

**Assessing Competencies for Integrating Religion and Spirituality into Counselling
Research Results
BCACC Membership
Brief Summary of Results of a Master's Thesis Survey
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The purpose of this study is to gain insight into how practicing therapists view the place and limits of religion and spirituality in therapeutic work. The main areas that were explored included: counsellor spiritual and religious identity and practice; counsellor beliefs about the importance of spirituality for mental, physical, and community health; and, counsellor beliefs and practices regarding the appropriateness of addressing spirituality and religion within the context of therapy. Other areas that were explored included counsellors' identifying their education and training in this realm, and perceived abilities regarding comfort and competence when working with religious and/or spiritual clientele.

Three hundred and forty-one members of the British Columbia Association of Clinical Counsellors participated in this study. The results showed that the participants believe that spirituality, but not necessarily religion, are important dimensions in their lives and in their work with clients. It is important to note that the majority of the participants were women (72%), were between the ages of 41 to 60 years (61%), while 35% indicated that they had been practicing in the field over 20 years (*versus* 16% for each of the remaining four categories). The majority of the clinical counsellors in this study identified with two out of six epistemology positions; 38% of participants identified with position number four - *there is a transcendent or divine dimension found in all manifestations of nature*, while 34% of participants identified with position number one - *there is a personal God of transcendent existence and power whose purpose will ultimately be worked out in history*. When it came to reporting as spiritual and/or religious, the majority of the participants identified themselves as spiritual (94%) *versus* religious (24%). Of the 289

participants that identified themselves as spiritual, 248 (86%) also reported that they *regularly get in touch with their spirituality*, while 60 (81%) of the 74 participants that identified themselves as religious reported that *participation in organized religion is the primary source of their spirituality*. It is clear that the clinical counsellors in this study support the concept of a positive relationship of spirituality to mental health (91%), physical health (84%), and community health (89%). Comments in this section typically referred to the interrelatedness of the three components.

The majority of participants indicated that, in general, they are feeling slightly more comfortable than competent to work within the context of the spiritual dimensions of clients. Their responses indicated that they support spiritual dialogue and interventions, but not necessarily religious dialogue and interventions with clientele. The outcomes also show a discrepancy between the counsellors' beliefs *versus* their actual behaviour or practice regarding the appropriateness of incorporating religion and spirituality into counselling, as less than half listed the interventions that they are presently using in their work with clients.

It appears that in general, the majority of the participants are either happy with (40%), or undecided or neutral about (30%), the education and training they received in their respective graduate programs regarding the inclusion of religion and spirituality into the counselling process for clients. Two-thirds of the participants also reported being neutral or undecided about (39%) and uninterested in (20%) receiving continuing education on this topic. What is needed is more research on this subject, specifically in the area of determining or understanding why counsellors are not feeling comfortable, confident, or competent regarding **introducing or initiating a conversation on the dimensions of religion and spirituality** in the counselling process.