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) Neither iv) disagree v) strongly disagree
 - 3) It is important to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) neither iv) disagree v) strongly disagree
-

Module 3) _____

- 1) Religious and spiritual issues are included in this module
 - i) All the time ii) Often iii) fairly often iv) occasionally v) never
 - 2) It is appropriate to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) Neither iv) disagree v) strongly disagree
 - 3) It is important to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) neither iv) disagree v) strongly disagree
-

Module 4) _____

- 1) Religious and spiritual issues are included in this module
 - i) All the time ii) Often iii) fairly often iv) occasionally v) never
 - 2) It is appropriate to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) Neither iv) disagree v) strongly disagree
 - 3) It is important to address religious/spiritual issues in this module
 - i) strongly agree ii) agree iii) neither iv) disagree v) strongly disagree
-

4) In the above Masters modules, in which you are involved as lecturer, how many lectures are specifically dedicated to religious/spiritual issues?

i) Four or more ii) three iii) two iv) one v) none

5) In general, religious/ spiritual issues arise in the Masters lectures

i) All the time ii) often iii) fairly often iv) occasionally v) never

6) In *your* opinion, it is important to include religious/spiritual issues in any of the above modules

i) strongly agree ii) agree iii) neither iv) disagree v) strongly disagree

7) Please explain your answer to Question 6

8) How important do you think it is for a Masters training program to prepare Masters students to understand and deal with religious/spiritual issues

in counselling?

i) Very Much ii) Much iii) Somewhat iv) Not Much v) Not at all

9) Staff and students raise the issues of incorporating religious/spiritual into the Masters program

i) All the time ii) often iii) fairly often iv) occasionally v) never

10) In the next five years, is there a possibility of implementing specific Masters modules or lectures dealing with religious and spiritual issues within the psychological context?

i) strong possibility ii) moderate possibility iii) Don't know iv) moderate impossibility v) never

11) In the past five years, has any faculty member that you know of published an article(s) on religion/spiritual issues as they relate to psychology?

i) none ii) one iii) two iv) three v) four or more

12) In the past five years, have there been any Honours, Masters or PHD students that you know of who have researched religious/spiritual issues as related to psychology?

i) four or more ii) three iii) two iv) one v) none

13) If you agree that religious/spiritual issues should be included in Masters psychology training programs, how do you envisage this inclusion?

14) Is there anything you might like to add regarding religious/ spiritual issues in Masters psychology training programs that has not been included in the questionnaire?
