

The Use of Spirituality in Counselling Practices with Adolescents

by

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BA, University of Waterloo, 2009

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Of the Requirements for the Degree of

MASTERS OF ARTS

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Abstract

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In this thesis, an exploration of the factors that prohibit and/or contribute to counsellors incorporating spiritual conversations in their practice with adolescent (10-15yrs) clients takes place. Through a narrative inquiry method participants from the University of Victoria in a masters level program in Child and Youth Care or Educational Psychology and Leadership Studies describe personal and professional reasons to support the inclusion or exclusion of spirituality in counselling practices with adolescents. Results indicated that practitioners' personal experiences of grappling with spirituality and religion, professional policies outlining if a practitioner can or cannot converse with their client regarding spirituality, and the lack of educational training to incorporate spirituality for soon-to-be practitioners all strongly played into a practitioners' reasoning to refrain from or engage in spiritual conversations with their clients. In order to move forward it is vital that practitioners begin to recognize that children and youth are spiritual beings, that educational programs within the helping professions include spiritual training, that practitioners are supported by supervisors when they feel that the inclusion of spiritual conversations is vital in their practice, and that organizational policies are adapted to allow practitioners the necessary time and space to engage in spiritual conversations with adolescent clients.

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My interest in spirituality and counseling was sparked by a professional encounter that required me to explore how I would include spiritual and religious practices, beliefs, and conversations in my practice with a specific client. During this time I had the generous and readily available support of my supervisor, Dr. Daniel Scott. Dr. Scott, I humbly thank you for your time, effort, and plentiful feedback throughout this process. The continued support, encouragement, and reassurance that the work I set out to do was and is beneficial made each day of reading and writing easier, more meaningful, and continued to motivate me to complete a task I feared was beyond my reach. I am honoured to have worked alongside you and look forward to further opportunities to engage in theory and practice with you.

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Dedication

To those that believe the spiritual is in everyone; children, youth, and adults.

Chapter 1 – Introduction

“We are all here for a reason on a particular path...That’s why I expose my soul to the globe; the world. I’m trying to make it better for these little boys and girls. I’m not just another individual. My spirit is a part of this that’s why I get spiritual. But I get my hymns from Him. So it’s not me, it’s He that’s lyrical. I’m not a miracle, I’m a heaven sent instrument...So I guess I’m one of a kind in a full house. Cause whenever I open my heart, my soul or my mouth. A touch of God rains out.”

~ Never Let Me Down by Kanye West (2007) ~

The Spark That Lit My Interest

The spiritual is no longer confined to or only associated with religious communities and religious beliefs and practices. The ideals of spirituality are appearing in everyday life including the music we listen to like the Kanye West lyrics above, the movies and television shows we watch, the popular press, the activities we engage in such as yoga, the books individuals are reading, the research that is being conducted throughout the Humanities and Social Sciences field, and so forth. In fact, Mahoney (2003) states:

The word ‘spiritual’ is one whose meaning is rapidly changing. To be spiritual once meant that one was ‘religious,’ that is, a member of an organized church with explicit creeds and an identified community of members. But the meaning of the term ‘spirituality’ began to change dramatically in the 20th century, particularly with the spread of Buddhism, Taoism, and the planetary popularization of secular spiritual practices. For decades now, trade books on spirituality and self-help have blended together to dominate lists of best-sellers. Ongoing studies of its changing meanings suggest that spirituality is a much broader and more abstract dimension for contemporary humans, and that it is not closely linked to deism, theism, or particular views about life after death. (p.163)

I initially was interested in the concept of spirituality when I started to recognize the discomfort I felt when attending religious ceremonies. Inside I felt like I still needed to build and maintain a connection with something, someone beyond myself but was uncertain about the process and tools I wanted to use in order to create this connection and uncertain about what I was attempting to connect with. I then became interested in the question of how and if spirituality was included in counselling practices with adolescents because of a crisis that occurred in my own professional practice regarding the interplay of spirituality, professional relationships, and personal boundaries. Research regarding the inclusion or exclusion of spirituality in counselling practices is an emerging trend that has grown rapidly during my process of investigation. The current and relatively new research outcomes of individuals, such as Holden (2012) and Hackney and Cormier (2013), demonstrate the importance of being aware of spiritual beliefs and practices within clinical settings and encourages practitioners to build a bridge between theory and practice.

To help set the stage for the following chapters, I will begin by sharing the narrative of the professional event that sparked my curiosity. I believe it is important for the reader to hear and understand my story in order to be transparent about why I am interested in this research. As well, in presenting the data, participant narratives and my story are woven together throughout the thesis in order to reinforce the bridge that binds together theory and practice regarding spirituality in counselling with adolescent clients.

The starting point.

My interest and desire to challenge and question religion and spirituality began well before my university career. I remember the day I first openly questioned my religious affiliation. I was eleven years old. I skipped school on a Thursday and Friday, as well as Jamat

Khana (an Ismaili Muslim place of gathering and worship), to attend the Esso Golden Ring, a Canada wide ringette tournament. When initially reflecting on this experience I felt as though I should have felt guilty for skipping school and prayers. What I am actually guilty of is being disappointed in my parents for deciding to attend Friday evening prayers versus watching what I believed at the time was the most important game of my ringette career. This significant event in my life is only the first in my working memory but not the only memory I have of challenging my inherited religious affiliation. Coles (1990), Gollnick (2008), and Sinats et al. (2005) also share narratives of young individuals, often before the age of eleven, who begin to sit in and grapple with religious and spiritual beliefs and practices. The narratives shared by these authors are referred to throughout Chapter Two and Chapter Six.

Conscious exploration.

While consciously grappling with my understanding of being a Shia Imami Ismaili Muslim, a follower of His Highness The Aga Khan, and the beliefs and practices that are associated with my inherited religious affiliation, I engaged in a complex multi-layered experience with an adolescent client while practicing as a youth worker. The following is my narrative, as shared during one of the focus group sessions for this research.

I was doing some one-on-one work with a youth in a largely multicultural community and one of the clients that was referred to me was of Central Asian background, had just recently moved from Afghanistan...and was also a part of my own personal religious community. She was an Ismaili Muslim. For a very long time, I have been questioning my religious beliefs, practices and engagement with the community but this young individual and her whole family were quite involved in the community. Attending Prayers gave a sense of belonging and that was where [my client] really felt

comfortable...she immediately recognized that I was part of the same community but that for some reason my parents were still going to Jamat Khana and I wasn't ...she kept asking me questions and very respectfully I would just say that I am busy or I have other commitments...at one point it came out where she wanted to attend prayers with me so this is where I requested support from Dr. Scott. It became a very complicated ethical situation, personally and professionally because of the boundaries of where you are a practitioner and where you are as...the minute we step into Jamat Khana we become spiritual brothers and sisters: and so then what are my roles? I was questioning it. How do I personally engage in those practices with someone to help them to find their own spiritual ways while I am grappling with and sitting in my own discomfort regarding spirituality and religion? Am I doing a disservice to her? Am I doing a disservice to me? Am I supporting her? Where are my ethical boundaries? There was a lot of confusion around what to do, where to go, how to approach the situation, and so forth.

This is the first layer to the story, yet it clearly demonstrates some of the tensions I faced. Boundary lines between my professional and personal practices blurred as my beliefs collided with my client's, an adolescent that assumed we shared similar beliefs and practices.

The second layer to the story included the pre-existing relationship my own parents had with my client's parents. This particular concern may have easily been defused if I opted out of my professional relationship with this client. However, that would mean my client would not have access to the services she required, as I was the only youth worker in that geographical community. Along with this, my client and her family were willing to open up to me, share their concerns with me, and trust me with confidential information because of our religious

community tie. This became apparent at my first meeting where the family divulged almost triple the amount of information to me than the three prior non-Ismaili intake workers.

The last layer of the story incorporated an exploration of how my client and her family viewed the Ismaili community. My client and her family perceived the community as a safe space, whereas I questioned the safety it provided. I was concerned that my client's friends and family from the Ismaili community were the same friends and family that were convincing her to participate in risky activities such as underage drinking, smoking, skipping school, and participating in gang activities.

At this point I started to examine what aspects of spirituality, religion, and the religious community would be beneficial to include in my practice with my client and what aspects may negatively impact my relationship with her and her family. Although I was able to access the support of Dr. Scott, there was limited research I could fall back on to support some of the professional and personal decisions I made while engaging in conversations with my client. This experience sparked my interest in how other counsellors included spirituality in their practice and what factors contributed to or prohibited them from engaging in spiritual conversations with their adolescent clients.

However, before I was able to dive into the research I felt that it was necessary to explore what spirituality and religion meant, what made them similar, and what made them different from one another. I learnt that spirituality and religion took on many different definitions: often the terms are conflated with one another, and that I sat with great discomfort when the two terms were used interchangeably. The next section briefly defines spirituality, religion, and counselling. Counselling is including in this list because of the discomfort participants raised with the term.

Terms and Definitions

Spirituality.

Adams, Hyde and Woolley (2008) describe the different ways spirituality is referred to, which include being “described as pertaining to interior life, religious experience, the search for meaning and purpose, expressions of relatedness, transcendence, immanence, ultimate values, integrity, identity, a connection to something greater, and awareness” (p.11). For the purpose of this research Sheridan’s (2008) definition of spirituality is used as it most closely aligns with my personal understanding and definition of spirituality as well as the definitions participants provided during the study. Sheridan defines spirituality as “the search for meaning, purpose, and connection with self, others, the universe, and ultimate reality, however one understands it, which may or may not be expressed through religious forms or institutions” (p.10). In other words, spirituality entails aspects of meaning making, a connection to something beyond the self, and a sense of belonging.

Religion.

Based on my personal experience and the grappling I have engaged in through my own journey, the following definitions by Barnett et al. (2000) and Vaughan (1991) are used to define religion. Barnett et al. (2000) states, “religion [is] a personal or institutionalized system grounded in a set of beliefs, values, and practices” (as cited in Crisp, 2010, p.4). Vaughan (1991) adds that religion is a “subscription to institutionalized beliefs or doctrines” (as cited in Zinnbauer et al., 1997, p.549).

A participant distinguishes spirituality and religion.

During one of the focus groups I was asked to define spirituality and religion. I provided the definitions above, concerned that they were academic references and not personal references and would therefore be seen as *safe* answers within a subject that has been contested and debated for years. One participant shared her narrative of working with women who have left or are in the process of leaving a violent relationship and how many of these women engaged in a process of change. This participant shared how her experience with these women helped her define spirituality and religion, as she felt that the process of change was a spiritual stage that moved them into the direction of looking at who they wanted to be and how they wanted to rebuild their lives. She shared, *“for me spirituality has, I’ve always thought of it as separate from religion and it just really clearly showed exactly what you just said, this kind of thinking about self and relationship to self and how do I care for that and grow that”*.

A further discussion on how scholars define spirituality, spirituality as an integral aspect of human life, what is known about children’s spirituality, and the differences between religion and spirituality, can be found in Chapter Two – the literature review.

Counselling.

Initially it did not appear critical to define counselling. I assumed there was a universal understanding that counselling was a conversation an individual engaged in that is meaningful, structured, effective, and beneficial for the client. Nevertheless, during one of the focus groups, one participant notes, *“I’m not a counsellor in my role but I have all kinds of therapeutic conversations”*, and then asks if I consider therapeutic conversations regarding spirituality the same as having a spiritual conversation during a counselling session. As we continued our conversation, one participant reminded me and the others that many of the roles child life

specialists, social workers, and child and youth care practitioners engage in all incorporate aspects of counselling, including therapeutic conversations. Strong, Busch, and Couture (2008) state that to them, “therapy is a context where, to paraphrase Austin (1962), clients and therapists do and accomplish things with their words and other ways of communicating” (p.390).

However, the uncertainty of what counselling means and what counselling looks like may be due “to the proliferation of modern-day practitioners who have adopted the counselor label”, which may include camp counsellors, credit counsellors, investment counsellors, or retirement counsellors (Hackney & Cormier, 2013, p.2). Another challenge may be due to the variety of modes “professional counselors” (Hackney & Cormier, 2013, p.2) are trained in including but not limited to play therapy (Axline, 1974; Landreth, 2002), constructive psychotherapy (Mahoney, 2003), collaborative therapy (Anderson & Gehart, 2007; Madsen, 2007), or through cultural practices like Buddhist psychology (Kwee, Gergen & Koshikawa, 2006). According to the American Counseling Association (1997), a professional counsellor is defined as “the application of mental health, psychological, and human development principles through cognitive, affective, behavioral, as well as pathology” (as cited in Hackney & Cormier, 2013, p.2).

For the purpose of this research, I have defined counselling as a process where practitioners engage in conversations with a client in a holistic manner in order to help the individual overcome challenges, eases burdens, help create meaning of a situation, or is an act of lending a compassionate listening ear.

Rationale

Increased interest in spirituality in Western societies is becoming more visible in daily life. For example, walking into a bookstore you will witness the constantly growing religion

section, especially the New Age (Adams et al., 2008) section, or as you walk down the streets of a city you can see the increased number of yoga studios. Is spirituality increasing or are spiritual beliefs and practices being acknowledged more publically? Scholars such as Bibby and Posterski would claim that there is a decrease in affiliations with religion and increased association with spiritual beliefs and practices, especially within the adolescent community (1985, 1988, 1992). Therefore, the amplified attention given to spirituality may imply individuals, particularly adolescents, are asking questions about the meaning of life, what happens after death, and why individuals suffer. Adams et al. (2008) speak to how counsellors can provide affirmation to children through the answers they provide to the questions asked. For example, Adams et al. (2008) states, “if children are unwell, their questions may be related to the bigger questions of life, and may be expressed verbally, or perhaps through a drawing that expresses their fears or concerns” (p. 147). Affirmations can be as simple as a smile but the fundamental principle, and “notion of spirituality is the relationship and connectedness” (p.148) the child feels with their counsellor, caregiver, parent, and so forth.

In order to showcase the need to explore specific factors, beyond the relationship between client and practitioner, that encourage or restrict counsellors from integrating spirituality in counselling practices with adolescents, an overview of what is already known about spirituality and counselling will be highlighted. Carl Jung highlights the importance of spiritual inclusion in counselling. He states, “spirituality is at the heart of the psychotherapeutic process” (as cited by Gollnick, 2008, p.28).

Spirituality and counselling: the foundation.

The inclusion of spirituality in counselling has been explored for many decades and was perhaps initiated in the mid-1980s when the Association for Religious and Value Issues in

Counseling (ARVIC) acknowledged the limitations in its title (Miller, 1999). At an American Counseling Association (ACA) convention in 1993, ARVIC's title was revised to the Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC), providing the ACA with leadership on "spirituality, ethical, and religious values" (Miller, 1999, p.498). At the same time, in the mid-1980s, Statistics Canada's General Social Survey (GSS) started to shed light on Canadian's behaviours in regards to religion (Clark & Schellenber, 2006). In Canada, young adults have shown a decline in religious affiliation over the past twenty years (Lindsay, 2008) while spiritual association has increased (Bibby & Posterski, 1985, 1988, 1992; Pearce & Smith, 2008; Roehikepartain, Benson, Scales, Kimball & Ebstye King, 2008). A majority of Canadians (53%) report participating in religious self practices that include "prayer, meditation, worship and reading of sacred texts" at least monthly (Clark & Schellenber, 2006, p.3). More recently, according to Breton (2012), "In Canada, the percentage of survey respondents who say they have no religion has increased from less than 1 per cent in 1961 to 12 per cent in 1991 and to 19 per cent in 2004" (p.73). He continues stating that "about 75 per cent of Canadians claim that spirituality is important to them" (p.73). The continuous research conducted by Bibby and Posterski (1985, 1988, 1992), Bibby (2001) and Bibby, Russell and Rolheiser (2009) explores the religious affiliations of youth aged fifteen to twenty-four, which determines that Canada's youth are increasingly associated with spirituality while religious participation is decreasing, and helps build a bridge between readily accessible statistics provided on religious memberships for adults and those of Canadian youth.

The gap.

The trend to incorporate components of spirituality in counselling has been available in published literature since the mid-1980s (Engels, 2001; Helminiak, 2001; Jankowski, 2002;

Miller, 1999; Myers & Truluck, 1998; Steen, Engels, & Thweatt III, 2006). Coles (1990), Gollnick (2008), and Sinats et al. (2005) share narratives of children and adolescents who are engaging with and questioning spiritual beliefs and practices in their daily lives and during therapeutic conversations with counsellors. Yet, there is a gap in the literature that expresses what counsellors feel enable or prevent the inclusion of spirituality in their practice and *how* they include spirituality in their practice with adolescent clients between the ages of ten and fifteen. The need for further studies that highlight the importance of including spirituality in practice and what factors contribute to or prohibit a counsellor from using spirituality in practice is supported by Boynton (2011) who expresses that there is “considerable room for expansion in research on children’s spirituality” (p.109) and Sheridan (2008) who states that “there has been little investigation of what practitioners actually do with their clients and what influences their practice behaviors” (p.5).

Researchers are, however, slowly starting to fill this gap by addressing the *how to* question. For example, Holden (2012) recently conducted her MA research on how social workers include spirituality in their practice in Australia. Hackney and Cormier (2013) include multiple aspects of spirituality within counselling in their text, which include spiritual and religious assessment, crisis, goal setting, intervention, and existential mental states that may be conflated with or seen differently than spiritual beliefs, practices, and experiences. Others, such as Boynton (2011), Breton (2012), Crisp (2010), and Jankowski (2002) speak to the need to include spirituality in practice with an attempt to explore how spirituality is included in practice. The works of these scholars will be referenced throughout the following chapters.

Research Question

Primary research question.

The question that is posed for this research is: What factors contribute to and/or prohibit counsellors from engaging in conversations and/or activities in regards to spirituality with adolescent (10-15 years of age) clients?

During the research process two secondary questions emerged that influenced how participants' narratives were understood and interpreted.

Secondary research questions.

- (1) How do participants define spirituality?
- (2) How does the personal experiences of participants impact the factors they believe contribute to or prohibit the inclusion of spirituality in practice?

A draft of the questions I prepared for the focus group conversations can be found in Appendix IV.

Thesis Framework

In the first chapter I have outlined where my interest in incorporating spirituality in counselling practices stemmed from and briefly reviewed definitions of spirituality, religion, and counselling. This chapter also set the stage for the coming chapters by describing why this research study is needed and the question(s) this research attempts to address. Chapter Two is a literature review that further explores the concepts of spirituality and counselling. The third chapter addresses the methodology and methods of this research study, including my theoretical positioning within narrative inquiry and the use of focus group data collection or analysis. Chapters Four and Five present the results of the study, the prohibiting factors and contributing

factors of including spirituality in practice, respectively. The final chapter, Chapter Six is the discussion that focuses on the overarching factor of personal experience and reflection and the impact it plays on a counsellors' willingness or unwillingness to incorporate spirituality in their practice. I end my thesis with a few questions practitioners may ask themselves during practice and a description of how this research may influence future practice.

Chapter 2 – Literature Review

This chapter reviews the literature I was able to identify and locate that relates to spirituality and counselling. The reviewed literature, from the past two decades, is intended to showcase the growth in knowledge regarding spirituality and counselling. In order to locate literature that would be most relevant to this research, I used Summon, the search engine utilized by the University of Victoria's library, ERIC, PsychoINFO, and Social Work Abstract databases. The search terms initially used, individually and collectively in a variety of combinations included: *children, youth, spirituality, religion, counselling, and therapeutic conversations*.

The bibliographies of relevant articles and books found were then utilized to find other sources of literature that would be relevant and vital to the research study. Often times the references were located on Summon, however, a few were accessed through a Google search. My supervisor Dr. Scott and committee member Dr. Hoskins provided other sources of literature that I did not come across during my search.

Understanding Spirituality

Prior to exploring the relationship between spirituality and counselling it is important to explore spirituality beyond the brief definition in Chapter One, distinguish between spirituality and religion, why spirituality is an integral part of human life according to some, and illustrate what is already known about children's spirituality.

Spirituality.

The difficulty in defining spirituality is evident across the literature. Some researchers, such as Bruce, Shields, and Molzahn (2011) and Gollnick (2008), state that definitions of spirituality are incomplete, unsatisfactory, and that there is a lack of consensus in what

spirituality means. Gollnick (2008) shares views of two researchers, Wade Roof and William Miller, who agree that defining spirituality can be challenging, yet both researchers feel as though the definitions available are significant and sufficient to utilize in their own practices, as researchers and within clinical settings.

The confusion around defining spirituality may be the effects of spirituality shifting from an institutional practice of religion to a secular practice (Hill et al., 2000). In order to gain a deeper understanding of the word, *spirituality*, an exploration of the word's origin will be my starting point. According to Walter Principe (1983), spirituality originates from the root word *spirit*, which “refers to the spirit of God, standing in contrast to whatever opposes God” (as cited in Gollnick, 2008, p.25). Thus, a direct relationship with God, what is now discerned more often in an institutional practice, is perhaps one of the factors preventing an articulate definition for spirituality to be agreed upon. It is noted that in the twelfth century, a new meaning for spirituality was acquired that stood “in contrast to the body” (Gollnick, 2008, p.25).

An exploration of definitions that may be considered ‘new age spirituality’ (Roof, 1998) include Nesbitt’s belief that spiritual development encompasses aesthetics, emotion, “inwardness; a sense of purpose and meaning, as well as ideals and principles” (p.126-127). Engebreston (2004) pinpoints five main concepts that help define spirituality, which are “intrinsic to the human experience” and include “meaning, identity, connectedness, transformation and transcendence” (as cited in Crisp, 2010, p.7). Another definition that is offered is spirituality as a relationship or connection with the Ultimate, perhaps God, and provides an individual with a sense of meaning, a life mission, or a purpose (Hodge, 2001). Adding to the ideals included in Hodge’s definition, in Sheridan’s (2008) study, “spirituality was defined as ‘the search for meaning, purpose, and connection with self, others, the universe, and

ultimate reality, however one understands it, which may or may not be expressed through religious forms or institutions’” (p.10). Although defining spirituality may be a challenge as expressed by researchers, many definitions are available that can be considered sufficient for the research intended here. Thus, for the purpose of this study, Sheridan’s (2008) definition will be referenced when referring to the term *spirituality*.

Postmodern spirituality.

Jankowski (2002) presents two unique constructs of spirituality, resilient spirituality and postmodern spirituality, which are important to explore in order to gain a further understanding of the multiple lenses utilized when researching notions of spirituality. According to Walsh (1998) “experience[s] of resilience of the ability to overcome and succeed during times of distress and challenge” through the loyalty to one’s faith and the greater beliefs and values of a group is known as resilient spirituality (as cited in Jankowski, 2002, p.70). Postmodern spirituality differs in that subjective experiences are accepted as a way to understand oneself, one’s relationships, and one’s world (Jankowski, 2002). Jankowski (2002), Miller (1998) and Roof (1998), also explore how postmodern spirituality has shifted from obtaining meaning from doctrines as strictly what is written to gaining understanding about oneself, others, and the world through subjective experiences and valuing emotional experiences versus only cognitive processes of knowing. Labovie-Vief (1994) suggests that cognitive and emotional ways of knowing should be integrated with one another as opposed to solely relying on cognitive or emotional ways of understanding oneself, one’s relationships, and one’s world (as cited in Jankowski, 2002).

Differentiating between religion and spirituality.

The difficulty in defining spirituality is no different than defining religion (Zinnbauer et al., 1997). It is noted that “spirituality and religion are complex phenomena, multidimensional in nature, and any single definition is likely to reflect a limited perspective or interest” (Hill et al., 2000, p.52) and that “both religion and spirituality are ambiguous and both can be manifested in healthy as well as unhealthy ways” (Gollnick, 2008, p.29). An array of definitions including “religion [as] a personal or institutionalized system grounded in a set of beliefs, values and practices” (Barnett et al., 2000, as cited in Crisp, 2010, p.4), to a “subscription to institutionalized beliefs or doctrines” (Vaughan, 1991, as cited in Zinnbauer et al., 1997, p.549), all incorporate a predetermined set of beliefs, values, and practices that are typically based on a doctrine.

Gollnick (2008) and Zinnbauer et al. (1997) go beyond the general definitions provided for religion and distinguish between functional and substantive definitions of religion, stating that the functional approach helps individuals deal with fundamental problems. For example, coping with or preparing for death, injustices, feelings of loneliness, and anxiety through practiced beliefs, ritual practices, and experiences can be viewed as a functional approach to religion. On the other hand, “The substantive approach focuses on the beliefs, emotions, practices, and relationships of individuals in relation to a higher power or divine being” (Zinnbauer et al., 1997, p.550). Regarding Gollnick’s and Zinnbauer et al.’s definitions of functional and substantive definitions of religion, questioning if either or both functional and substantive beliefs incorporate aspects of what Sheridan considers spirituality could allow the division between religion and spirituality to be seen in a new light.

Caputo (2006) claims that religion is grounded in the belief of God's existence and vividly describes how a belief in God can influence an individual's actions. He says:

A religious person is someone who understands that imperative as a command of God, a God who sees to it that in the end doing your duty and happiness, which in and of themselves run on separate tracks, end up at the same station. What then is religion? Religion is ethics; it is doing your duty where the voice of duty of conscience is taken as the voice of God. (p.32)

Caputo (2006) continues to question the harm that may arise when an individual moves past the ethics of religion and follows their subjective beliefs. He notes that when an individual "abandon[s] the rational conduct of life, substitute magical incantations for dealing with reality, see spirits that no one else can see, and ultimately fall into divisive, destructive, and violent conflicts with other people with differing dogmatic beliefs and...guiding spirits" (p.32) that they have surpassed the functional, ethical, aspects of religion and moved into the harmful subjective components of religion.

Although Coles (1990) does not explicitly define religion, the discussions Coles has with the many youth in his book presents many ideals that can be related to religion, within the definitions expressed above. Some acts of religion described by the youth in Coles book include attending weekly church services and classes, continuous reminders of the importance of surrendering to Allah, and the righteousness, following the law and being a "good person" (Joseph, 12 years), of the Jewish community (Coles, 1990, p.253), all display the rules and ethics that define each individuals religious practices.

Zinnbauer et al. (1997) describe how exploring ideals of religion traditionally included institutional beliefs and activities as well as spirituality. In fact, it is stated that secularism within

the current century is perhaps the stimulant for distinguishing spirituality from religiousness because of the limitations religious institutions place on the value of sacred personal experiences (Turner, Lukoff, Barnhouse & Lu, 1995, as cited in Zinnbauer et al., 1997). Through the exploration of a handful of definitions religion and spirituality have within the social and human development field, it is clear that the distinction between religion and spirituality is becoming more wide spread. Gollnick (2008) speaks to the differentiating of religion and spirituality and notes that the “definitions of religiousness have become narrower and less inclusive, now encompassing the institutional, theological, and ritual aspects of religion, while spirituality has recently acquired a specific positive connotation of the personal experience of transcendence” (p.26).

Consequently, the interchanging or simultaneous usages of the terms spirituality and religion is still common in current research and everyday language, yet, the two terms present unique ideals and can be looked at as distinct terms, belief systems, values, and practices. Hill et al. (2000) sums up the relatively new distinction between spirituality and religion by stating, “Not all current conceptions of spirituality are linked to religion, though the use of the term apart from religion has a surprisingly short history” (p.57). King (2009) adds:

When people separate religion and spirituality sharply from each other or even oppose them, religion is then often primarily identified with external, institutional aspects, while spirituality is reduced to something internal, a personal inwardness that has little bearing on social and institutional life. (p.2)

Spirituality as an integral aspect of human life.

Spirituality is commonly thought of as a universal human phenomenon (Bruce et al., 2011). Hill et al. (2000), explain how spirituality may be integral to ones development and may

be cultivated over one's lifespan. Hay and Nye (1998) argue "that children's spirituality is rooted in a universal human awareness; that it is 'really there' and not just a culturally constructed illusion" (p.4). Others, (Boynton, 2001; Hill et al., 2000; Koenig, 2009; Longo & Peterson, 2002) speak to the connection between individual development and wellbeing, including mental health and spirituality. Further evidence is provided that concludes that holistic wellbeing, which is inclusive of spirituality, provides individuals with coping and resiliency skills and that spirituality helps reduce the symptoms of delinquent behaviors, such as drug and alcohol abuse, and psychopathology (Boynton, 2011; Hill et al., 2000). Claims that spirituality becomes part of an individual's life when an individual is coping with loss, serious illness, or in the search for meaning of death, even if spiritual thoughts and actions may not have been present throughout one's life, are also seen within the literature (Bruce et al., 2011; Gollnick, 2008; Hill et al., 2000).

Boynton (2011) presents the view that humans are "psycho-spiritual in nature" (p.111). Thus in order for people to make sense of their lives and to find meaning, direction, and purpose in their lives, individuals incorporate psychological and spiritual perspectives when developing their ever-changing worldviews (Boynton, 2011). A multidimensional construct of spirituality and the integration of spirituality in one's life, in order to gain the strength to cope with life challenges, understand the lifecycle, and to abstain from 'negative social habits' (His Highness The Aga Khan) such as drugs and alcohol, can be looked at through three orientations of spirituality as described by Spilka (as cited in Hill et al., 2000). The first, "*God-oriented* spirituality [is] where thought and practice are premised in theologies, either broadly or narrowly conceived" and perhaps provides an individual with a sense of guidance from a source higher than themselves. The second, "*world-oriented* spirituality stressing one's relationship with ecology or nature", which may soothe a person through the sense of grounding and

understanding that something is bigger and more powerful than the human being. And lastly, the third orientation, “a *humanistic* (or *people-oriented*) spirituality stressing human achievement or potential” expresses the strength within humans and the importance of interpersonal connections (Spilka, 1993, as cited in Hill et al., 2000, p.57).

Another lens to multidimensional understandings of spiritual wellbeing comes from Fisher’s (2009) four-domain model. Fisher includes dimensions of the personal, communal, environmental, and transcendent within the framework of spiritual wellbeing. The major difference between Spilka and Fisher’s work is that Fisher divides what Spilka titles *humanistic* spirituality. Fisher separates one’s relationship with the self and one’s relationship with the other. His division of the self and others may be a more effective approach to understanding a child’s perception of his or her own spiritual beliefs and values because children are known to be more egotistic than older individuals. This makes it important to recognize how the child views their own spirituality versus how others might see and interpret the child’s spirituality.

The above literature represents studies that particularly pertain to the importance of spirituality within the lives of adult individuals. Mabe and Josephson (2004) share how spirituality is vital in the lives of children, specifically in helping “children respond to and evaluate life events” and to reach developmental milestones (as cited in Boynton, 2011, p.111-112).

What we know about children’s spirituality.

Researching children’s and adolescent spirituality appears to be an emerging trend, yet much of the primary research studies are “qualitative in nature and grounded in child development theory” (Boynton, 2011, p.110). Boynton (2011) continues to state, “Theory development requires both quantitative and qualitative approaches, which provide nomothetic

and idiographic descriptions; however, in the human sciences qualitative research is often the origin of theory development” (p.110). Qualitative measures used to address children’s spirituality are often adapted from studies directed for adults (Boynton, 2011; Fisher, 2009). The lack of measures developed for children and minimal quantitative and *qualitative* research accounts for a large gap in the understanding of children’s spirituality (Boynton, 2011). Nevertheless, an overview of the research currently available on children’s spirituality will help highlight the value of this particular study. It is important to note that a large amount of what is known about children’s spirituality is intertwined with what is known about children and adolescent relationships with religion, once again emphasizing the struggle to differentiate between religion and spirituality.

Bibby and Posterski, two Canadian researchers, have conducted a plethora of research on Canadian youths’ (fifteen to twenty-four years of age) affiliation with religion and spirituality. According to Bibby and Posterski (1992), spirituality is viewed as a relationship and exploration concerning the “ultimate questions about life’s origins and purpose, suffering, and life after death” (Bibby, 2001, p.119). Bibby (2009) notes that there has been a slight drop in youths levels of inquiry and reflecting on life’s purpose, reasons for suffering, and what happens after death in comparison to Bibby and Posterski’s (1985) earlier study. The reasons for this decline are varied. Bibby (2009) points out that one of the potential explanations may be the limited time individuals have to think nowadays. Bibby states, “The percentage who say they seldom or never ‘sit and think’ has doubled from 13% in 1984 to 26% today” (2009, p.173). The correlation between the significantly reduced time to “sit and think” and the decreased Canadian youth affiliation with religion may be due to the increased pace of life and factors such as

friendships, freedom, being loved, and having a comfortable life, all ranking as significantly more important than religious involvement.

Much of the research Bibby and Posterski provide is based on the religious beliefs and affiliations of Canadian youth. Bibby (2001) clearly states that “Today’s Millennials are also expressing explicit spiritual interests and needs...Further, 55% of females and 40% of males say that they personally have spiritual needs” (p.121). Authors such as Fisher (2009), Benson, Roehlkepartain, and Rude (2003), and Holder, Coleman and Wallace (2010), who span beyond the Canadian borders, further explore the ideas of children’s spirituality. Again, it must be noted that the above researchers and many others continue to struggle with deciphering religion and spirituality from one another, therefore, making it difficult to fully separate children’s spirituality from children’s religious relationships.

According to the National Study of Youth and Religion, youth between the ages of thirteen and seventeen during wave one of the study and sixteen to twenty-one during the second wave reported on different aspects of their religious and spiritual beliefs and practices. When comparing the results Denton, Pearce, and Smith (2008) present to those by Bibby and Posterski, it appears that both Canadian and American youth report lower levels of private prayers and private scripture readings over the years, specifically from 2001 to 2008. Although the decline may be significantly low, for example two to eight percent of adolescents changed their views on the importance of religious faith over the three-year period, the trend away from religious practices is visible. Results from Denton et al.’s (2008) study also showed a decline in the importance of religious faith for adolescents, further reporting that over the three-year period, between wave one and two, a decline in closeness to God and increased identification as spiritual but not religious was observed. Denton et al. (2008) provide two notions to help understand the

decrease in religiousness of adolescents. The first being an “intentional distancing” because of a “*dissatisfaction with or a negative evaluation of religion*” and the other being an “*intellectual skepticism* about religion” (p.26, italics in original). Further explanations as to why there are lower levels of religiousness in adolescents points towards a life event that deters a youth from religious affiliations, as a youth gains religious autonomy they start to drop out of religious practices, or because a youth feels too busy to participate in religious activities. It is important to highlight that although thirty percent of respondents said a life event or change in life situation dissuaded them from religious participation, it is also noted that twenty-one percent of respondents said they became more religious because of a transition or event in their life. In conclusion, Bibby and Posterski, and Denton et al. have noticed “slight declines in the levels of both private and public religious practice and religious salience” for youth fifteen years and older (Denton et al., 2008, p.31).

As noted earlier, religious affiliation has decreased while spiritual association has increased. According to a report by Roehlkepartain, Benson, Scales, Kimball, and Ebstyne King (2008) in collaboration with the Search Institute, a survey of youth between the years of twelve and twenty-five in seventeen countries reported that “More than one-third [of youth] would say they are ‘very or pretty spiritual, and another one-third of those surveyed see themselves as ‘sort of spiritual’” (p.18). Over half of the youth surveyed share that “their spirituality has increased over the past two or three years” (p.20), with seven out of ten youth indicating that they have a higher understanding and sense of meaning or purpose (Roehlkepartain et al., 2008). Perhaps the disparity between the United States, Canada, and Australia, the top three countries explored, is due to the definition of spirituality provided by the researchers and the conflation of religious and spiritual language. The ways in which the survey and the youth defined spirituality is

extraordinarily similar to Bibby and Posterski's definition, that of a sense of meaning or purpose and emotionally feeling close to God or a higher power. The challenge to differentiate between religion and spirituality may not be the only struggle. Another may be in an individuals understanding and definition of themselves as religious, spiritual, both or neither. Roehlkepartain et al. (2008) state that thirty-four percent of the total population surveyed in their study claim to be spiritual and religious, while twenty-three percent say they are spiritual but not religious and fourteen percent say they are religious but not spiritual. The others (29%) claim that they are neither spiritual nor religious or that they are unsure. Most importantly, the study presents ways that three-fourths of the youth claim makes it easier for them to be spiritual including "being outside or in nature, listening to music, serving others, and being alone", and having the support of family and friends (p.30). Although Roehlkepartain et al. (2008) and Bibby and Posterski claim that being spiritual is important to many youth and address activities that make it easier for adolescents to be spiritual, the study leaves out concepts of spiritual development.

Children's spiritual development.

Benson et al. (2003) address how spiritual development during childhood and adolescence is an important dimension of human development. According to the definition of spiritual development the authors provide, "Spiritual development is the process of growing the intrinsic human capacity for self-transcendence" (p.205), and this intrinsic motivation "gives rise to such phenomena as seeking meaning and purpose, the pursuit of the sacred, and embedding one's identity within a tradition, community, or stream of thought" (p.208). It is noted that there are several sources for spirituality to emerge as an "intrinsic human capacity" (p.208). The first construct being that "spirituality and religiosity have biological or physiological roots" and the

other that spirituality has “emerged and become part of human experience” and “remains a salient dimension of life across time and across culture” (p.208). Benson et al. go on to state that spiritual development may be a powerful resource for holistic development within the first two decades of an individual’s life. They comment on the limitation of the claim that lacks research support to date and point out that some scholars such as Helminiak (1987) and Irwin (2002) argue that spiritual development surfaces in adolescence or early adulthood (as cited in Benson et al., 2003). Furthermore, Benson et al. (2003) make clear links between spiritual development and human development, yet provide little to no understanding as to how care givers and others can support children and adolescents through the process of spiritual development.

Gollnick’s (2008) overview of the foundation for spirituality in childhood illustrates how many scholars and theorists such as Piaget, Erikson, and Kohlberg have explored children’s relationship with spirituality in terms of cognitive and psychological development. While Ken Wilber does not believe children have religious or spiritual experiences, others such as Sir Alister Hardy, Edward Robinson, Thomas Armstrong, Edward Hoffman, and Michael Piechowski all share personal and/or research based experiences of adult participants reflecting back on spiritual experiences in their childhood, largely between the ages of six and twelve years. The bias in the shared stories by adult participants may be high because of the time lapse between the experience and the sharing of the narrative, as noted by Gollnick (2008) and the scholars referenced in Gollnick’s work. Due to the lack of language at the age of the experiences shared by research participants, the recollections of participants childhood spiritual experiences that have left vivid images and memories account for a large portion of the understanding we have on children’s spiritual experiences. One recollection of a women’s eleven-year-old self that

is reported in Robinson's research stands out. Robinson quotes a forty-year-old female participant:

When I was about eleven years old I spent part of a summer holiday in the Wye Valley. Waking up very early one bright morning, before any of the household was about, I left my bed and went to kneel on the window-seat, to look out over the curve which the river took just below the house. The trees between the house and the river – I was on a level with their topmost branches – were either poplars or silver birch, and green fields stretched away beyond the river to the far distance. The morning sunlight shimmered on the leaves of the trees and on the rippling surface of the river. The scene was very beautiful, and quite suddenly I felt myself on the verge of a great revelation. It was as if I had stumbled unwittingly on a place where I was not expected, and was about to be initiated into some wonderful mystery, something of indescribable significance. Then, just as suddenly, the feeling faded. But for the brief seconds while it lasted I had known that in some strange way I, the essential "me", was a part of the trees, of the sunshine, and the river, that we all belonged to some great unity. I was left filled with exhilaration and exultation of spirit. This is one of the most memorable experiences of my life, of a quite different quality and greater intensity than the sudden lift of the spirit one may often feel when confronted with beauty in Nature. (p.37)

This individual's account of her experience, along with many others shared, can perhaps fit under religious and/or spiritual categories, especially as a revelation, perhaps from a higher power, can be associated with religious beliefs, while a connection with nature may be seen as more spiritual. The Girls' Diary Project by Sinats et al. (2005) further conveys the spiritual questionings and experiences of young girls using the language each participant had at the time

of entry. One entry that stands out from Part One of *Writing ourselves into being: writing as spiritual self-care for adolescent girls* is written by a fourteen year old who clearly expresses her spiritual questioning and understandings. She states:

I need the answers to the question, but I found one. We look after our souls as we do our children, and we don't worry extensively over our offspring, because we know they can take care of themselves, so, our soul, like our children will take care of themselves. We don't need to worry. (p.22)

Although these recollections of early experiences and diary entries may contribute to the conflation of religion and spirituality, scholars such as Robinson and Sinats et al. help create clear pictures of spiritual experiences children encounter. These experiences may stimulate spiritual questioning and engagement immediately or later in life for these individuals.

Fisher (2009) presents a critique on the available studies that provide quantitative measures regarding spirituality and wellbeing. Though many of Fisher's remarks are valuable in understanding and reviewing current literature on children's spirituality, it is critical to point out that Fisher's publication, *Getting the balance: assessing spirituality and well-being among children and youth* is to inform pastoral care. Consequently, the conflation of religion and spirituality is highly likely and perhaps creates a bias when reviewing the works of others who report on religion and spirituality or solely on religion or spirituality. Moberg (as cited in Fisher, 2009) stresses the complicated challenge in investigating spirituality "because no measure can be perfect, and any measure simply reflects the phenomenon or its consequences, because it cannot be measured directly" (p.274). In Fisher's review of the available literature, he claims that a "considerable effort has been expended in studying children's quality of life and well-being, but almost all of it lacks any mention, let alone serious study of the [spiritual well-being]" (p.278).

He continues to state that his article hopes to provide other scholars easy access to literature that directly relates to studies of interest and acknowledges two authors, Huebner and Ziegler, who address the relationship children have with spirituality. Yet Fisher critiques their works, stating that Huebner does not include transcendental spiritual wellbeing and Ziegler features only select items that relate to personal and communal spiritual wellbeing in their studies. Beyond the thirty literature pieces Fisher reports on, one potentially vital piece of literature appeared following Fisher's review, that of Holder, Coleman, and Wallace.

According to Holder, Coleman, and Wallace (2010), temperament is more strongly related to children's happiness in comparison to other demographic variables; however, spirituality has shown to be a substantial predictor of children's happiness when removing the temperament variable. Spirituality, as expressed in Holder et al.'s (2010) paper, "refers to an inner belief system that a person relies on for strength and comfort" (p.132) and that "spirituality may provide meaning, coherence, and purpose in one's life" (p.133). Before further exploring the results the authors obtained during their study, it is important to note that this is the only piece of literature found that provides an understanding of children's (ages eight to twelve) spirituality for individuals under the age of fifteen. The age of participants in the study perhaps compromises the results due to elimination of questions from the original assessments used that may be seen as inappropriate for children and the modification of language in the Brief Multidimensional Measurement of Religiousness/Spirituality (BMMSS) that was utilized. The results indicate that "spirituality and religious practice can be empirically separated" (p.145), contradicting the beliefs of Fisher and Moberg as expressed above, and it appears that spirituality contributes to children's happiness, in particular the personal and communal domains of spirituality, while religion is weakly linked to children's happiness (Holder et al., 2008). The

personal domain of spirituality includes the values and meaning an individual has regarding his or her own life while the communal domain is defined as the “quality and depth of inter-personal relationship” within one’s life (Holder et al., 2008, p.144). Therefore, it appears as though spirituality, as expressed through a sense of meaning, purpose, and belonging, is critical for children’s happiness.

The understandings seen through the authors mentioned above provide direct implication to the works of future scholars and caregivers. The first is in highlighting that having a connection with God or a higher power, recognizing one’s own life purpose, understanding one’s personal meaning, and having a sense of belonging, is critical for an adolescents spiritual wellbeing. Further, by acknowledging that “spirituality enhances happiness by increasing personal meaning” (Holder et al., 2010, p.147) practitioners may be required to introduce or provide space for adolescent clients to explore spirituality within counselling sessions more so now then ever before. This next section will shed light on how children’s spirituality can be explored, expressed, and appreciated within a counselling atmosphere, especially as the “current professional literature suggests that many clients believe spirituality is an important component of human development, integrally connected to personal growth” (Steen et al., 2006, p.109).

Fusing Together Spirituality and Counselling

In the literature reviewed up to this point, it is clearly visible that spirituality plays a large role in many peoples lives. The inclusion of educating professional students on the role and importance of spirituality in a variety of human development fields, especially within the social work curriculum, is largely noted. Gray (2008) mentions that many writers in the field discuss the lack of training received by social workers in order to address spiritual issues. One of the

outcomes of Holden's (2012) study was that practitioners fear addressing spirituality in practice because of a lack of training. She states:

One reference I recall being made [in a course] was the importance of these topics [of religion and spirituality] in some people's lives as they grapple with life crises and then attempt to make meaning of the crises. The point being made by the lecturer was not to ignore religion and spirituality in our client's lives. However, there was no further instruction or discussion around how social workers [and other counselling practitioners] should manage these topics or implement them within an ethical and sensitive framework during practice. (p.66)

Tracey (2003) adds, "public health, social work and psychology are now facing a crisis situation, where secular-trained therapists are no longer sure how to respond to this new and urgent cry for spiritual meaning" (as cited in Holden, 2012, p.68). Perhaps the debate to teach about spirituality within social work and other human development fields, including CYC, is now critical as we witness decreased religious affiliations and increased spiritual practices in individuals across North America. In this next section, an exploration of how spirituality is currently being included within counselling practices will be addressed.

Current inclusion of spirituality in counselling.

Within the social work field, and presumably other human services, the goal of counselling is to empower "*individuals* through enhancing their capacity for self-determination and autonomy" (Gray, 2008, p.188). Gray goes on to further express how spirituality within social work is concerned with an individuals desire to make meaning and understand one's purpose. Gray, like many others (Boynton, 2011; Sheridan, 2008; Steen et al., 2006), simply highlights the increase in literature that continues to emphasize the need for social workers, and

other care practitioners, to be aware of spirituality within practice, yet scholars provide little evidence of *how* spirituality is being included in practice such as the tools and techniques (assessments, specific questions used, engagement in spiritual/religious practices like breathing, grounding and calming practices, etc.) practitioners are using in their daily practices with adolescent clients.

Inclusion factors.

One of the first steps of bringing together spirituality and counselling is a counsellor's need to be aware of their own spiritual views, personally and within the counselling process, and the counsellor's own motivation for utilizing aspects of spirituality within a therapeutic relationship (Miller, 1999). Furthermore, it is critical for counsellors to recognize that an aspect of holistic wellness includes spiritual growth. Steen et al. (2006) state that "counselors more often neglect religious and spiritual dimensions out of ignorance", therefore perhaps missing references to spiritual or religious constructs (p.114). Derezotes' (1995) study is commented on by Sheridan (2008), where Sheridan states that over 92% of practitioners surveyed in Utah and Idaho address "spiritual issues in their work with clients and over 55% believed that working with a client's spirituality was a necessary part of social work practice" yet the "majority of respondents reported receiving little or no training on religion and spirituality" (p.8). A limitation of this study is seen in the sampling group. While random sampling was used, the study was based on self-reports through a mail study that yielded a low response rate (43%) according to the author. The target population may also be a bias as counsellors in the Utah and Idaho area were targeted. The Utah and Idaho area is known to have a large Catholic and Mormon population, perhaps reducing the generalizability of the study to communities that may

have a higher prevalence of other religious groups or communities with lower religious participation.

Gilbert found that practitioners go beyond the need to be self-aware, and address spirituality with clients through assessments and the utilization of clergy and other spiritual leaders as resources for clients when needed (as cited in Sheridan, 2008). Sheridan's study results show an abundance of ways in which practitioners use spiritual intervention with the top ten being: to help clients reflect on death and suffering, help clients see how spiritual supports are beneficial, gathering spiritual backgrounds of clients, help clients see how spiritual beliefs are beneficial, referring clients to spiritual counsellors, the use of spiritual language or concepts, discussing the role of spirituality in relation to others, recommending participation in spiritual programs, helping to clarify clients spiritual values, and helping "clients consider [the] spiritual meaning of [a] current life situation" (Table 1, p.15). Limitations in the survey conducted for Sheridan's (2008) research includes the conflation of religion and spirituality and the challenge with distinctly deciphering between and separating the practices and beliefs associated with the two terms. Another limitation is the low response levels and the over-representation of professionals that are "more likely to include a focus on religion and spirituality in their practice" (p.20). Including religion and spirituality in practice is seen as culturally sensitive and less harmful during the treatment process, although the inclusion of religion and spirituality may also lead to "workers imposing their values, beliefs, and practices onto clients; thus violating clients' right to self-determination" (Sheridan, 2008, p.21-22). Holden (2012) also found that organizational settings influences practitioner's ability and desire to include spirituality in practice. She states:

The lack of time to include spirituality in practice was one factor raised [in her research]. Another factor was the demand that some agencies place on workers to work ‘*within a certain way.*’ Explanations were given of how the orientation process in some agencies is very strong and how when workers attempt to integrate spiritual perspectives in practice these ideologies ‘*almost get squished out of you.*’ (p.71)

Practitioners are therefore constantly walking on eggshells when including religion and spirituality in practice. Sheridan (2008) summarizes that research now needs to explore *how* spirituality can be integrated into practice ethically, sensitively, and effectively versus *whether* spirituality should be integrated into practice.

Jankowski (2002) suggests four approaches that use constructs of spirituality within counselling. Before exploring these four approaches, it is important to keep in mind that Jankowski’s suggestions are based on a study with adult participants, therefore, the general approaches used for counselling with children and youth should be used with caution and adaptations. The first approach mentioned is “referred to in the literature as a ‘not-knowing’ stance” (p.72), which allows for a practitioners work to be guided through curiosity and “guards the counselor from imposing his or her own spirituality on the client” (p.73). Through the use of questions such as “Has there ever been a time when you found your spirituality to be a source of strength or found it to make a difference?” (p.73), counsellors are able to add to his or her understanding of their clients coping strategies, beliefs, and values, while allowing clients the opportunity to identify personal strategies to promote change. Yet, if a counsellor does not utilize characteristics of “humility, tentativeness, and hesitancy” in the questions asked (p.73), the not-knowing stance will lack effectiveness.

The second approach is the counsellor's understanding of his or her own beliefs and practice and how they may differ from their clients. Jankowski (2002) goes beyond pointing out the need for counsellors to recognize their own beliefs and practices by informing counsellors that creating a space for discussion and "Finding commonalities within the human experience" (Aponte, 1998, as cited in Jankowski, 2002, p.73), will help foster a caring relationship and spiritual transformation. It is also suggested that a counsellor should be open and transparent about their own reflections within the counselling setting and to use "counselor's own spiritual experiences to inform the questions that he or she asks or the suggestions he or she offers to the client" (p.74). Although this approach may be effective, scholars such as Sheridan (2008) and Jankowski (2002), himself, would caution a counsellor to limit the amount of self-disclosure that occurs within the counselling relationship and refrain from imposing their own beliefs on a client.

The third approach involves utilizing a "systemic perspective to clinical practice", which includes "strengthening clients' relationship with extended family members and community networks" (Jankowski, 2002, p.74) such as spiritual leaders or clergy, in hopes to promote a greater sense of connection and reduce feelings of isolation that may be fostered by postmodern spirituality. The final approach suggested by Jankowski perhaps can be seen as more religious than spiritual, but it may be a vital piece to successful counselling experiences for many clients. This final approach "stems from Bowen theory and object relations theory" (p.75). According to these theories, dyads, or the inclusion of God as a third member of the relationship triangle, can foster relationship stabilization. Griffith further explains this approach by stating, "that conversing with a client about his or her relationship with God, as one would any other interpersonal relationship, frequently brings about changes in a client's relationship with God

that can then facilitate changes in other relationships” (as cited in Jankowski, 2002, p.75). Engaging in spiritual practices such as prayer, fasting, and meditation are also well known ways of strengthening one’s relationship with God that may also bring about changes in individuals’ relationships. Again, the approaches suggested by Jankowski appear to be effective ways for counsellors to include concepts of spirituality in their practice, however, specific approaches with children and youth may have to be altered just as they would be for every client due to unique personal beliefs and a clients therapeutic relationship with his or her counsellor.

Maturana claims, “it is trust, acceptance and the pursuit of intimacy and a shared existence that provide the basis for social cohesion, language and culture” (as cited in Lucas, 1997, p.29), which may be similar for the therapeutic relationship as well. Steen et al. (2006) add on to Maturana’s claims by expressing the need for the appropriate environment when addressing “deeply personal, multifaceted, and highly complex issues [such] as spiritual beliefs” and state that “counselors must join clients in creating an environment that is open and flexible to exploration and questioning” (p.111).

Antoniou and Blom (2006) describe the five types of relationships that can occur in a therapeutic relationship, which help me determine where I am at with a client and the feelings the client or I may be experiencing but not openly addressing with one another. For this reason, I believe it is important to understand how each of these relationships, individually and collectively, impacts the relationship between client and counsellor. Antoniou and Blom (2006) first mention the *working alliance*, where the components within the client-therapist relationship enable both the client and the therapist to work together even when contrary desires are strong, individually or communally. The second, the *transference/countertransference relationship* is “the experience of unconscious wishes and fears onto or into the therapeutic relationship”

(p.439). Wiener (2009) speaks vividly to the significance of transference and countertransference within the therapeutic relationship, claiming that the multiple definitions available, specifically for transference, all vary subtly yet all “agree that transferences is an unconscious form of projection from the patient onto the analyst [or therapist]” (p.12) and that countertransference is the “unconsciously motivated reactions in the analyst [or therapist] that the patient’s transference evokes” (p.60). Antoniou and Blom (2006) further divide the transference/countertransference relationship into proactive transference where the client projects their experiences onto the therapist, proactive countertransference where the therapist projects towards the client and reactive transference, also known as countertransference, is the reaction of the therapist to what the client brings to the relationship. Plumb (2011) speaks about the concerns of transference and counter-transference reaction that may occur when religion and spirituality enter the therapeutic relationship because of the limited training practitioners receive in including spirituality in counselling practices.

The third type of relationship explained by Antoniou and Blom (2006) is known as the *developmentally needed* or *reparative relationship*, in which the therapist corrects, repairs, or replenishes relationships that originally were deficient. The *person-to-person relationship* is the fourth type and is the “real relationship” (p.440) that allows the therapist to utilize their choice of theories or techniques that they feel will be most effective. A challenge may arise if the client and therapist have different beliefs around what a ‘real relationship’ entails, which unfortunately is not addressed by Antoniou and Blom (2006). The last is the *transpersonal relationship* and “refers to the spiritual dimension of the healing relationship” (p.440). Grof (1979) defines the transpersonal relationship as an experience that involves the extension of consciousness that

allows an individual to go beyond ego boundaries and limitations of time and/or space (as cited in Antoniou & Blom, 2006).

It is unambiguous that the therapeutic relationship is a well-explored aspect of the counselling process. Other factors may include physical location, ethnicity, race, socio-economic class, religion, and spirituality. Campbell, Sefl, Wasco, and Ahrens (2004) created a therapeutic relationship with their research clients through a nonhierarchical approach, as suggested by Oakley (1998, as cited in Campbell et al., 2004). This process allowed researchers and participants to create an emotional bond. Campbell et al. (2004) also allowed their participants to have control over the physical setting in which the research interviews would take place¹.

Another aspect that may help create a nonhierarchical therapeutic relationship is providing participants and researchers with the opportunity to engage in general conversations, perhaps over coffee and snacks, prior to the interview. This approach can be seen as creating a feeling of friendship versus a power distinction between participants and researchers. When transferring these interview approaches over to counselling sessions, Campbell et al. (2004) caution us that feelings of friendship may be beneficial during research processes but may not be appropriate for counselling practices.

Other factors that may influence the therapeutic relationship include socio-economic class. Balmorth (2009) states that counsellors “tend to view their political and ideological beliefs as irrelevant to their work, as if counselors are politically and ideologically neutral” (p.376). Balmorth (2009) also emphasizes the need for counsellors to recognize “the social circumstances

¹ Participants in Campbell et al.’s (2004) study were able to control the physical setting of their interviews by picking a location of their choice such as a community setting like a local restaurant or a more private setting such as the university.

that may have contributed to a working class client's distress" (p.376-377) and how engaging in a therapeutic relationship with a middle-class counsellor may reinforce the social inequality if clients internalize the "unequal balance of power" (p.381). Tummala-Narra (2007) explores another factor, skin color, which may contribute to clients feeling a power imbalance within the therapeutic relationship. In Tummala-Narra's (2007) reflection on two of her clinical experiences, she states that "the issue of skin color was experienced as difficult by both my clients and me" (p.266), which raises questions about Tummala-Narra's personal relationship with her own skin color. Additionally, Balmforth (2009) suggests that differences between clients and counsellors, such as class, race, gender, special needs, sexual orientation, and perhaps spirituality, can carry "a legacy of power imbalance and oppression" (p.384), which may enter the counselling relationship in a destructive manner. Kearney (2003) states that when a power imbalance is present, it is the responsibility of the counsellor to find a way of addressing the problem as well as to be sensitive to the effects of the differences between the client and counsellor, such as race, class, and spirituality, on the counselling process (as cited in Balmforth, 2009).

Hackney and Cormier (2013) note that it is important for practitioners "to be hypersensitive to the many legitimate ways people can be different from you" (p.35) and stress that it is important to be sensitive to cultural, including religious and spiritual beliefs and practices, similarities and dissimilarities between a client and practitioner. As practitioners, if we are to ignore the spiritual and/or religious aspects of our clients, our holistic understanding of our client may be compromised. Without a holistic understanding of our clients, our ability to assess and engage in a positive therapeutic relationship is also hindered. Counsellors rely heavily on their rapport and relationship with their clients to provide care; therefore, by ignoring or

minimizing a clients spiritual and/or religious beliefs, practitioners may negatively impact the therapeutic relationship and the outcomes of the counselling sessions (Hackney & Cormier, 2013).

Much of the literature reviewed here focuses on the therapeutic relationship. It is crucial to go beyond exploring how class, race, gender, and sexual orientation influence the therapeutic relationship and examine *how* spiritual beliefs and practices are included or not included in the therapeutic relationship and what factors prohibit and/or contribute to counsellors' use of spiritual conversations during practice with adolescent clients.

Chapter 3 – Methodology and Methods

This chapter describes my theoretical location and the study design in detail including the participant recruitment process, participant demographics and methods used for data collection. The chapter ends with an overview of ethical considerations, a discussion on reflexivity, and the kind of insider and outsider knowledge that informed the research, and its limitations.

Theoretical Location

Narrative inquiry.

Mahoney (2003) claims, “human beings are embodied stories and creative storytellers” (p.100). I find stories help me understand concepts, situations, and individual perspectives. On the other hand, I have also realized that I often clarify questions asked by others by providing stories based on my own experiences regarding the concept being discussed. Clandinin and Connelly (2000) state, “Experience is what we study, and we study it narratively because narrative thinking is a key form of experience and a key way of writing and thinking about it” (p.18). Narrative inquiry can be seen in similar terms as narrative therapy in that narrative inquiry uses stories to explore and circulate knowledge about the world, our understanding of the world we live in, and an understanding of ourselves (Hackney & Cormier, 2013, p.215). It was through the telling of my own narrative, the one described in Chapter One, that I was able to uncover the challenges that I faced, the strengths I viewed in my practice, and the method I used to construct an understanding of my relationship with my client.

Boynton (2011) says that a narrative approach encourages “Meaning-making [to occur] as individual life stories are constructed, co-constructed, and re-constructed” (p.115). Anderson and Gehart (2007) discuss inquiry as construction and state, “we conceptualize interviews as a

dynamic and organic dialogical process. Both the designated researcher and the invited researcher [the participant] jointly participate in a dialogical process” and “contribute to its focus, which is usually informed by the conversation itself as it unfolds” (p.377). It is through the process of narrative inquiry, collaborative activities, and social relationships (Gergen & Gergen, 2004) that a holistic perspective of an individuals’ story or what is understood to be true for a community is conveyed as stories often set the stage by describing the setting of the story, the events leading up to the climax of the story, and the outcomes that follow the climax.

I believe that the questions I pose in this research can be answered by carefully listening to practitioners’ stories. Based on the interactions between participants and the ability to question one another’s stories to gain a deeper understanding of beliefs, practices, and assumptions made during specific scenarios, valuable data will emerge that reveals why counsellors feel it is necessary to include or not include spirituality in practice. Narratives of practitioners’ experiences will also help provide the context in which spirituality appeared in their practices and provide insight into what counsellors do and how counsellors include or exclude spiritual conversations in their practices.

Focus Group Research

In order to obtain data from multiple participants within a safe and timely manner, a focus group research design was used. Onwuegbuzie, Dickinson, Leech, and Zoran (2009) state that “Focus groups are less threatening to many research participants, and this environment is helpful for participants to discuss perceptions, ideas, opinions, and thoughts” (p.2). Participants were “selected on the criteria that they would have something to say on the topic, are within the age-range, have similar socio-characteristics and would be comfortable talking to the interviewer and each other” as suggested by Rabiee (2004, p.655). Although establishing a sound way to

analyze the resulting data from the focus group discussions was challenging due to the limited literature on how to analyze focus group data (Onwuegbuzie et al., 2009; Wilkinson, 2004), the benefits of focus groups such as the interactions between participants which creates a “possibility for more spontaneous responses” and the rich discussions and debates between participants (Onwuegbuzie et al., 2009; Rabiee, 2004) largely outweighed the challenges.

Within each focus group an attempt to use a narrative approach to research was made. According to Savin-Baden and Niekerk (2007), “the idea of narrative inquiry is that stories are collected as a means of understanding experience as lived and told, through both research and literature” (p.459). The use of stories to share times when spirituality was presented in participants’ clinical practices became the focal point of the research. Narratives also included how participants defined spirituality and religion, their personal experiences with spirituality and religion, and stories of when they faced adversity while including spirituality in their practices. During the dissemination of the results, participant stories are presented individually, however, by using a focus group approach, which is a dialogue, the narratives each participant presented were enriched by the shared conversations and questions and comments that surfaced during the dialogue. The focus group approach also provided a less threatening environment in which participants could engage in open conversation regarding the topic versus potentially feeling as though their clinical practice was being interrogated during a one-on-one interview.

Study Design

Understanding and developing my personal beliefs and values started long before I entered the CYC MA program, however, it became more of a focus point as I shifted from course work to research. I started with an exploration of literature relating to spirituality in hopes to determine a working definition of spirituality and religion for my own personal

understanding. During my formal search to understand spirituality and adolescence I was employed as a youth worker and encountered a unique situation that entangled me with questions about how to incorporate spirituality in my counselling practice, as shared in Chapter One. This experience highlighted the need I felt to explore the relationship between spirituality and counselling, a subject that is limited within current literature (Sheridan, 2008).

Therefore the starting point for my research was to narrate my own experiences with spirituality and religion and spirituality within counselling. During this time I reviewed literature to gain an understanding of the impact spirituality has on adolescents' lives, how spirituality influences child development, and the need for counsellors to move beyond acknowledging that spirituality is critical in practice to determining *how* counsellors include spirituality in practice. The process of writing my own story allowed me to note aspects of my own experience that were beneficial to my practice and ones that challenged my practice, and left me with a sense of being open to the stories of others. I was able to table my own experiences and sit with participants while they worked through their own questions, challenges, and successes regarding spirituality in personal and professional practices.

Actively listening to my participants was the basis of the data collection process. The transcripts created following each focus group conversation helped me to compare and contrast the narratives shared by participants in each of the focus groups and allowed for further analysis of how practitioners are “knowing, doing and being” (White, 2007) in practice. According to White (2007), the praxis of “knowing, doing and being” is “ethical, self-aware, responsive and accountable action”, which helps theory and practice come together (p.231). Additionally, in the discussion I explore how participants' stories encouraged me to reflect further on my own experiences and include excerpts of my own narrative throughout the research.

Recruiting Participants

The target population for this research was six to ten graduate students at the University of Victoria (UVic), located in Victoria, British Columbia, Canada, in the departments of Child and Youth Care (CYC), Social Work (SW), and Educational Psychology and Leadership Studies (EPLS). In order to recruit students an invitation to participate letter (Appendix I) along with a brief email to each department's graduate secretary requesting that the letter be sent out to all current graduate students through the department's listserve was used. Once students received the invitation to participate, interested participants contacted me directly. Each participant was provided a copy of the informed consent to participate form (Appendix II) to read over prior to attending a focus group conversation. In order to ensure the desired number of participants was obtained I over-recruited. Each of the first two focus groups had an extra member to allow for potential non-attenders as suggested by Rabiee (2004). Over-recruiting worked in my favour as a potential participant in both of the two focus groups did not attend.

During initial contact with each participant, mainly through email correspondence, I described my research and answered any questions the participant may have had. Often times participants would ask if they met the qualifications to participate as many had not been trained in spiritual counselling but were interested in spirituality and counselling. I informed each participant that the suitability criteria included: (1) a graduate student in CYC, SW, or EPLS; (2) experience in counselling or therapeutic conversations with adolescent clients; and (3) an interest in the inclusion or exclusion of spirituality during counselling practices.

In addition to the participants recruited through email invitations, near the end of my research process a faculty member in the CYC department at UVic requested that I participate in a similar conversation regarding spirituality during her MA course. The students in the class

initiated this request. In order to include this course based conversation in my data set I prepared a request for modification of an approved protocol to submit to the University ethics board. The approval from ethics and the ability to engage in conversation with a CYC MA class significantly altered the participant demographics in this study.

Participant demographics.

Interested participants contacted me from CYC and EPLS. No responses from SW students came in. The SW masters program at UVic is largely based on online courses, which may have deterred SW participants as focus group conversations occurred on campus. The research included fifteen student participants and two faculty participants. In total seventeen participants were included in this research. The following is a demographic breakdown:

- 1 student from EPLS, 14 students from CYC, 2 faculty members from CYC
- 3 male participants
- 1 visibly non-Caucasian participant
- 2 student participants that graduated from their program within the eight months prior to the study being conducted

Method: Collecting and Analyzing the Data

Focus group interviewing.

During the months of March to May 2012, I conducted the three focus group discussions. Krueger (1994) suggests that simple research questions may only need three or four focus groups before reaching theoretical saturation, when data becomes repetitious (Rabiee, 2004). Conversations lasted between one and a half hours to two hours in length. The first focus group began with each participant introducing themselves to the others and then a brief description of

the research before posing the research question. The second group included group member introductions, an overview of what was discussed in the first focus group and then the same research question was asked as in focus group one. Dialogue with participants in the first two conversations was semi-structured as the primary research question was posed at the beginning of each conversation.

The third group began with a narrative shared by my supervisor, Dr. Scott followed by my story to highlight that counsellors are engaging in spiritual conversations with adolescent clients. This focus group conversation took on a non-structured question and answer format where students asked Dr. Scott and myself specific questions as they emerged while participants engaged in open dialogue with one another.

Data Analysis and Organization

The first step to analyzing the data was to transcribe each audio-recorded focus group. Additional non-verbal descriptions were added to the transcript based on documented observations made during and directly following each focus group conversation as suggested by Rabiee (2004). In an attempt to minimize the potential bias due to the subjectivity involved in the selection and interpretation of the collected data, a systematic, sequential, verifiable, and continuous process of analysis was followed (Krueger & Casey, 2000).

Analysis of the data occurred concurrently with the data collection process. As Rabiee points out, “analysis does not take place in a linear form and that one part of the process overlaps another” (2004, p.657). Anderson and Gehart (2007) support Rabiee by stating, “Each interaction in the research process is a decision point in which we make sense of the data we have at hand. Thus, in collaborative research, data analysis cannot be separated from the data gathering process itself” (p. 379). The steps outlined in Ritchie and Spencer’s (1994)

‘Framework analysis’ aligns with the steps I utilized to analysis the collected data (as cited in Rabiee, 2004). Ritchie and Spencer’s framework analysis includes familiarizing one’s self with the data, identifying themes, indexing, charting, mapping and interpreting the data.

The formal analysis process began by transcribing and listening to the audio-recordings of each transcript multiple times to familiarize myself with the data as a whole prior to breaking them into parts. Each transcript was reviewed individually and then collectively in an “aim to bring meaning to [the] situation rather than the search for truth” (Rabiee, 2004, p.657). As Rabiee notes, this process allows for major themes, what I call factors, to emerge. I use the term factors because the ideas that surfaced during the study often acted as prohibiting and/or contributing factors depending on the context. The process of listening to and reading over the recordings from each group enabled me to create memos that helped identify the categories and factors that emerged. As variables appeared I began to write them on sticky notes and placed them in their appropriate section, prohibiting or contributing factors, on a venn diagram, which can be seen in Chapter Six.

Following this process, I sorted through the direct quotes of participants that highlighted the factors that emerged and placed them along side the appropriate memos on the venn diagram. This process allowed me to use the exact words of participants to describe the outcomes of the data, place the quotes appropriately within the context of the research, and determine the frequency of the comments appearing within the three focus group conversation. It became apparent that many of the comments made by participants started to move towards the center of the diagram, indicating that depending on the context of the spiritual conversation, factors could act as both prohibiting and contributing to the inclusion of spirituality in counselling practices.

Faced with the challenge to differentiate what acted as a prohibiting factor or a contributing factor I returned to the transcripts and audio-recordings. Re-reading and listening to the audio with a different lens allowed me to realize that a vital factor was missed. In order to determine what caused or prevented counsellors from including spirituality in their practice, I went back to the data and listened to each participant's narrative to determine how participants defined spirituality, what their personal experience with spirituality is, and how their experiences and understanding played a role in the factors that emerged in the first round of analysis.

The final step to the analysis process was to determine how to disseminate the results. It was clear that the venn diagram provided a logistical and practical outline for presenting the results. The results of the study are split into two chapters, the first describing the factors that prohibit counsellors from including spirituality in their practice and the second highlighting the factors that contributed to the inclusion of spirituality in practice. In Chapter Six a discussion that outlines the factors that presented themselves in the middle of the venn diagram, what I refer to as the overarching factor, takes place.

Theoretical location influences data analysis.

The narratives shared within this research process were strongly influenced by the members in each focus group and the comfort participants felt with one another and myself. A narrative inquiry approach allowed participants and researcher to ask questions and make comments in the moment based on the stories being shared by each participant. This process helped ensure that each individual's narrative(s) were understood in an unbiased manner, without what Anderson and Gehart term "personal preunderstandings" (p.380) of another's story. In order to maintain coherence and lessen the impact of preunderstandings of participants' stories, Anderson and Gehart (2007) suggest that participants' words and language be used when sharing

their narratives. A narrative approach also provided a space for reflection to occur, perhaps because of the dialogue that is produced based on interest, a desire to know and understand more, and a desire to ensure each participant's narrative is being understood as clearly as possible. Through a reflective process, participant's stories began to form new meanings and highlight different aspects of practice that prohibit and contribute to the inclusion of spirituality in counselling practices, which is explored in the next few chapters.

Lastly, it was critical for me to remember, because of my theoretical location and understanding that stories are constructed and reconstructed based on the context an individual is in and that the narratives shared by participants are subject to many layers of interpretation (Anderson & Gehart, 2007). For example, many participants speak to their understanding of organizational policies but also note that their understandings are based on their own interpretations. Therefore, the outcomes of their interpretations may play a role in how they practice, including if they believe or understand that they are allowed or not allowed to include spiritual conversations in their practices with adolescent clients and in how they share their experiences with others.

Ethical Considerations

Informed consent.

Voluntary consent was obtained at the beginning of every focus group along with informed written consent from all participants. Consent allowed each conversation to be audio-recorded and provided participants with the opportunity to provide their name or a pseudonym of their choice for the dissemination of the data. Additionally, consent forms included a separate section that requested permission to use the data collected for potential journal publications or presentations at scholarly conferences. This separate section provided participants with the

opportunity to accept or decline that the data they provided be used beyond this thesis. The informed consent can be found in Appendix II. A second consent form was developed for participants in focus group one in order to obtain written consent that the information they shared could be summarized in the second focus group. This consent form can be found in Appendix III.

Pseudonyms.

Names of each participant were altered during the transcribing and dissemination process to help ensure the anonymity of participants. Participants were given the option to identify a pseudonym of their choice. In an attempt to maintain confidentiality, participants that participated in more than one focus group, those that took part in one of the first two focus group conversations and then again in the large class based focus group conversation, were given more than one pseudonym to help ensure their anonymity.

Confidentiality.

Confidentiality was limited as participants engaged in conversation with one another. The process also included highlighting key points that emerged in focus groups one and two that were made in previous focus groups. Due to the small group sizes and targeted populations, participants may have recognized attributes of members in previous groups. In order to maintain confidentiality, the overview summary did not include names or identifying features of participants such as genders, department of study, or places of employment. The limitation to maintain confidentiality was noted in each participant's consent to participate form and was highlighted at the beginning of each focus group. All steps possible, such as using pseudonyms and not including identifying attributes of participants, were taken.

Exemption to confidentiality.

Dr. Daniel Scott, my supervisor, has agreed to be referred to by his name versus a pseudonym. Dr. Scott's comments during one-on-one consultation and within the class-based focus group are intertwined throughout the dissemination of results. Also, Dr. Scott may have been seen as an authority figure during the class-based focus group conversation, which may have influenced participants' responses, questions, and comments. One of the primary reasons why I requested the supervision of Dr. Scott during this research process was because of his expertise in the field of children's spirituality. I, therefore, believe it is important to acknowledge Dr. Scott's contribution to this research and to recognize that Dr. Scott was a vital participant, as supervisor and research participant, in this process.

Tips to process potential harm.

Due to the nature of the study participants shared personal and often times intimate stories. In order to ensure that participants felt safe, comfortable, and to maintain a voluntary approach to disclosing information, I closely watched each participant's body language for signals of discomfort. Although no participants displayed any negative body language during the conversations, I was prepared to provide a break for participants when necessary as well as a *Tips to Process Potential Harm* information sheet if needed. This document can be found in Appendix V.

Role of Reflexivity

My position as a student, researcher, practitioner, and as an individual attempting to understand my own spiritual beliefs and values is an integral part of the research I am conducting. Without acknowledging my presence within the research, I lack the personal justification that is discussed by Clandinin and Huber (in press). Clandinin and Huber explain

that “Narrative inquirers begin with personal justification, that is, by justifying the inquiring in the context of their own life experiences, tensions and personal inquiry puzzles” (p.8). In an attempt to be transparent throughout this research process it is important to note that I come from three critical standpoints: (1) personal interest that was initiated through the reflection of how much of my adolescence and young adulthood was spent examining and grappling with my own relationship with religion and spirituality; (2) professional interest and encounters with spirituality in practice; and (3) an academic interest that arose with the realization that learning about spirituality was limited within the human and social development field.

Gardner (2009) states, “Critical reflection is both a theoretical approach and a process, which can enable workers to engage with these dilemmas and to affirm or identify their values and what is meaningful in their practice” (p.181). In order to remain reflexive throughout the research process it was important that I spent time reflecting on my own story that initiated this research, as described above. Additionally, I found it vital to spend time journaling, noting the questions that came up for me because of comments participants made, and to engage in praxis, a “conscious reflection both on and in practice” (White, 2007, p.226). An attempt to describe the conscious reflection I engaged in during the research process can be found in Chapter Six.

Establishing Relationships

Krueger (1994) points out that rich data from focus groups can only be generated when members feel comfortable and safe with one another. Onwuegbuzie et al. (2009) add that focus groups provide participants with a “sense of belonging to a group [that] can increase the participants’ sense of cohesiveness and help them to feel safe to share information” (p.2). The need for participants to feel connected to other participants and myself was a critical aspect for the success of the research. In order to establish a relationship with each participant, the initial

contact between participants and myself included space for participants to ask me any questions they may want, including why I am interested in this topic, how I see them helping my research, and general questions such as, what my academic background is.

Each focus group started with a brief introduction of each participant including their department, a little bit about themselves, and why they were interested and decided to participate in the research. During the first focus group it became apparent that this was an essential piece to the success of the group as participants quickly noted that they enjoyed the atmosphere generated by the others. One participant in particular says, *“we have a lot of camp people here though, I’m liking this camp theme”* after each participant in the group introduced themselves and mentioned that they worked at or are currently working at a summer or year-round camp for children and youth. Further relationship building techniques did not appear to be necessary as participants began discussing the topic at hand without much delay.

Insider/Outsider Knowledge

A few participants asked me prior to our focus group discussions why I was interested in this particular topic. On the other hand, a few participants and I had pre-existing relationships as we had participated in the same academic courses. Although these participants had some insight as to why I was interested in spirituality and counselling, none of the participants were aware of the specific narrative that sparked my research study. I pondered over how sharing my personal interest and experiences may influence the research outcomes and the narratives shared by the participants. For the purpose of obtaining as un-biased data as possible I made a conscious decision to share my own narrative with participants following each of the initial two focus group discussions. However, in the middle of the second focus group a participant asked me about my own experience. In the moment I felt that it was critical for me to share my own

experience with the group to help maintain the relationships built, to remain authentic, and to ensure a level of trust and equality between participant and researcher.

The third focus group began with me sharing my experience, presenting my insider knowledge at the start of the conversation. Presenting my own narrative in the third group also influenced how I analyzed this group's transcript. Much of the shared narratives stemmed from my own story, which challenged me to look at my narrative from an outsider's perspective during the analysis process. In order to remain transparent and reflexive throughout the process of dissemination, I felt that it was essential to include my own experience in the discussion chapter as it formed the lens through which I analyzed and organized the collected data.

I primarily felt like an insider during the research process because of my clinical experience and because I, like many of the participants, spent significant periods of my life questioning my religious beliefs and practices. However, there were moments during each focus group where I felt like an outsider. For example, one participant shared her experience of being overwhelmed by questions such as why does God make people sick, what does life look like after death, and if hell exists? I wondered if I was capable of fully completing this research. During my reflection and a discussion with Dr. Scott, I noted that I have never questioned why God might make someone sick, if God is responsible for people's illness, or what life looks like after death. These thoughts often had me feeling like an outsider.

Limitations to Research

According to Rabiee (2004), it is recommended that participants do not know each other in order to prevent behaviours based on pre-existing relationships from entering the focus group discussion. Due to the close-knit target population and the sample size many of the participants knew each other prior to the focus group conversations. Although this may be seen as a potential

limitation, the pre-existing relationships may have encouraged acquaintances to “relate to each other’s comments and [therefore] be more able to challenge one another” (Rabiee, 2004, p.656).

The participant demographics can also be considered a limitation to the study as there is an over representation of white middleclass CYC female workers located at UVic in Western Canada. Respondents had all encountered a spiritual conversation with a client that they felt unsure of how to address, however, those that felt they had not encountered a spiritual conversation in practice may have refrained from participating in the study. The challenge here lies in the limited responses received from the SW and EPLS communities. In the future it would be important to engage in conversations with SW and EPLS workers as well as workers that have completed their degrees and are full-time practitioners.

Lastly, the conflation between religion and spirituality presented a limitation to the study. In an attempt to define spirituality and religion, participants presented their own unique definitions that often conflated the two. The challenge to separate spirituality and religion has been and continues to be a challenge at the forefront of spiritual research and is the case in this study.

Chapter 4 – Prohibiting the Inclusion of Spirituality in Practice

In this chapter I discuss factors that have prevented and continue to prohibit counsellors from engaging in spiritual conversations with adolescent clients. According to the key factors that emerged during focus group conversations, individual accounts of anxieties and fears, organizational restraints, and practical challenges are presented. The language of each participant is used as much as possible to highlight individual and communal challenges in including spirituality in practice.

Pushing Away Religious and/or Spiritual Practices

Before exploring some of the personal and systemic reasons behind why counsellors refrain from including spirituality in counselling practices, there is a need to explore the ideas of pushing away and/or challenging religious and spiritual beliefs and practices that emerged within the three focus group conversations. The idea of pushing away and/or challenging beliefs and practices set the stage for the inner aches I discuss later on.

Nancy vividly recounts an episode in her adolescence when she was attempting to grasp her own beliefs and practices. She reconstructs her story:

I remember I went to a Catholic high school and we had Nuns and Bishops and stuff in our school and we had, we had spiritual leaders in our school and I remember they would try and have conversations with you and sometimes you were frustrated because it was like NO², this applies to you, this does not apply to me. I know you feel assured in this, don't tell me that's what I think about it.

² Capital letters are used to emphasis the tone change in participant transcription

In another conversation Melissa shares her own account of when she began to question the beliefs and practices of her family and create her own spiritual path. Melissa narrates:

My mom pushed religion on me, like I mean I heard all about God all the time, went to Sunday school, was a Sunday school teacher at fourteen cause that's what I was supposed to do until I made some decisions for myself...As a youth I figured out my own religion if you will, or spirituality based on kind of being put in I guess Christianity and seeing that I didn't feel like it was genuine AT ALL. Maybe that's just the particular place that I was at and saw or you know, but it's interesting because then I went through this process and it was very self-driven and all of that to where I got to a place that I was comfortable without feeling like I need religion at all and that spirituality is very different for me and they're two completely separate things.

Melissa also shares with us that she is “*pretty ambivalent*” when it comes to talking about spirituality with clients because she was taught that her spirituality was a “*private kind of thing*”. Nancy and Melissa were not alone in retelling their stories of pushing religion away. Ruth also notes that some of her ambivalence comes from being cautioned against having personal conversations with others. She states:

Socially we're all brought up to think what are the three topics you don't talk about with people at dinner parties. Politics, religion and sex. Those are the off topic subjects because those things are related to personal belief systems that can feel a lot more, people can feel a lot more vulnerable.

The apprehension, anxiety, and fears of each participant in regards to religion and spirituality, are presented in a variety of ways throughout the three focus group conversations. To see how these feelings have manifested in each participant, it was vital to provide

practitioners with the time and space to discuss some of the personal and systemic reasons behind not including spirituality in their practices and to recognize that many of the inner aches, which will be described below, hide behind the publically known and acknowledged systemic barriers.

Inner Ache

Defining an inner ache.

In each conversation participants expressed their apprehension, anxieties, and fears regarding the inclusion of spirituality in their counselling practices. These feelings, what I have termed the *inner aches* are heard in voice tones and seen when participants hands begin to shake as they speak, when participants were sitting back and curled into themselves, and through their individual words. Another indication that soon to be practitioners are trying to cope with these inner aches was apparent when students in a counselling course requested to engage in a conversation about how to address spiritual matters in practice. Inner aches are more than the struggles and challenges participants faced and include the desire, the want, the yearning to engage in spiritual conversation. It also includes the uncomfortable, scared, and unaware feelings of how to initiate and maintain a spiritual conversation. For example, Katie shares an anecdote about how a friend struggled to initiate a conversation about spirituality that she had been internalizing for months. She shares:

I'm thinking about some friends that we just had a conversation, not long ago, about why it's so hard to talk about spirituality, like even in a friends group so this isn't necessarily you know experience with adolescents but I think it relates and um we were talking about how hard it is to talk about the things that aren't um things that you aren't, are undefined and so you don't. Like she [a friend] was saying she's like I don't, I have a hard time

bringing this up even though I want to talk about spirituality with other people but I have a hard time bringing it up because I don't even know where to start and I don't even know what to say because it's all just big question marks for me.

A scenario I retell during one of my reflections immediately following a focus group conversation tells of an individual who initially seemed to be timid. It later appeared that she may have been anxious, unsure of her ability to contribute to the conversation, or perhaps unsure of her own beliefs. The narrative I scribbled in my journal is as follows:

A particular moment in today's conversations sticks out in my mind. One participant, during our conversation, initially was seated in a chair a couple feet behind the participants on either side of her. She sat reading the participant consent form word for word. I noticed she did not sign the form so I immediately thought she was not willing to participate and all the data would have to be voided. As she put the form down and placed her pen on top, as to signal her disapproval, or perhaps her anxiety to participate, I did my best to remain calm and focused, to carry on with the conversation and hope for the best. As Dr. Scott and I continued to share stories about practices that included spiritual conversations and complications, I watched her chair as she continued to slide further back, as if to hide from the conversation. Her head remained down, almost as if she was looking at her hands and waiting for her thumbs to start twirling from boredom. To me, this felt like it was happening for hours and I was scared that my own anxieties around spiritual conversations would start to appear.

In order to remain focused I picked up my pen, wrote down a few words, adjusted my own chair slightly so my direct line of sight faced another participant who sat on the edge of her chair, eyes wide and glued on me at the front, and hands prepared to write notes

rapidly if I said anything intelligent. I started to forget about the 'disinterested' participant, perhaps exactly what she hoped for. Our conversation continued and the questions began to roll in. I was asked 'how do you define religion and spirituality?' After a quick chuckle, because we all know how difficult that is, I began to answer. I started with what the literature said and then my own personal and working definition. At that moment I glanced in the direction of the disinterested participant because I thought I saw movement. To my utter shock and surprise, this participant moved her chair right up to the table, body straight, head high, and eyes that were searching to make contact with mine.

Our eyes met and I knew she had something to say. This was my opportunity to engage her, capture her attention for the next hour, and to not loose the use of such valuable data. She shared a story about how my definitions resonated with her and some of her past clients. Following my 'thank you for sharing', I witnessed her forms flip open, her scratch her name, signature, and date down, and then grab her note pad and pen, as if to write down all the valuable information I may have to share.

Initially this scenario meant little to me, but on that occasion as I sat to reflect, it was what my hand wrote and my mind followed. I later realized that many others shared the anxieties this one participant was feeling. These inner aches, however, did not dismiss the desire each participant had to engage in a conversation regarding spirituality. It simply was not a conversation that many of them had been able to have.

These inner aches, the anxiety, fear, apprehension, and yearning to learn, understand, and engage in spiritual conversations, became apparent in each of the focus groups. They often presented themselves within the first few minutes, some lasting the entirety of the conversation.

The impact of the inner ache.

In one conversation, Nancy speaks about her feelings of not being able to support another individual in their spiritual journey because of her own feelings of being “*in-capable of wrapping your head around where you’re at with this. Then the idea of helping someone else wrap their head around it seems so impossible*”. Katie shares, “*if you’re grappling with those big cosmic issues as well in that moment then maybe feeling a little bit like bff* (sound to describe ‘I don’t know’) *how could I go there?*” Olivia raises a similar concern when emphasizing the need for practitioners to consciously understand and grapple with their own spiritual journey.

If you’re not feeling grounded in your own spiritual beliefs or having some sort of idea there, then I haven’t seen it go to a point where it’s comfortable talking about somebody else’s spirituality because it might not even be something that you’ve thought about so how can you ask those questions.

Being comfortable with one’s own spiritual beliefs and practices appeared only to be the starting point of working through the inner aches of incorporating spirituality in counselling practices. Melissa notes, “*if you haven’t explored it yourself, how can you ask the questions?*” Susan, in another conversation, shares how even following the exploration of her own spiritual practices, she still struggles with how to include spiritual conversations in her practice. Susan says:

I practice Buddhism and it wasn’t till grad school that I started making a little room for that in my practice and I have worked in school settings and it’s the piece of me that I absolutely wall OFF because I know that it’s not okay to bring my stuff into the school. Yet on the other hand I think you know it’s something now that I’m engaging with it in counselling with my classmate and I’m going there, there’s value here too. So I guess

maybe that's the question and the place I really want to explore, is how do I bring that in but bring it in respectfully, honor that it's ONLY my location.

Susan's inner aches are echoed in Lanny's concerns about working with someone who has opposing beliefs. Lanny states her comfort in engaging in spiritual conversations with youth, saying, *"I have ABSOLUTELY no problem with it and really I enjoy it"* but goes on to ask:

What would I do if it came to a spirituality or religious belief that I didn't agree with...how would you deal with that when you absolutely do not believe and how do you work with that without coming across as judging or trying to persuade their beliefs to change?

Lanny's inner aches are similar to the struggle I share with one of the focus groups. Dr. Scott summarizes the tension I faced when one of my clients believed there was a synchronicity between her religious beliefs and practices and mine. The feelings of synchronicity were not mutual. Dr. Scott summarizes:

I have personal beliefs, I'm now colliding with someone who has beliefs they THINK my beliefs are the same as theirs, they're not and they're trying to engage me in their, in that common belief structure as part of their network.

Synchronicity between the client and counsellor materialized in another conversation when Olivia shares that she thinks: *"there's some synchronicity to who we work with"*. Ruth, however, challenges this idea and questions how we know we are in sync and identify with someone. One of the answers Ruth received from another participant was the use of shared language to create a sense of synchronicity between clients and counsellors. Shared language will be explored further in the next chapter.

Challenging me.

As participants spoke about potentially having one's own beliefs and practices challenged their inner aches became even more apparent. Hands started clenching, legs started bouncing, and wrestling bodies became more noticeable. Katie tells us about the fears that arise when one's beliefs appear to be challenged during a conversation about why some individuals may not be the best to talk to regarding spiritual beliefs and practices. She states, "*they're afraid of your words...like a fear that what you say might really challenge my beliefs and so therefore I don't want to listen to that*". In another conversation, Melissa describes how her supervisor, while working in child protection, told her to remove all of her notes from a clients' file that related to spiritual beliefs and practices. When asked if she knew why this was so, Melissa responded with:

Well I think it either challenged their beliefs or...you know if they have their own kind of history with it and it's different maybe or their unsure of it, then it's like well let's not talk about it so take it off.

Having one's own beliefs challenged, and the feeling of being attacked by others, is something that appeared in the retelling of my own experience. While telling my story, the one shared in Chapter One and in one of the conversations, I speak about how I not only felt an inner ache of being seen as a believer of something I was grappling with, I also felt as though I was indirectly challenging the beliefs and practices my parents abide by. Re-constructing my narrative during this conversation highlighted how the act of pushing against spiritual beliefs and practices can also be challenged. For example, having a young client wanting to engage in an act, such as attending prayers together, may be seen as relationship building but in this specific case it seems as though the act of defiance and questioning was being attacked, that an individual

should succumb to the beliefs and practices that they are born into without question. My experience, along with many of the participants, went further, allowing for a deeper exploration as to why including spiritual beliefs and practices in counselling practices can be perplexing.

Restraints Beyond the Self

Educational restraints.

Participants discussed the lack of education and training addressing spirituality that they received throughout their undergraduate and graduate studies. Olivia, Katie, and a few others mention that their undergraduate programs, CYC specifically, did not address the concept of spirituality, other than to direct students interested in spirituality in the direction of one of the faculty members. Melissa explains how social workers attend a three-week training program prior to beginning their careers and not once during the training is spirituality mentioned. In frustration she states:

All the new social workers [entering child protection practices] that are hired, they get three weeks of training, it's like mandatory training outside of whatever practicums they've done or job experience or whatever and in that three week training, we DON'T cover spirituality. We cover the legal stuff again, we cover investigative interviewing, we cover child abuse and neglect, we cover some addictions, we cover mental health now cause we've added it in but no where there's no, not even a half a day or anything on how you would address spirituality or religion and HOW it impacts your practice or how it impacts your clients or ANYTHING. There's not even a CONVERSATION.

A few of the participants shared Melissa's frustration, one even stated that having a course that allows students, and soon to be practitioners, a safe space to explore their own spirituality, to test out ways of asking questions regarding spiritual beliefs and practices, and to start to engage in

conversations with others who may have different beliefs and practices would be beneficial. One participant stresses how a course of this manner would help practitioners feel more comfortable with their own beliefs and practices and in engaging in spiritual conversations with adolescents.

Agency limitations.

Policies set by organizations at the local and governmental level are another of the major conscious factors that prevent participants for engaging in spiritual conversations with clients. I note that these factors are conscious because they are easy to comment on especially as they are often written directly in policy and procedure manuals. After sharing a story about a time when spirituality found its way into a conversation, Katie describes how organizational policies interfered with her work, stating, *“there are some pretty BIG restrictions around who can talk about spirituality and how we talk about spirituality”*. She continues to explain how she finds herself *“sitting with”* clients while they ask questions such as *“why is God letting this happen”* or *“is God mad at me”*, what Katie terms the *big cosmic questions*. The restrictions set by policies are seen when Katie discusses the need to *“refer out”* when these big cosmic questions arise. She states, *“My role would be to refer out. Can I get the Chaplain? Is there somebody who you’re comfortable talking with, can we bring a Priest or someone from your faith community to come in to help you explore those?”* She further explains how referring out, versus engaging in spiritual conversations with clients, may prohibit a client from engaging in a meaningful conversation when they feel most comfortable with having such a conversation.

That [referring out] might have closed the door to furthering those conversation, when yeah it was challenging ‘cause obviously they were wanting to go there to talk about it but it was sort of awkward, like oh gosh, is this within my role to have this conversation.

During another conversation, concerns about how to raise the topic of spirituality came up. After a brief discussion regarding potential questions a practitioner may ask in order to gain insight into a client's spiritual beliefs and practices, a participant commented *"I think it's also important to think about what else is preventing you from asking those questions, is it just internal or is there other things that are perhaps stopping you"*. Dr. Scott further commented, *"including agencies that have specific things in their confidentiality agreements [such as] you're not to talk about religion"*. Arthur, in an earlier conversation, describes how his work placements manual clearly states that employees are not to discuss religious and/or spiritual matters with their clients. He shares how he felt this policy stunted his relationship with his clients.

The policies prohibiting practitioners from engaging in spiritual conversations with clients is further complicated by the code of ethics that each CYC practitioner agrees to. For example, Katie shares her challenge to abide by the CYC code of ethics because of the conflicting policies to not engage in spiritual conversations with clients set out by the organization she works for. She states:

In our code there is something that speaks about the whole being of a child that alludes to their being a holistic sense of approach to practice. So in a way we're saying, I recognize that there is a spiritual component to children youth and families and so then in a way it's like well if we are saying that then part of our obligation is to go there.

In another conversation Olivia also speaks to this point but goes further by sharing how she believes refraining from spiritual conversations with clients is detrimental. Furthermore, from her experience, she is unable to identify other practitioners, such as *"intake workers and social assistance workers"* that will engage in these conversations. Olivia shares her frustration

when she states, *“I don’t know, if we’re not able to talk about it WHO else is going to talk about it?”* She then claims, *“That’s our ROLE”*. The dialogue between Olivia and a few other participants turned into a conversation regarding privilege.

A few participants discussed how if as counsellors, and CYC practitioners, we do not engage in spiritual conversation with our clients then spiritual conversations would be privileged to those who can financially afford to see a practitioner, such as a Life Coach who *“aren’t really regulated by anything”*. The following is part of the conversation the participants had.

P1³: *so there’s an aspect of policy behind...*

P2: *and I think privilege too because like folks who don’t have access to fund, to pay for private practice, then it’s not necessarily a conversation they might have access to*

P3: *totally*

P4: *absolutely*

P2: *so I guess in some ways it can be a privileged conversation which doesn’t, you know not so much with their...*

P4: *which comes back to the idea of time and money, right. It’s around privilege*

Privilege goes beyond having access to a practitioner that is willing to engage in a spiritual conversation and includes practitioners being given the time, space, and money to engage in such conversations with their clients. For example, Melissa shares how being a full-time employee versus a part-time or casual employee can influence the client-practitioner relationship and the ability to engage in particular conversations such as the spiritual conversations we are exploring.

Melissa articulately describes:

³ To protect the identity of participants, when presenting multiple person conversations I will refer to each participant as P1, P2, etc. in order for each focus groups demographics to remain anonymous.

Not only does it, full-time part-time, all that influence your relationships in terms of length and depth of them [the conversations] but also it goes back to the truth then. If you're a casual employee without a full-time position and you're having these conversations and your supervisor doesn't support them then you're in a position of vulnerability in terms of well we'll ask somebody else on the shift list. We're not happy with this kind of practice.

Policies, however, do not appear from nowhere. These policies can be introduced because of a variety of different reasons including the inner aches of supervisors, the attempt to avoid recreating history such as the use of residential schools, church's, and *missionaries* to control individuals and propagate religious beliefs, or because of the lack of evidence-based research that speaks to the benefits on spiritual conversations with adolescent clients, as mentioned by participants.

Practical Challenges

Many of the participants shared stories about their current and past employment settings, including hospitals, shelters, detention centers, and child protection practices. CYC practitioners are now working in mental health fields and tackling counselling roles in their daily practice, through direct one-on-one counselling sessions, group counselling sessions, or *therapeutic conversations*, as a few participants put it, which all fall within practices that have been largely tied to evidence-based research and practices. For example, Mahoney (2003) talks about constructive assessment in psychological practices and explains how constructive assessment uses an assessment and diagnostic approach to treatment. He notes that this practice, “become[s] focused exclusively on problems, deficiencies, and dysfunctions” (2003, p.41). Ruth initiates a discussion regarding evidence-based assessments and practices by stating:

I think at the end of the day it still comes down to, we think about what we typically assess or are maybe looking for that might indicate things that need follow up care, like patterns that might be related to anxiety or patterns that might be related to trauma...things that still come from a very clinically evidence-based kind of way of making sense of the world...like the psychiatrist who is making sense of all the different reports that are shared is still thinking about, are any of these themes or patterns pointing to responses of trauma.

Before moving on, Ruth shares how she is not sure people even think to include *internal spiritual processes*, like belief systems, when exploring client behaviours. She goes on to explain how the need for counselling practices to remain within the ‘*medical model*’ limits the inclusion of spirituality and how evidence-based research influences the organizational policies.

I still think it comes back to, in a lot of ways, like evidence-based research oriented stuff like okay how are you going to make a case that it's important. You know I believe that it's not important and you believe it's important, well, that's not necessarily an argument I'm going to roll with, like do you have any kind of PROOF that it's important, right. Like those are some really tangible things it comes down to as far as making decisions at a bigger level than just you know you have personal interest in it and you're open to it because you've explored your own spirituality and you're open to exploring that in your own individual practice. How does it then permeate the system at a larger level? Like it's still very political.

Olivia shares another insight, one that perhaps limits our ability to obtain proof that spiritual beliefs and practices are a vital part of the counselling process. She states that the first step is to believe that children and youth have the capacity to be spiritual beings. This belief is

emphasized when Nancy, in another conversation, shares her challenge to engage in conversations relating to spiritual and religious beliefs and practices with youth with Autism in a school setting. Her struggle began perhaps because of feelings that *“they have no idea what we’re talking about”*, the belief that these individuals do not have the capacity to be spiritual beings.

Practicing without a relationship.

Building bonds between clients and practitioners is extensively explored, including authors like Antoniou and Blom (2006), Lucas (1997), Steen et al., (2006), Walsh (2009) and many others. Without the positive relationship these authors explore, engaging in any conversation is difficult. Arthur expresses his challenge in engaging in spiritual conversations with some of the youth in his church community. He shares how parents approach him, as the youth pastor, and request that he initiate a spiritual conversation with their children. Without knowing the youth, sometimes having never met them before, he tells us about how the lack of a relationship often prevents him from having spiritual conversations with these youth.

Katie also shares how her limited relationship, due to her casual employee status, with children, youth, and families prevents her from partaking in spiritual conversations because she *“wasn’t the primary person with that family and it was from a place of safety and comfort and knowing”* that other practitioners were able to have spiritual conversations with their clients. These other practitioners she speaks about are the primary care providers for the children and youth in the hospital, those that have a deep-rooted connection because of what they had been through together, within their client-practitioner relationship.

Courtney introduces the idea of self-disclosure and the inner aches it brings up in her. She narrates, *“man I struggle with this authentic relationship [to] bring yourself [to] being open and*

honest”, which is echoed in Susan’s comments about bringing in her Buddhist beliefs as described earlier. Self-disclosure also appears in the story I share with one group. Here, however, I not only struggled to challenge the beliefs my client believed we shared but I tip-toed around the idea of telling my client what I did not believe and what I was grappling with in regards to the religious beliefs and practices of our shared faith. In this case, my intense fear to self-disclose was because I did not want to take away or have my client questioning her and her families strengths, their dependence on religious traditions, rituals, ceremonies, and prayers to overcome the crisis they found themselves in. The layers of my inner aches kept building, with the next being an act of balancing personal and professional relationships with my client, a challenge a few participants also expressed, especially as many of them are new to counselling practices and still attempting to find practice modes that suit them.

Pulling Apart the Threads

The rich focus group conversations provided a variety of reasons why practitioners, and soon to be practitioners, refrain from engaging in spiritual conversations with adolescent clients. It comes with little surprise that the personal challenges, the inner aches of engaging in spiritual conversations hide neatly behind employee policies and other restraints beyond the self. The written and strongly encouraged boundaries and restrictions in regards to having spiritual conversations allow practitioners to tuck personal feelings of fear and anxiety away. Although, as a few participants noted, by not having the opportunity, the space, time, and money to participate in spiritual conversations with clients, we may be harming our clients and missing a valuable and critical component to care. As Dr. Scott shares, with spiritual communities comes more than belief systems and practices. Claiming his own biases and belief that spiritual conversations need to take place, he informs us of the importance of spiritual communities.

Because they're connected to a community, it's not just the beliefs, it's the fact that those belief structures bring all kinds of benefits, including in the story Shemine told, new immigrants come into a community and they immediately have a support network, that makes a HUGE difference in those kinds of transitions and it is based on a belief system. Now you don't have to agree with a belief system to see that it makes a benefit and that's partly why I think it needs to be part of our practice and how do we help people draw on it in their practice or in their crisis in order to manage their crisis.

In order to see how practitioners move beyond the factors that prohibit the inclusion of spiritual conversations in their practice, in the next chapter I will share the main factors I found in my study that contribute to the inclusion of spiritual conversations in counselling practices.

Chapter 5 – Beyond the Inner Ache: A Space for Spiritual Conversations

This chapter will move beyond the factors that prevent counsellors from engaging in spiritual conversations with adolescent clients and will begin with a description of the personal reasons participants believe including spirituality in their practice is vital. It will be followed by how a practitioner's agency within an organization can help create a space for spiritual conversations. The techniques used by participants to engage in spiritual conversation with their clients will end the chapter. Again, the language of each participant is used as much as possible to highlight individual and communal practices of incorporating spirituality in practice.

Engaged

During each of the focus group conversations it became apparent that participants needed the time and space to discuss the factors that prevented them from engaging in spiritual conversations. However, once participants were able to voice their inner aches they began to describe some of the ways in which they attempt to include spirituality in their practice. From my observations, notes, and reflection, I noticed that often times when a participant was ready to share how they overcame a preventative factor their bodies would shift to the edge of their chair, they would sit up as if someone was pulling a cord from their head to make them taller, and their voices would grow to fill the room with joy and a sense of pride. The body language was just one indication that participants wanted to engage in spiritual conversations. Another suggestion was their shared words, including one participant who stated to her peers as they were leaving the room, *“Now I want to do my thesis in spirituality too!”*

The Need

While exploring personal narratives, participants shared why they believed including spirituality in practice was critical. Katie tells us:

When I was a teen I was in hospital and I had leukemia and I remember asking questions and wondering and really being FRUSTRATED that people wouldn't go there with the conversation and that it was kind of referred off to - well get this person to talk to you about it.

Katie continues to share how now as a practitioner having to refer out to other professionals, such as pastoral care providers, may be closing the door on engaging in spiritual conversations with her clients. In another conversation Olivia shares her personal story and highlights how personal experience influences her practice. She says:

Some of the most meaningful conversations in counselling settings have been born out of conversations I've had in other counselling settings with my own counsellor. So, it was modeled to me in some way and I knew that that had been the most impactful and so I brought that into my own practice. That wasn't something that I learnt in school though, that was something that I picked up, the most meaningful thing to me in my own life was that those kinds of questions, that kind of thinking, [I was] looking at my own spiritual world. And if I didn't bring that into counselling at least as a question like, are you wanting to work on your relationship with God? Is there a relationship you're wanting to develop, work on, how does it play into your life? Then I'm silencing this part of my client without actually bringing any voice to something that's a big part of her [or his] life.

Participants such as Katie and Olivia clearly describe their personal need to include spirituality in their practice. On the other hand, Dr. Scott shares a story about a practitioner in the mist of working with a family on a spiritual and religious level. This narrative takes us beyond a practitioner's personal need to include spiritual and/or religious conversations in practice and allows us to see how clients may also need the opportunity to engage in spiritual and/or religious conversations. The story Dr. Scott shares is of a practitioner, Hilda⁴, who is working with Sam, a fifteen year old who has lost her judgment capacity due to an acquired brain injury. Sam is the daughter of two conservative religious parents, Mr. and Mrs. Phil, who hold strong beliefs regarding sexual practices including the use of birth control. With Sam's lack of judgment and her hormones on par with other fifteen year olds, Sam engaged in intercourse while at a school dance. She openly shares this with Hilda during one of their weekly visits. Hilda devised a plan to discuss her concerns with Mr. and Mrs. Phil and hoped that the Phil's would agree to put Sam on birth control; an option she knew would be strongly refuted. After explaining the situation to the Phil's, Hilda introduced the idea of having Sam placed on birth control and as expected the Phil's disapproved. Hilda consciously walked Mr. and Mrs. Phil through alternative options such as having to care for a potential grandchild, options of abortion, or preparing for adoption. This round about conversation led to the Phil's agreeing to have Sam placed on birth control.

Within this story, spirituality and religion are deeply entangled for this family and so, in addressing one, either religion or spirituality, the other is also being attended to. For example, on one hand, Hilda is working with a family that has religious beliefs against the use of birth control, perhaps based on the teachings of their church. On the other hand, Hilda engages in what may be deemed as a spiritual conversation as she helps the Phil's make meaning of the

⁴ The names used in this story are pseudonyms to maintain the confidentiality of the worker and family.

situation at hand and engages in a discussion regarding the connections and sense of belonging each of Phil's family members, including a potential grandchild, may have to consider if their daughter Sam was to get pregnant. Most importantly, the narrative of Hilda and her client's, the Phil's, was introduced to the focus group and here to highlight that counsellors are engaging in conversations with clients based on spiritual and/or religious beliefs and practices, as noted above.

Diane reminds us that conversations such as the one between Hilda and Mr. and Mrs. Phil can only take place when an agency supports and encourages their practitioners' in engaging in spiritual conversation with their clients. Diane states:

Families who I see cope, who find meaning within this CRAZY crisis are families who have some spiritual conviction and strength and so then knowing that and seeing that it almost seems UNETHICAL in a way to not explore it...I know and have SEEN that it helps and I don't know how it helps and I'm not saying one way is better or worse or whatever but sometimes spiritual beliefs and connectedness and meaning making, WOW, that's a big tool right, to get through things.

Dr. Scott's story and the personal accounts shared highlight the need to include spiritual conversations in counselling practices and challenges the organizational policies that prevent these conversations from taking place. One participant describes how the believed need to include spirituality in counselling practices had him breaking policies in order to ensure his clients received the best care possible. This participant describes how he worked around a policy of not being supported to engage in spiritual conversations with his clients by bringing in a group of teenagers, from outside the group, during a sports program. By having "outsiders" attend the program and providing ample amounts of social time the teens would talk to one another and

every so often a teen would engage in a spiritual conversation with one of the group leaders. Arthur supports the comments of this one participant by sharing how preventative policies can be detrimental. He states:

To ignore spiritual aspects because we're not allowed to touch that, I think it's not as EFFECTIVE or not as valuable for the counselling situation because if [the youth are] wondering about those kinds of questions it's valuable to delve into it.

In another conversation a participant adds to Arthur's comment, stating, there are "*a lot of other sectors in a person's life that they [the medical doctors and psychiatrists] deemed more important or more worthy of exploring [and] supporting which seems so BACKWARDS to me*". The ability to work beyond the factors that prevent participants from including spirituality in their practice and to engage in spiritual conversations with their clients stems from this 'need'.

Agency within an Agency

Olivia shares how the support of her supervisor and the trust she has in her role allows her to participate in spiritual conversations with her clients. She states:

I have a lot of agency though in my own role. I don't have a lot of direct supervision and I'm TRUSTED in my role. I think that's a big part of it, is that my supervisor, I feel trusted and supported.

She continues to explain how in previous employment settings she did not feel supported or trusted and that the lack of support and trust created a different setting and different conversation with her clients, conversations that rarely included spirituality.

Education.

An individual's training can also provide a practitioner with agency. Arthur tells how he often did not face the policies that prohibited other practitioners from engaging in spiritual

conversations because of his position as a Youth Pastor. He describes how being a Chaplain in a hospital setting allowed him to engage in conversations that other staff members, such as nurses, child life specialists, and CYC practitioners, are not privileged to. He does remind us, however, that although he comes from a religious background, his position as a Chaplain, in his mind, was not about forcing beliefs and practices on anyone but being there to *care* for the individual. He states:

To me, if anyone is ever manipulated into that [religious beliefs and practices] or forced into it or anything like that, they're not part of it. It's not reality for them. So, to me, it's just to never force those conversations, to never force it on someone, to respect where they're at.

Arthur's position as a Chaplain and care practitioner who primary care providers can refer their clients to when they want to engage in spiritual conversations places him in a position of privilege. He notes that he maintains an open opinion about peoples beliefs and practices and comments how some people find him “*too wishy washy*” because he is “*not a big fan of*” the idea that “*religions have all these rules...that's part of the doctrine, that's part of the teaching that this is the way it is so [when] you've crossed the line*” you are no longer a good person. Arthur's perspective is important to clarify as it may differ significantly from other pastoral care providers and Chaplains who may hold more strongly to the doctrines and rules set forth by their church or religious community.

Nancy, on the other hand, shares how the beliefs, practices, and education her employer assumed she had because she attended a Catholic high school put her in a position to engage in spiritual conversations that she felt she was not qualified to have. She shares her anxiety to engage in spiritual conversations with adolescent clients when she states: “*it's just the idea that*

you don't know if you can answer that question for yourself and so to help someone else think about answering that question is INSANE" but goes on to say, having spiritual conversations *"got written into my practicum contract"*. Nancy used techniques that incorporated understanding and expressing the feelings an adolescent may experience in their physical body to initiate spiritual conversations. Before further exploring specific techniques used by each of the participants including Nancy, I will describe how the techniques used are born from the relationships participants have with spirituality and their clients.

Engaging in Conversation

Being able to engage in a meaningful conversation requires a *person-to-person relationship*, a "real relationship" as described by Antoniou and Blom (2006). Several of the participants noted that the relationships they had with their own spiritual beliefs and practices influenced whether they included or did not include spirituality in their practices. Olivia in fact tells us how her openness and willingness to engage in spiritual conversations took time and practice. She shares, *"I think it has a lot to do with my progression just internally, like trying the questions out and seeing that there was a lot of traction there, that it was working"*. She continues, *"I really honestly feel when I've been able to actually go to some really good deep places with clients and actually do some quality work it's been from a spiritual place"*. Participants described how their individual relationships with spirituality influenced their practice and how their client-practitioner relationship further informed their practices.

Practitioner's relationship with the spiritual.

A few participants shared how the time they spent challenging and questioning their own spiritual beliefs and practices has encouraged them to engage in spiritual conversations with others. Olivia vividly describes how her search for spiritual beliefs and practices that are

meaningful to her was inspired and supported by her mother and how it has informed her current counselling practices. She recounts:

Growing up my mom practiced her view of spirituality, [which] was more like a LIFE FORCE, so everything was from a life force, a life energy and our view of like a higher power was kind of like a collective energy. It kind of changed to Buddhism 'cause our teacher was a Thai Buddhist but my dad was, grew up Catholic and is still kind of hanging on to that but not necessarily in the practicing way. So I saw the differences between something that was more forced and something that was more supported because my mom was okay with my sending myself to Bible camp to kind of explore Christianity and how that might be and exploring all sorts of different religions to kind of try them out or ways of practicing spirituality. So that understanding of what it was like cause in the moment where my dad said you need to practice [Catholicism], Catholicism was no longer an option for me. In that kind of spiritual place I'm like well if I'm forced I don't feel that that's a safe place for me to be or like leave myself or trust myself to this kind of way of being so I bring that now into my practice in a way of openness and curiosity, like HUGE curiosity as to what other people [believe and practice], their inner worlds and how their exploring things and interpreting things and I think that's what drives it, is the curiosity and really genuine interest cause if you don't care then you're probably not going to ask.

Earlier I shared how Melissa pushed away the beliefs and practices of Christianity. Melissa's exploration of the Christian beliefs and practices and the act of divorcing those beliefs and practices now help her during client interactions. She states:

I think it helped me in some ways to experience [religion] so I have a bit of a frame of reference to what worked for me and what didn't...because I have done my own spiritual stuff. I think that I'm really open to that conversation too, whatever that may be, if it's world people or whatever language people have around [spirituality]...if you've explored your own spirituality or religion and you're comfortable with it then I think you're in a better place to continue those conversations. Maybe not better but maybe more open place.

Katie, in another conversation, speaks about how a practitioner's personal journey to understand and develop their own spiritual beliefs and practices may “qualify” them to have spiritual conversations with their clients. She states:

We're all human so we do grapple with those big cosmic questions and maybe THAT'S what gives us the qualification to sit with someone with those questions. Like, I wonder those questions too and I don't have any answers or like you know I don't have, yeah, to sit with someone else's discomfort because you're okay with sitting in your own.

Katie returns us to the inner ache, describing her desire to want to be able to answer questions, ones own questions and those of others, but also speaks to this ability to sit in a place of discomfort and yearning for more. The struggle Katie expresses is a battle I face while working with my own clients. The young female client I described earlier was constantly looking to me for answers about what the *right* ways to be religious are and what the *right* answers are to “*who is God?*” and “*why has he done this to me?*” in regards to our “shared” religious practices. My personal challenge was to remain neutral and to not let my own questioning of the faith influence her understanding. So for me, answering questions was less important than asking questions, yet I often felt that not answering my clients' questions was, in its own way, saying I did not agree

with her beliefs and practices. I found that I wanted to answer her questions to make things a little easier for her but I did not want her to believe what I believed just because she respected me. I focused on sitting in her discomfort with her while she asked questions and tried to find answers that best suited her needs. This ability to sit in conversations with clients who are asking difficult questions that have unclear answers is what Katie believes qualifies a practitioner to engage in spiritual conversations.

It is clear that the relationship a practitioner has with his or her own spiritual beliefs and practices strongly influences if they include spiritual conversations in practice. Furthermore, the relationship each practitioner has with his or her client will also impact if a spiritual conversation will occur during the therapeutic process.

Client-practitioner relationship.

The client-practitioner relationship has been extensively explored in the literature. Participants also noted that the client-practitioner relationship was critical to the inclusion of spirituality in their practices. Arthur shares how one of his clients requested to work with him because of the relationship he had already built with this adolescent during youth group activities in their church. Katie describes how having a specific relationship with a client can sometimes naturally open up the door to having spiritual conversations, stating, “*it’s very much relationship based*”. She goes on to narrate:

The relationship and the connection and what they [the client and practitioner] had already been through together, cause you do, I mean in the hospital setting you go through hell together right, and you kind of come into a family’s life and you have this weird place, but you’re a part of it but you’re not apart of it and you see them through

and you journey together through the really intense times so yeah, that connection is there in a really strange way.

Katie continues to share a story about how a positive connection between a client and practitioner allows clients to ask questions. Examples of questions participants and I have been asked by clients include: (1) *why me?* (2) *did I do something wrong?* (3) *is this my punishment?* (4) *do you believe in ghosts?* and (5) *can you pray with me?*

Melissa talks about the level of intimacy between a client and herself, stating the clients that are “*newer to me and we have less of a relationship built*” tend to avoid spiritual conversations. However, clients Melissa has “*been working with for six years, we’ve had the conversation many times because I feel I have that level of intimacy and the relationship is just able to go there in a more COMFORTABLE way I guess*”. Olivia echoes Melissa’s point about the importance of spending time building a relationship with each client and adds, “*I don’t think [my client’s] could have [a spiritual conversation] had we not had a relationship that was a safe place for her [or him] to talk about [spirituality] in that way*”. A bond that is built over time appears to be a crucial component in creating a space for clients and practitioners to engage in spiritual conversations.

Techniques

In this next section I will describe the specific techniques participants said they used to engage in spiritual conversations. It is important to comment that many participants mentioned that they were unsure of how to include spirituality in their practices, because of personal and organizational challenges, but the techniques used are a way to address a need they see.

Attracting spiritual conversations.

Participants stated that one of the key techniques to initiate a spiritual conversation is to ask questions. The following are examples of questions participants said they regularly use in practice: (1) *how have you drawn on spirituality?* (2) *beyond your family, what community of support do you have?* (3) *how does spirituality play into your life?* (4) *how do you usually cope?* (5) *what do you usually do to get through other hard times or those kinds of questions?* A few practitioners noted that they would ask these questions within the first interaction with a client. Olivia tells us that she often asks a question regarding spirituality in four or five ways to see if a client will latch onto the concept. If a client does not engage in spiritual dialogue during an initial conversation, Olivia says she will reintroduce the topic, through questions, in a following session(s) to see if a client is ready and willing to engage in the conversation.

The use of questions also allows practitioners to use the language of their clients. Many of the participants stated that they attempt to use the language of their clients, whether that means using words like the *world people* or discussing feelings in one's body. One participant describes why using a client's language is critical and allows for synchronicity between a client and practitioner. She states:

I think asking the questions [and having answers] from their own experience, interpretation, definition, then they can language it. Then it's not just another experience of drawing from a professional's viewpoint of something and trying to fit into a box. Like okay, well the professional wants me to jump into this definition of [spirituality] so here you go, but they need the chance to work through [the definition] on their own.

Melissa also speaks about how using client language and being in sync with another individual can open the door for spiritual conversations to take place. She describes how during

her Masters thesis research the idea of spirituality came up without her being aware of it or asking questions around spirituality. She states, *“it came up in conversation and I wasn’t looking for it and I wasn’t asking for it but spirituality came up”*.

Nancy addresses the difficulty to vocalize feelings in a distinct way. She tells us about the unique manner in which she engaged in spiritual conversations because of the challenges her clients have to grasp the concept of spirituality, perhaps because of their disabilities. Her clients and her *“ended up just spending a lot of time working on what can we think about and do with our brains while our families are practicing spirituality”*. Nancy continues to share how the questions she would ask would be more about the physical body and the feelings in each part of the body. *“I would ask or we would talk about, how does your belly feel? How does your heart feel? How do your muscles feel when this is happening and sort of go from there to better understand their experience?”* She does spend a few moments cautioning us about her personal lens and how it influences her understanding of what her clients are sharing with her. She notes:

I mean that still is coming through my filter, obviously my stomach maybe feels one way when I experience what I think is spiritual but it sort of lets me imagine, okay well how do I feel when I feel like that, maybe now I can better relate to [my client].

Alternatively, Arthur says that he often uses the *“practice of presence* and being with people to build a comfortable and working relationship. He says, *“sometimes just being with people, being quiet with people if they want to be quiet, I’d say that would be a technique...getting to know them through silence”*. Arthur also introduces the idea of getting to know a client through activities, such as reading books, playing a sport or video game with a client, and during car rides. Other participants add to Arthur’s list and include conversations during meals and snacks, while making a puzzle together, or during arts and crafts. Olivia

mentions that artwork is a “*BIG one*”. When asked what she “*thinks it is about art that allows for meaningful conversations to occur*”, she responds with:

I think there's a couple things depending on the child. Sometimes when they're at, in art it's because they've had difficulty doing face-to-face work and so it allows the safety of still talking and having a relationship and not having to have the direct, like, talk kind of therapy. The other piece is that it really draws on the imagination part and a lot of the kids at the shelter, they've been in a really hyper vigilant kind of violent situation so they might not have had that chance to be exploring [their feelings].

Another participant inserts, “*the creativity allows space for more critical thinking*”. Olivia continues to explain how drawing gives children and adolescents another opportunity to express their feelings. She comments:

It brings in, like the kids who are, like, I'm just feeling this and I'm, like, would it help to draw it. They're, like, YES it would help to draw it and their able to draw this [feeling], it almost adds that abstract piece, like this is the world crashing down on me but I couldn't have said that, I needed to draw it.

A few participants also engage in a conversation about building a bond with others and having a sense that you are *doing life with* the support of another person. A participant describes this notion of *doing life* as the chance to engage in caring conversations with others and “*there's something there, a bond that's formed and in bonds I believe there's strength...you build a bond with someone and you have someone that you are doing life with*”. Another participants' response to the idea of *doing life with* another is as follows:

I like what you said when you said that it's like giving a teen someone to do life with because I think that that's very VERY accessible for youth to understand and I think it's

also important in diverse groups of youth. Like, I know I don't practice necessarily in, like, a faith based practice or anything so you know we have youth from all different places and I think back to uh I was coaching a girls hockey team and our girls were wired and it was a BIG game and they were stressed and things were not going well and it was a disaster. We just took a couple minutes and we all sat down together and we decided we were going to NOT talk for about 40 seconds. We were just going to think and it changed, just sitting there, not saying anything and all our girls together changed our team dynamic. It gave them time to reflect and it reminded them that even if you're fighting with this person we need to be together to win this game and it might not have been overtly spiritual but it gave them someone to know they were doing LIFE, doing this with and it helped.

This response not only shares the importance of having others, including friends, family and practitioners, to *do life with* but it highlights Arthur's point about being able to build a positive relationship through the "*practice of presence*".

Through the shared conversations, it became apparent that the individual techniques described by the participants were often used in combination with one another. For example, a couple of participants shared how they would ask their clients questions and then provide their clients with the opportunity to respond through artwork. Although the techniques used to engage in spiritual conversations varied based on the client-practitioner relationship, the agency a practitioner is employed by and the individual techniques used, it became evident that participants are starting to find ways to work around the factors that prohibit the inclusion of spirituality in practice.

Chapter 6 – Building the Bridge: Discussion

The exploration of how practitioners include spirituality in practice is growing rapidly. Books such as *Spiritual Resources in Family Therapy* (2nd Ed.) edited by Walsh (2009), and articles written by Holden (2012) and Dalton (2009) are presenting a shift from understanding that there is a need to include spirituality in practice to expressing *what* practitioners do with their clients. Based on the three focus groups, the two previous chapters described the specific factors that prevent and support counsellors in including spirituality in practice with adolescent clients. While reviewing participants' stories, listening to their frustrations, and exploring the ways in which they attempt to include spirituality in their practice, it became clear that many of the ideologies that prevented the inclusion of spirituality in practice also acted as motivating factors in finding ways to include spirituality in practice. In this chapter I will explore the overarching factor of personal experience and how it influences the inclusion of spirituality in practice. The chapter will end with an overview of some implications and recommendations for future practices.

Hoskins and Stoltz (2005) share the tension I am struck with, stating, "The purpose of our research is often to improve clinical practice, and we find ourselves working with issues that are deeply personal and private for our participants. Participants have a lot at stake in this kind of research" (p.96). I fear offending the study participants by misinterpreting their personal narratives or potentially incorrectly representing their contribution to the research. In order to remain respectful of the personal and private accounts shared within the focus group conversations and to avoid over emphasizing and misinterpreting the words of participants, I will include snap shots of my own experiences and perspectives to help highlight the presented key-

factors. The language of each participant will continue to be used where appropriate, similar to the two previous chapters.

Provoking an Overall Variable

While reviewing transcripts from each of the focus group conversations, I initially created a venn diagram to help me decipher between what factors participants said prohibited and contributed to the inclusion of spirituality during therapeutic conversation with adolescent clients. (see Figure 1).

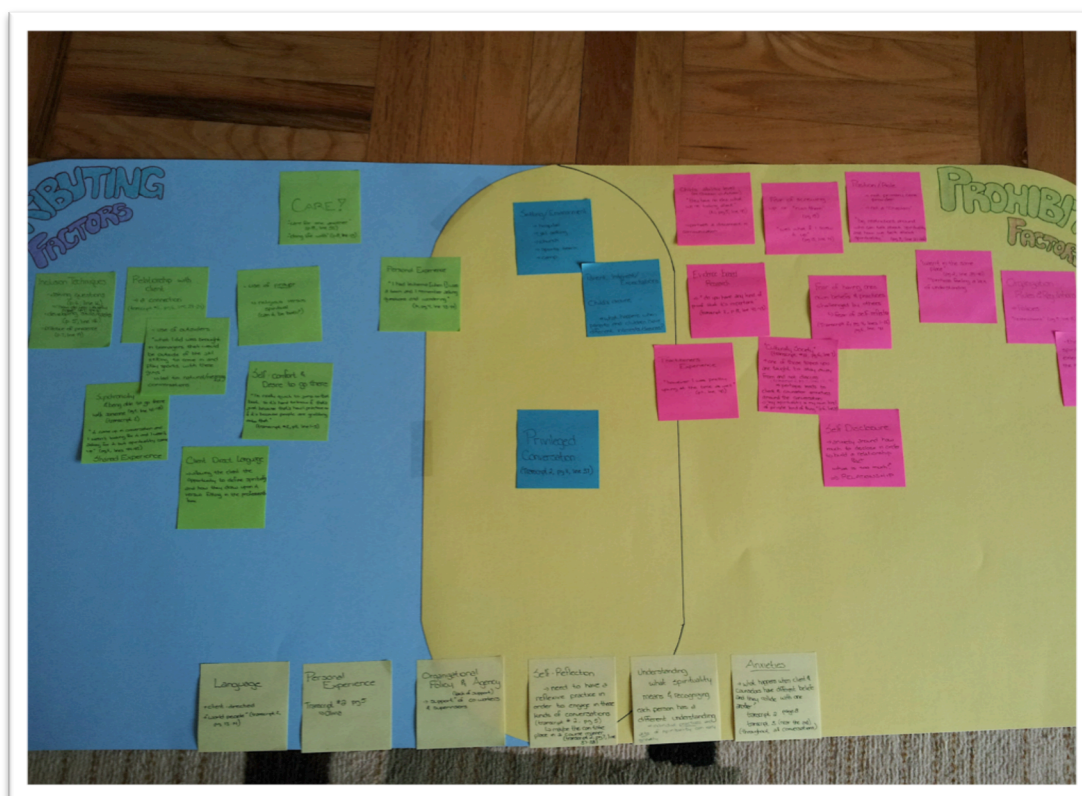


Figure 1 Contributing and Prohibiting Factors

Majority of the comments could be placed on a distinct side of the diagram but most of the comments also linked to the overarching factors, the middle section of the diagram. How personal experience, self-reflection, and education can simultaneously act as contributing and

prohibiting factors appeared as the overarching factor in this study. Prior to participants sharing their own experiences and stories with me, a few participants felt it was necessary to engage in a discussion regarding the language used. This is where I will also begin.

Languageing “spirituality”.

The challenge of defining terms, such as counselling, opened up dialogue around the language practitioner’s use with their clients. As seen in the previous chapter, it is critical for clients to define spirituality on their own and for practitioners to use the language that their clients bring to the conversation. In Holden’s (2012) research she notes that the use of “spiritual language which is non-biased and non-value-laden” and is introduced by the client is critical when connecting with clients (p.71).

Results also indicate that a practitioner who refrains from speaking about spirituality or perhaps speaks negatively about spiritual beliefs and practices may cause a client to begin to believe negatively and refrain from speaking about spirituality all together. When a practitioner remains positive and welcoming of spiritual conversations, a client may feel more comfortable engaging in spiritual conversations and may use their spiritual belief and practices as positive coping mechanisms to deal with the challenges they are facing (Holden, 2012).

To help showcase how a practitioner’s willingness, or lack of willingness, to engage in spiritual conversations impacts the conversations practitioners have with their clients, I will share an experience I had with the adolescent client I introduced in Chapter One. I was continuously tiptoeing around the idea of remaining positive and welcoming to the language, beliefs, and practices of my client while grappling with my own understanding of similar language, beliefs, and practices. In one focus group conversation, where I shared my experience in detail with the group, a participant responded by stating:

I'm just wondering where you guys are seeing that the challenges are coming from around not being able to be open and honest about ones spirituality and where one stands within their faith, you know like in your situation. Where was the hesitancy to originally at the very beginning being able to say to the girl, you know what, this is what I grew up in and right now my journey is, I'm looking at alternatives. I'm looking at what that means to me...that's about open honest communication, right.

Part of the challenge I faced was the interknitted family and client factors that played out in my client-practitioner relationship with this specific client. Another aspect was attempting to remain within a strength-based practice approach. I shared my struggle with the group, stating:

There was a respect between me and my client because she had IMMEDIATELY, she had so MUCH TRUST in me because I was part of this community [the Ismaili community my client was also apart of] that had I very quickly said oh I'm questioning [our beliefs and practices] my fear was that she would have backed out. Perhaps maybe that would have been a positive thing but maybe that connection to her spiritual beliefs is also a positive thing, so, I was tiptoeing around this idea. Do I encourage her to kind of move away from the community or do I encourage her to stay in a safe space?

Dr. Scott adds to this and highlights the need to work from a strengths based approach. He shares:

[The] goal is always what are the strengths that that person's bringing to the crisis that I can help them develop or draw on? If one of their strengths or one of their family strengths is some dependence on religious tradition, ritual, ceremony, prayer, what's wrong with using that to help them, support them through the crisis that they're in and how do I help them use that as a strength without MY own location interfering in that

process even if I agree or disagree with their location. And that's the challenge of this, like how do I, it's that professional responsibility to hold yourself in respect of their need.

The conversation described above between Dr. Scott, research participants, and myself regarding the use of client language, being open and honest about personal beliefs and practices, and remaining within a professional client-practitioner relationship, stresses the overarching factors that emerged in my research. Each of the focus group conversations, especially the section shared above, caused me to wonder about how a practitioners' experience, including my own experiences, influence our clinical practice.

A fine line: spiritual conversations or meaning-making processes.

The spiritual involves meaning making, a sense of purpose, a sense of connection, and a sense of belonging, as described earlier. Based on this understanding of the spiritual, during spiritual conversations with clients, practitioners attempt to support participants during processes of understanding or making meaning of a particular situation, during periods of attempting to find one's purpose in life, or while struggling with feelings of not belonging. This process can also fit into other models of counselling practices, especially those who position themselves within the narrative therapy framework. However, the distinction I make between spiritual conversations and the meaning making process that occurs during narrative practices is that spiritual conversations are based on the relationship an individual has with other humans, non-humans, and "other than humans", which may be a divine figure or can include all the possible other than human presences in life and the natural world (Apffel-Marglin, 2011, D. Scott, personal communication, June 2012). Spiritual conversations address *cosmic questions*, such as 'does God exist?' and addresses an individual's relationship with the universe and ultimate reality (Sheridan, 2008). Therefore, spiritual conversations go beyond the relationships created

in day-to-day interactions that narrative practices may focus on and transcend beyond the individual.

Formulating Practice Through Experience

I had assumed that the therapeutic relationship would have had the most impact on a practitioners' beliefs regarding including or excluding spirituality in their practice, however, the research clearly showed that the personal experiences of participants played the greatest part in the reasons why they felt including or not including spirituality in practice was critical. The time spent reflecting on periods in participants lives when they pushed religion and/or spirituality away, such as when Melissa decided to divorce the Christian community as an adolescent or when Katie questioned why practitioners would not engage in spiritual conversations with her while she was battling leukemia as a teen, has now influenced Melissa and Katie include spirituality in their clinical practice. Others, such as Nancy who presents an uneasiness in regards to her personal understanding of her spiritual beliefs and practices, tend not to initiate spiritual conversations with their clients. Yet, individuals such as Arthur who has been trained and provided ample space and support to reflect on his spiritual beliefs and practices, practice from a religious and/or spiritual framework in pastoral care. Or participants such as Olivia who was supported throughout her life to search for beliefs and practices that provide meaning now realizes that her supported search was beneficial and is something she wants to offer to her clients.

Additionally, the time spent reflecting on personal beliefs and practices significantly influenced how participants viewed, responded to, and approached spiritual conversation with their clients. For example, Olivia speaks about how her own experience of engaging in spiritual conversations with her counsellor encouraged her to reflect on the impact it had in her own life

and find techniques to include spirituality in her practice. For myself, I started to recognize that it was at a similar age to my clients when I first started to openly question religion and wished there was someone to talk to. This realization made me more conscious and open to spiritual conversations when working with adolescent clients. It is through self-reflection that practitioners are able to attend to their client needs. Silverman (2008) states, “As the diarist Anaïs Nin succinctly noted: ‘We do not see things as they really are. We see things as we are.’ Therefore, the better we know ourselves, the better we can know and be helpful to others” (p.92). Methods used to self-reflect vary from person to person. Some reflect during conversations with supervisors and peers, others by writing in a journal, while others use sport, poetry, song, narratives, paintings, or dance to express their thoughts and feelings (Hickson, 2011).

Focus group reflecting.

For some, the focus group conversations turned into a place where they could engage in reflection once they developed a sense of comfort and safety within their group. Hickson (2011) explains Schön’s (1983) distinction between “reflection *in action*” and “reflection *on action*”, and that the first “is the thought that we take whilst involved in a situation, during which we become aware of what we are thinking, feeling, and doing” and the latter “takes place sometime later, when we consider the events that took place, and recall what we were thinking, feeling, and doing” (p.831). During the focus groups I witnessed both “reflection *in action*” and “reflection *on action*” as participants jumped from thought to thought and question to question, often times returning to a question or thought discussed an hour prior. For example, one participant asks about meaning making that occurs within a community, stating:

What is spirituality beyond a sense of community and meaning making? For example, if you have a different practice whether it’s philosophical for example and you have a

community around it and MEANING making practice around it, does that not hit into spirituality especially if it's something around more than human interconnectedness?

Others, such as Susan ponder how to incorporate her own beliefs and practices in her work while not pushing her spirituality on others and being respectful of the beliefs and practices her client holds. Susan's open reflection provokes Lanny to question her ability to work with someone with beliefs and practices she does not agree with. The provoking of questions and exploring how one can leap from knowing that spirituality is vital in counselling practices to how each practitioner sees themselves including spirituality in their practice is what Hickson (2011) speaks to when she notes that "reflection is used as a theoretical and practical concept for enhancing expertise" (p.830).

Engaging in conversations with peers provoked some participants to question if it is necessary to address spirituality in practice. A few participants noted that it would be difficult to engage in spiritual conversations with their clients because they themselves did not feel grounded in their own beliefs and practices. These participants appeared to still be grappling with their own spiritual beliefs and practices and showed how self-reflection, or exploring our experiences as 'critical', "which conjures up a focus on the negative aspect of an interaction or experience" (Hickson, 2011, p.832) can prevent practitioners from including spirituality in practice. Yet, others walk themselves through thought processes that reinforce reasons to not talk about spirituality with clients including social norms to avoid conversations regarding politics, religion, and sex or being taught that religious and spiritual beliefs and practices are private. For some, they voiced how they and others they know did not engage in spiritual conversations because of not knowing how to begin a conversation about spirituality. Others,

including myself, feared being judged based on our beliefs and practices or because we questioned the beliefs and practices of our families.

The fear to include spirituality in practice became the focus and starting point for much of the reflection that occurred during the focus groups. One participant states, *“I feel like our fears and anxieties and our ethical considerations would allow or would cause us to maybe step back and say I don’t want to go in there [to have a spiritual conversation]”*. A little later on in the conversation this same participant mentions:

At least in the last two decades [spirituality’s] been incredibly heightened through Hollywood...I think the emphasis, the anxiety that comes from it, that’s a lot of what stops you, is the anxiety and the fears I think and the not wanting to be apart of that history [of residential school and propagating religion]. Or a fear that someone’s going to suggest you are apart of it even if you are trying to be caring. But there’s got to be a difference between...propagating your own religion and having a spiritual conversation or letting people guide the conversation and being willing to go wherever they go.

Souze (2002) also reveals that master’s level student counsellors lacked the confidence and comfort to engage in spiritual conversation because of the “fear of offending or being judged personally” (as cited in Plumb, 2011, p.5). Yet, within the helping profession an increase in clients who bring spiritual issues and concerns into the therapeutic relationship challenges dominant discourses of excluding spirituality in practice (Holden, 2012).

In one focus group a couple of participants engaged in a conversation regarding assumptions and the fear of imposing or implying that a client has a specific belief or practice. This fear may be provoked when a practitioner’s self-reflection is incomplete or falls on the *dark side* of critical reflection (Brookfield, 1994). Holden notes “that self-reflection can result in

people being seduced by their own stories and beliefs, and therefore, [they] are not able to critically analyse their assumptions” (2012, p.832). The inability to critically analyze one’s own assumptions, beliefs, and practices, or being stuck in the process of self-reflection can therefore impact the questions practitioners ask their clients. So, I wonder, how do we ensure our reflections remain beneficial and help enhance our practice?

The following is a look at the conversation the two participants had regarding making assumptions about client’s beliefs and practices through asked questions. One participant identified that he is comfortable with his own spiritual beliefs and practices and has found ways to incorporate spiritual conversation in his practice while the other appeared to be less comfortable with her own beliefs and practice and more anxious about incorporating spiritual conversations in her practice.

P1: *I’m not only making an assumption that perhaps someone practices this faith but I’m making an assumption that they practice a faith and that could very well be incorrect. So I would personally never steer a conversation or ask that question [do you have a religious or spiritual practice?]. I would wait for it to come up.*

P2: *That’s interesting. So yeah, you wouldn’t...if someone was saying things then you’re kind of like, oh, it seems as though their heading in this direction, it seems like they fit into that box or whatever [a religious practice], you wouldn’t ask the question of okay, well do you go to a church? You wouldn’t say something like that? You’d wait for them to say I’m going to a church and then if they said that you wouldn’t then ask, okay, what kind of church is it? Again, you’d let them...if they revealed that then they revealed it but you [wouldn’t] steer in that direction?*

P1: *Yeah, I would agree with that because I don't, I would never want to ask do you go to church because that assumes that faith and spirituality is bound, not bound but occurs within a church and I think that, at least once I get that in my head it's hard for me to think it happens other places as well...I mean I assume probably incorrectly that that's the same for other people, that once they get this idea of church in their head that it's hard to like, oh you know maybe you're spiritual when your outside or...maybe other places.*

Perhaps for this one participant, their discomfort with their own religious or spiritual beliefs and practices or personal experience of experiencing the negative effects of cultural assumptions has them distancing themselves from religious and spiritual conversations with clients. I have to wonder if a positive and supportive atmosphere for this participant to reflect on their beliefs, practices, and experiences would help them overcome some of the anxieties and encourage a shift in their practice to include spirituality.

My critical reflection provoked by participants.

In order to stress how one or more individuals narratives and the readings we engage with can influence another individuals' story, in this section I will share how my study participants provoked me to reflect on my own experiences. My own experience is used in order to avoid misinterpreting participants narratives and to highlight how conversations with others helps us see different perspectives that we may not be aware of during individual reflection.

Each time a participant described a technique used to engage in spiritual conversations with their clients I was surprised. The initial thrill I felt was because participants effortlessly moved beyond speaking about their fears and anxieties regarding spirituality and counselling practices. I was further surprised by a few participants who admitted to breaking organizational

policies, often without second-guessing if they should or not, in order to engage in spiritual conversations, as described in chapter five. The conversations the participants were engaging in had me wanting to return to my own notes scribbled in my journal about the spiritual experiences I engage in with clients. I wanted to test my own assumptions, to dig deeper and understand my reactions to the social and organizational contexts I found myself in when initially grappling with how to include spirituality in my practice, and mostly I wanted to find a way to adapt my own practice (Gardner, 2009). My own self-reflection and critical analysis in an attempt to identify deeper meaning and values that sustain my practice (Gardner, 2009) reaffirms my desire to incorporate spirituality in my current practice with adolescent clients.

While grappling with and challenging the beliefs and practices I was taught throughout my life, I explored other religious and spiritual practices including Buddhism and Hinduism. I was intrigued by the use of incense, candles, and other fragrances that are used in Islam, Buddhism, Hinduism, and other religious groups. During this time I was also working with a young client who often seemed anxious and distant during our play therapy sessions. While I was exploring what it was about candles that most intrigued me, I realized that it somehow created a sense of calm in my life and wondered if it would do the same in my client's life. So, without further ado I decided to bring in a candle to our next session and to place a few rocks around the candle, more for décor than anything. Once my client noticed the candle he immediately gravitated to the table it was placed on, picked up a rock, and began to talk. Out of nowhere he started to share with me the abuse he witnessed, the fears he held inside, his desire for his parents to remain in a relationship, and much more. The session flew by with me only speaking a few words. At the end of the session this young client asked if he could keep the rock he had in his hand, it had the word *believe* engraved on it, and as I said *yes* he calmly blew out

the candle. In a following session I asked what it was about the candle that comforted him. His response was surprising and inspiring. He simply said: “every night I pray with a candle on and the smoke takes away my fears and the flames capture my hopes and sends them to God”.

Following my readings of Holden (2012) and Gardner’s (2009) articles, I stopped to critically explore what really intrigued me about candles and incense. While I engage in stage one of the critical reflection model used at the Centre for Professional Development at LaTrobe University in Australia as described by Gardner (2009), I realized it was the colors of the flames that caught my attention and it was something I now recognize I connected with at a very young age. Through critical reflection I have come to realize that the fire acted as an “other than human” (D. Scott, personal communication, June 2012) in my world. For me, the flames, the red, orange, green, and blue colors created a space of calm, the sparks attached themselves to the multiple thoughts that seemed to ignite in my mind, and the smell removed me from my setting and took me beyond my imagination. I was able to stop and think about things like *who is God?* and *why do I have to believe in Allah?* without the fear of having others know I was questioning my family’s and my religious beliefs and practice. As I aged and spent more time in front of flames the questions got deeper and the yearning to understand and learn more grew stronger. Now as I practice with adolescent clients I attempt to find the physical objects in their lives that calm them, that allow them to go to a deeper place, and that push them beyond our physical setting and take them to a place they desire to be.

Under the appropriate conditions critical reflection and self-reflection can be extremely beneficial in helping professions. On the other hand, Yip (2006) cautions practitioners to be aware of the conditions in which one self-reflects, as it can be detrimental to one’s personal and professional development. Yip shares that “oppressive social environments, demanding work

environments, social workers' unresolved past trauma as well as social workers' poor physical and mental health" are all considered "inappropriate conditions" for self-reflection (p.783). She further expresses how "Self-reflection reawakens the social worker's personal weakness and inner conflicts" and if done in an inappropriate environment can lead to transference and counter-transference during clinical practices potentially causing practitioner and client harm (p.784).

Moving Beyond The Self - Educational Training

Many participants spoke about their frustration with the lack of training they have received during their educational training at the university level. A few noted that the lack of training added to their fear of engaging in spiritual conversations with clients, claiming that they feel incompetent and under qualified to engage in such perplexing conversations with adolescents. Holden (2012) claims that many helping professionals feel ill prepared "to respond to this new and urgent cry for spiritual meaning" (p.68) that many clients bring with them into the therapeutic relationship. Feelings of not being competent to engage in spiritual conversations may stem from practitioners failing to feel grounded in their own beliefs and values, feeling that one's own spiritual questions are not answered therefore making them incapable of engaging in spiritual conversations with others, or by not having the need or opportunity to explore one's own beliefs and practices. These personal feelings appear to prevent practitioners from initiating spiritual conversations through question asking. In order to fight these feelings of incompetence one participant states that:

There needs to be a course on supporting kids and youth just so you can have your own exploration and exploring what those conversations look like and cause, of course, every conversations going to be different and how to set yourself up so you feel safe and

sometimes people don't identify with that and that's okay but at least the conversation took place. Yeah, I don't really think at all we're supported. I think that there's not any training.

Due to feelings of being unsupported and being incapable of engaging in spiritual conversations with clients, practitioners often feel the need to refer clients to others, such as pastoral counsellors. Plumb (2011) notes that many practitioners “[refer] to the dimension of spirituality as being the arena of spiritual leaders and mentioned the necessity to refer spiritually-minded clients, while other emphasize competence in this area as being associated with the necessity of training in pastoral counselling” (p.11). Katie, however, reminds us that referring clients to spiritual leaders may close the door to spiritual conversations all together as clients may not want to speak to another professional due to the lack of a relationship and may no longer feel safe speaking to their initial caregiver who referred them because of a sense that spirituality is a taboo subject or a subject “to be dealt with in isolation from [a person’s] other needs” (Dalton, 2009, p.985).

Alternatively, having to refer clients to those viewed as more competent, for example a pastoral care provider, does not always reflect negatively on a practitioner. As Dalton puts it, “I would argue that a competent counsellor is one who is aware of their own limitations in the therapeutic process and who is willing to seek additional assistance for a client if necessary” (2009, p.985). In conclusion, it is vital that practitioners receive training regarding spiritual issues (Hall, Dixon, & Mauzey, 2004) in order to increase their comfort and confidence levels to engage in spiritual conversations that will in turn help enhance clients’ quality of life by increasing coping strategies and decrease depressive symptoms and anxiety levels (Faiver & O’Brien, 2004).

Implications for Practice

With the rapid growth of knowledge and increased literature suggesting that spirituality is a vital part of a person and should be incorporated during holistic care practices, it is evident that practitioners are now finding ways to incorporate spiritual conversations in their practices with adolescent clients. This section will begin with a look at some questions that were provoked by the data. Following this are suggestions to help practitioners build the bridge between knowing that spirituality is a critical and important part of counselling practices and implementing spiritual conversations in practice.

Thoughts To Ponder

Many of the results had me searching for more, specifically in terms of moving from theory to practice. As White (2007) may say we are aware of the *knowing* but how do we move forward to the *doing* and *being*? The following are a few questions that may help practitioners fuse together theory and practice.

- If we, as practitioners, do not provide an opportunity for our clients to define spirituality, are we able to engage in a meaningful and spiritual conversation with our clients?
- How can we provide reflection during and following our practices?
- How do we ensure our reflections remain beneficial and help enhance our practice?

Recommendations

Spiritual beings.

One participant reminded me that the first step to including spirituality in practice is to acknowledge that children and youth are spiritual beings. It is unlikely that a practitioner will engage in a spiritual conversation with a client they have deemed as unable to be spiritual. In fact, Maslow after the birth of his first grandchild “became convinced that even young children have the capacity for epiphanies and numinous moments” (Hoffman & Ortiz, 2009, p.472), recognizing that children are capable of being spiritual. Dalton, although primarily focusing on adults, shares how “spirituality is part of the person, it is a part of what it means to be human and it can find expression and fulfillment in many different ways” (p.979). Faiver and O’Brien (2009) also note how “spirituality is an innate human quality, a vital life force that we not only possess, but also experience” (p.26). Another indication that children and youth are spiritual beings is the multiple publications within the *International Journal of Children’s Spirituality* including an article by Scott (2011) who states, “the spiritual is always evident if we choose to notice it” (p.294).

Recognizing that children and youth are spiritual beings encourages practitioners to prepare for dimensions of spirituality to enter the therapeutic process. Without bringing aspects of spirituality into practice our clients may sense that it is not safe for them to bring spirituality into the therapeutic relationship. Therefore, as practitioners we would be doing a disservice to our clients. Without acknowledging that children and youth are spiritual beings practitioners will not find it necessary to obtain educational training in spirituality, will refrain from moving beyond the tick boxes on client intake forms to exploring spiritual beliefs and practices further, and may potentially miss how spiritual beliefs and practices can be benefiting or harming their

client. The potential harm that may arise because of religious and spiritual beliefs and practices did not appear in my research beyond transference and counter-transference practices, however authors such as Hall et al. (2004) and Miller and Thoresen (2003) explore the negative aspects of spirituality.

It is also critical for practitioners to be aware of the specific spiritual beliefs and practices of each of their clients. By taking the time to build a therapeutic relationship with clients it allows practitioners to draw on the strengths an individual's spirituality may provide for them. Plumb also emphasizes practitioners need to be aware of their clients spiritual beliefs and practices by stating:

A thorough assessment is necessary in professional practice when considering using spiritual interventions with clients, as it helps the therapist to understand 'the client's belief systems, values, and religious practices' in order to 'engage the client in a way that is ethno-religiously congruent and that does not potentially violate their religious tradition and practices'" (Eck, 2002, p.269 as cited in Plumb, 2011, p.4).

Practitioner support.

The support practitioners receive throughout their educational training and career is also vital in ensuring that spiritual conversations occur in practice. Sheridan (2009) noted that in fifteen studies 66% to 89% of respondents claimed they received little to no educational training in regards to spirituality during their social work education. As suggested above, incorporating spirituality into counsellor training is essential to ensure clients receive the best care possible.

Beyond educational support, the support provided by supervisors and co-workers is vital. Support can be provided in a variety of facets including supervisors providing practitioners with the time to engage in spiritual conversation with their clients and peers, providing resources to

help practitioners understand and learn about different spiritual beliefs and practices, encouraging a network group of pastoral care providers, social workers, CYC practitioners, and others that can engage in dialogue regarding spirituality, and promoting spiritual practices. Longo and Peterson (2002) have noted that: “Professionals who feel anxious about exploring spirituality can follow simple clinical guidelines” (p.335). If guidelines, assessments, and training on how to use them are available for practitioners, practitioners may feel more supported and less hesitant to include spirituality in their practice.

Lastly, if practitioners are given the individual and collective time and space to engage in critical reflection regarding their own spiritual beliefs and practices as well as their experiences in practice, it is likely that practitioners will feel more comfortable with their own beliefs, practices, and experiences and be less concerned about transference and counter-transference when in practice.

Policy adaptation.

Due to the increase in spiritual engagement by North American youth (Bibby, 2009; Bibby & Posterski, 1992; Denton et al., 2008; Roehlkepartain et al., 2008), it is important that practitioners are supported by organizational policies to provide best care through holistic means, including the spiritual aspects of clients. Dalton notes that “The counselling process needs to take into account the notion that the younger person is more than body and psyche” and that practitioner’s must recognize the person as body, mind, and spirit (2009, p.985). Organizational policies can support practitioners in engaging in holistic care by adapting policies to allow practitioners to engage in spiritual conversations with clients (Holden, 2012). Perhaps this means that practitioners should be given the space in clinical files to discuss spiritual beliefs and practices of clients as well as space to engage in critical reflection individually and collectively.

By expanding policies to allow practitioners the time and space to engage in spiritual conversations with clients and to engage in critical reflection with peers, organizations will help link theory and practice and professional codes of ethics to organizational codes of ethics. For example, many participants noted that it was *against policy* to engage in spiritual conversations with their clients, that spiritual conversations were beyond the practitioners' role. However, many practitioners also mentioned that their professional codes of ethics, for example the CYC code of ethics, requires them to create individualized programs for children, youth, and families that help meet their physical, psychological, cultural, social, and *spiritual* needs (Association for Child & Youth Care Practice, 1995). Because CYC practitioners are mandated to include spirituality in their client care it would be unethical for agencies to continue to prevent practitioners the time and support to include spirituality in practice.

In summary, understanding the factors that contribute to and prohibit counsellors from engaging in spiritual conversations with adolescents is just the beginning. Further exploration as to the reasons behind why academic institutions do not include spirituality in their curriculums and why agencies prevent practitioners from including spirituality in their practice is essential. Finally, by exploring reasons why and the methods practitioners have to include spirituality in their practice, I hope to see a shift in policies and practices for CYC workers, social workers, child life specialists, and other care providers that will allow them to openly include spirituality in practice.

References

- Adams, K., Hyde, B., & Woolley, R. (2008). *The spiritual dimensions of childhood*. London: Jessica Kingsley Publishers.
- Anderson, H. & Gehart, D. (2007). *Collaborative therapy: Relationships and conversations that make a difference*. New York, USA: Routledge, Taylor & Francis Group.
- Antoniou, A.S. & Blom, T.G. (2006). The five therapeutic relationships. *Clinical Case Studies*, 5(5), 437-451.
- Apffel-Marglin, F. (2011). *Subversive spiritualities: How rituals enact the world*. New York, NY: Oxford University Press.
- The Association for Child & Youth Care Practice. (1995). *Ethics of child and youth care professionals*. Retrieved from:
<http://www.acycp.org/standards/CYC%20Ethics%20Code%20Rev%209.2009.pdf>
- Axline, V.M. (1974). *Play therapy: The groundbreaking book that has become a vital tool in the growth and development of children*. Toronto, Canada: The Random House Publishing Group..
- Balmforth, J. (2009). 'The weight of class': clients' experiences of how perceived differences in social class between counselor and client affect the therapeutic relationship. *British Journal of Guidance & Counselling*, 37(3), 375-386.
- Benson, P.L., Roehlkepartain, E.C. & Rude, S.P. (2003). Spiritual development in childhood and adolescence: Toward a field of inquiry. *Applied Developmental Science*, 7(3), 205-213.
- Bibby, R.W. (2001). *Canada's Teen: Today, yesterday and tomorrow*. Toronto, ON: Stoddart.
- Bibby, R.W. & Posterski, D.C. (1985). *The emerging generation: An inside look at Canada's teenagers*. Toronto, ON: Irwin Publishing.

- Bibby, R.W. & Posterski, D.C. (1992). *Teen trends: A nation in motion*. Toronto, ON: Stoddart.
- Bibby, R.W., Russell, S. & Rolheiser, R. (2009). *The emerging millennials: How Canada's newest generation is responding to change & choice*. Lethbridge, AB: Project Canada Books.
- Boynton, H.M. (2011). Children's spirituality: epistemology and theory from various helping professions. *International Journal of Children's Spirituality*, 16(2), 109-127.
- Breton, R. (2012). *Different Gods: Integrating non-Christian minorities into a primarily Christian society*. Canada: McGill-Queen's University Press.
- Brookfield, S. (1994). Tales from the dark side: a phenomenography of adult critical reflection. *International Journal of Lifelong Education*, 13(5), 203-216.
- Bruce, A., Sheilds, L. & Molzahn, A. (2011). Language and the (im)possibilities of articulating spirituality. *Journal of Holistic Nursing*, 29(1), 44-52.
- Campbell, R., Sefl, T., Wasco, S.M. & Ahrens, C.E. (2004). Doing community research without a community: Creating safe space for rape survivors. *American Journal of Community Psychology*, 33(3/4), 253-261.
- Caputo, J.D. (2006). *Philosophy and theology*. Nashville, USA: Abingdon Press.
- Clandinin, D.J. & Huber, J. (in press). Narrative inquiry. In B. McGaw, E. Baker, & P.P. Peterson (Eds.), *International Encyclopedia of Education* (3rd ed.). New York, NY: Elsevier.
- Clandinin, D.J. & Connelly, F.M. (2000). *Narrative inquiry: Experience and story in qualitative research* (1st Ed.). San Francisco, California: Jossey-Bass Inc.

- Clark, W. & Schellenberg, G. (2006). *Who's religious?* (Catalogue No. 11-008). Retrieved from Statistics Canada: Canadian Social Trends: <http://www.statcan.gc.ca/pub/11-008-x/2006001/pdf/9181-eng.pdf>
- Coles, R. (1990). *The spiritual life of children*. Boston: Houghton Mifflin.
- Crisp, B.R. (2010). *Spirituality and social work*. Burlington: Ashgate Publishing.
- Dalton, C.G. (2009). Spirituality, meaning and counselling young people. In de Souza, M., Francis, L.J., O'Higgins-Norman, J. & Scott, D.G. (Eds.), *International Handbook of Education for Spirituality, Care and Wellbeing* (Vol. 2, pp. 977-989). Dordrecht: Springer.
- Denton, M.L., Pearce, L.D. & Smith, C. (2008). *Religion and spirituality on the path through adolescence*. (Research Report No. 8). Retrieved from the National Study of Youth & Religion: http://www.youthandreligion.org/sites/youthandreligion.org/files/imported/publications/docs/w2_pub_report_final.pdf.
- Engels, E. (Ed.). (2001). Spirituality in counseling [Special issue]. *Counseling and Values*, 45(3), 162.
- Faiver, C.M. & O'Brien, E.M. (2004). Spirituality and counseling. *American Journal of Pastoral Counseling*, 7(4), 25-49.
- Fisher, J.W. (2009). Getting the balance: assessing spirituality and well-being among children and youth. *International Journal of Children's Spirituality*, 14(3), 273-288.
- Gardner, F. (2009). Affirming values: using critical reflection to explore meaning and professional practice. *Reflective Practice*, 10(2), 179-190.

- Gergen, K.J. & Gergen, M. (2004). *Social construction: Entering the dialogue*. Chagrin Falls, Ohio, USA: Taos Institute Publication.
- Gollnick, J. (2008). *Religion and spirituality in the life cycle*. New York, NY: Peter Lang Publishing.
- Gray, M. (2008). Viewing spirituality in social work through the lens of contemporary social theory. *British Journal of Social Work*, 38, 175-196.
- Hackney, H.L. & Cormier, S. (2013). *The professional counselor: A process guide to helping*. (7th Ed.). USA: Pearson Education, Inc.
- Hall, C.R., Dixon, W.A. & Mauzey, E.D. (2004). Spirituality and religion: Implications for counselors. *Journal of Counseling & Development*, 82, 504-507.
- Hay, D. & Nye, R. (1998). *The spirit of the child*. (Rev. ed.). London ; Philadelphia: Jessica Kingsley Publishers.
- Helminiak, D. (2001). Treating spiritual issues in secular psychotherapy. *Counseling and Values*, 45, 163-189.
- Hickson, H. (2011). Critical reflection: reflecting on learning to be reflective. *Reflective Practice*, 12(6), 829-839.
- Hill, P.C., Pargament, K.I., Hood Jr., R.W., McCullough, M.E., Swyers, J.P., Larson, D.B. & Zinnbauer, B.J. (2000). Conceptualizing religion and spirituality: Points of commonality, points of departure. *Journal for the Theory of Social Behaviour*, 30(1), 51-77.
- Hodge, D.R. (2001). Spiritual assessment: a review of major qualitative methods and a new framework for assessing spirituality. *Social Work*, 46(3), 203-214.
- Hoffman, E. & Ortiz, F.A. (2009). Youthful peak experiences in cross-cultural perspective: Implication for educators and counselors. In de Souza, M., Francis, L.J., O'Higgins-

- Norman, J. & Scott, D.G. (Eds.), *International Handbook of Education for Spirituality, Care and Wellbeing* (Vol. 2, pp. 469-489). Dordrecht: Springer.
- Holden, M.M. (2012). Using critically reflective practice when implementing ethical and sensitive spiritual frameworks in social work practice. *Reflective Practice: International and Multidisciplinary Perspectives*, 13(1), 65-76.
- Holder, M.D., Coleman, B. & Wallace, J.M. (2010). Spirituality, religiousness, and happiness in children aged 8-12 years. *Journal of Happiness Studies*, 11(2), 131-150.
- Hoskins, M. & Stoltz, J. (2005). Fear of offending: disclosing researcher discomfort when engaging in analysis. *Qualitative Research*, 5(1), 95-111.
- Jankowski, P.J. (2002). Postmodern spirituality: Implication for promoting change. *Counseling and Values*, 47, 69-79.
- King, U. (2009). *The search for spirituality: Our global quest for meaning and fulfilment*. Norwich, UK: Canterbury Press.
- Koenig, H.G. (2009). Research on religion, spirituality, and mental health: A review. *Canadian Journal of Psychiatry*, 54(5), 283-291.
- Krueger, R.A. (1994). *Focus groups: A practical guide for applied research*. Thousand Oaks, CA: Sage Publications.
- Krueger, R.A. & Casey, M.A. (2000). *Focus groups: A practical guide for applied research* (3rd ED.). Thousand Oaks, CA: Sage Publications.
- Kwee, M.G.T., Gergen, K.J. & Koshikawa, F. (2006). *Horizons in Buddhist psychology: Practice, research & theory*. Chagrin Falls, Ohio, USA: Taos Institute Publication.
- Landreth, G.L. (2002). *Play therapy: The art of the relationship*. (2nd Ed.). USA: Routledge, Taylor & Francis Group.

- Lindsay, C. (2008). *Canadians attend weekly religious services less than 20 years ago*. Retrieved from Statistics Canada: <http://www.statcan.gc.ca/pub/89-630-x/2008001/article/10650-eng.htm>
- Longo, D.A. & Peterson, S.M. (2002). The role of spirituality in psychosocial rehabilitation. *Psychiatric Rehabilitation Journal*, 25(4), 333-341.
- Lucas, A. (1997). Humberto Maturana. *Metascience*, 6(2), 59-70.
- Madsen, W.C. (2007). *Collaborative therapy with multi-stressed families*. (2nd Ed.). New York, NY: The Guilford Press.
- Mahoney, M.J. (2003). *Constructive psychotherapy: Theory and practice*. New York, NY: The Guilford Press.
- Miller, D.E. (1998). Postdenominational Christianity in the twenty-first century. *The ANNALS of the American Academy of Political and Social Science*, 558, 196-210.
- Miller, G. (1999). The development of the spiritual focus in counseling and counselor education. *Journal of Counseling & Development*, 77, 498-501.
- Miller, W.R. & Thoresen, C.E. (2003). Spirituality, religion, and health: An emerging research field. *American Psychologist*, 58, 24-35.
- Myers, J.E. & Truluck, M. (1998). Health beliefs, religious values, and the counseling process: A comparison of counselors and other mental health professionals. *Counseling and Values*, 42, 106-123.
- Onwuegbuzie, A.J., Dickinson, W.B., Leech, N.L. & Zoran, A.G. (2009). A qualitative framework for collecting and analyzing data in focus group research. *International Journal of Qualitative Methods*, 8(3), 1-21.

- Plumb, A.M. (2011). Spirituality and counselling: Are counsellors prepared to integrate religion and spirituality into therapeutic work with clients? *Canadian Journal of Counselling and Psychotherapy*, 45(1), 1-16.
- Posterski, D. & Bibby, R. (1988). *Canada's youth "ready for today": A comprehensive survey of 15-24 year olds*. [Ottawa]: Canadian Youth Foundation.
- Rabiee, F. (2004). Focus-group interview and data analysis. *Proceedings of the Nutrition Society*, 63(4), 655-660.
- Ritchie, J. & Spencer, L. (1994). Qualitative data analysis for applied policy research. In Bryman, A. & Burgess, R.G. (Eds.), *Analysing qualitative data* (pp. 173-194). London: Routledge.
- Robinson, E. (1983). *The original vision: A study of the religious experience of childhood*. New York: Seabury Press.
- Roehlkepartain, E.C., Benson, P.L., Scales, P.C., Kimball, L. & Ebstyne King, P. (2008). *With their own voices: A global exploration of how today's young people experience and think about spiritual development*. Retrieved from the Search Institute: Center for Spiritual Development in Childhood and Adolescence: http://www.search-institute.org/system/files/with_their_own_voices_report.pdf
- Roof, W.C. (1998). Modernity, the religious, and the spiritual. *The ANNALS of the American Academy of Political and Social Science*, 558, 211-224.
- Savin-Baden, M. & Niekerk, L.V. (2007). Narrative inquiry: Theory and practice. *Journal of Geography in Higher Education*, 31(3), 459-472.
- Scott, D.G. (2011). The spiritual as critical and political. *International Journal of Children's Spirituality*, 16(4), 293-299.

- Sheridan, M.J. (2008). Predicting the use of spiritually-derived interventions in social work practice. *Journal of Religion & Spirituality in Social Work: Social Thought*, 23(4), 5-25.
- Silverman, E.M. (2008). Ongoing self-reflection. (Letter to the Editor). *American Journal of Speech-Language Pathology*, 17, 92.
- Sinats, R., Scott, D.G., McFerran, S., Hittos, M., Cragg, C., Leblanc, T. & Brooks, D. (2005). Writing ourselves into being: writing as spiritual self-care for adolescent girls. Part one. *International Journal of Children's Spirituality*, 10(1), 17-29.
- Steen, R.L., Engels, D. & Thweatt III, W.T. (2006). Ethical aspects of spirituality in counseling. *Counseling and Values*, 50, 108-118.
- Strong, T., Busch, R. & Couture, S. (2008). Conversational evidence in therapeutic dialogue. *Journal of Marital and Family Therapy*, 34(3), 388-405.
- Tummala-Narra, P. (2007). Skin color and the therapeutic relationship. *Psychoanalytic Psychology*, 24(2), 255-270.
- West, K. (2007). Never let me down. [Recorded by K.West, Jay-Z & J-Ivy]. On *The college dropout* [Medium of recording: CD]. Los Angeles, California: The Record Plant.
- White, J. (2007). Knowing, doing and being in context: A praxis-oriented approach to child and youth care. *Child Youth Care Forum*, 36, 225-244.
- Wiener, J. (2009). *The therapeutic relationship: Transference, countertransference, and the making of meaning* (1st Ed.). College Station: Texas A&M University Press.
- Wilkinson, S. (2004). Focus group research. In D. Silverman (ed.). *Qualitative research: Theory, method, and practice* (pp. 177-199). Thousand Oaks, CA: Sage.
- Yip, K. (2006). Self-reflection in reflective practice: A note of caution. *British Journal of Social Work*, 36, 777-788.

Zinnbauer, B.J., Pargament, K.I., Cole, B., Rye, M.S., Butter, 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 I – Invitation to Participate Letter

Invitation of Participate

Shemine Gulamhusein
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University of Victoria
Box 2400 STN CSC
Victoria, BC, V8W 3H7

Graduate Students (Child and Youth Care, Social Work, Educational Psychology)
February 1, 2012

Dear Participant,

You are invited to participate in a study titled: *Adolescent Spirituality in Counseling: Investigating Counselors Usage of Spirituality*, which I am conducting as a Masters student in the School of Child and Youth Care at the University of Victoria. The purpose of this study is to explore the factors that influence the use of or discourage the use of spirituality in counseling practices with adolescent (10-15yrs) clients.

This research is important to help bridge the gap between the need to include spirituality in counseling, as noted in the current literature, and how to include spirituality in practice. The question that is posed for this research is: What factors contribute and prohibit counselors from engaging in conversations and/or activities in regards to spirituality with adolescent (10-15yrs) clients? I will focus on the levels of comfort soon to be counselors feel they have, the language they prefer to use or not use, and the training you feel you have obtained or wish you had obtained to address spirituality in your counseling practices.

If you participate in this research, your participation in a focus group with three other participants will be required. The group will last approximately two and a half hours and will be held at the University of Victoria. If you do decide to participate, you may withdraw at any point without any consequences or explanations. In this case, your contribution to the discussion will not be discarded, however your anonymity will be maintained in the dissemination of the results.

Your participation and identity will remain anonymous during the reporting and dissemination stages of this research. The results of this study will be shared with others in my masters' thesis. With additional consent, it is anticipated that the results will also be shared during scholarly meetings and published article(s).

If you would like to accept this invitation or if you have any questions about the study you may contact me via the information provided at the top of this letter. My supervisor, Dr. Daniel Scott, is also available to answer any questions or discuss any concerns you may have.

I look forward to hearing from you.
Sincerely,

Shemine Gulamhusein

Appendix II – Informed Consent to Participate

Participant Consent Form

Adolescent Spirituality in Counseling: Investigating Counselors Usage of Spirituality

You are invited to participate in a study entitled Adolescent Spirituality in Counseling: Investigating Counselors Usage of Spirituality that is being conducted by Shemine Gulamhusein. I am a University of Victoria Graduate student in the School of Child and Youth Care. You may contact me if you have further questions.

As a Graduate student, I am required to conduct research as part of the requirement for a Masters in Child and Youth Care. My research is being conducted under the supervision of Dr. Daniel Scott. Dr. Scott will have access to all data collected, following the removal of the names of participants and any key identifying information, and will support me through the analysis and dissemination of the study results.

Purpose and Objectives

The purpose of this research project is to explore the factors that influence the use of or discourage the use of spirituality within adolescent counseling practices. My research question is: “What factors do you think do or would contribute and prohibit counselors from engaging in conversations and/or activities in regards to spirituality with adolescent (10-15 years) clients? To understand what contributes and what prevents counselors from engaging in conversations about spirituality, I intend to focus on counselors’ comfort levels, language preferences for both their clients and themselves, and training received either academically or professionally in respect to spirituality and counseling and/or spiritual development.

Importance of this Research

Research that leads to an understanding of why and/or why not counselors include spirituality in their practice is vital in ensuring that adolescent clients are receiving holistic care. By conducting the proposed research, insights on why or why not counselors include spirituality in their practice will be gained. The research outcomes may encourage counselors, yourself and others, to look at personal beliefs around spirituality, if counselors want to or not want to include spirituality into their own practice, and what levels of comfort counselors have to deal with spirituality following their academic training. Understanding all of these factors will provide better care to clients and perhaps influence the inclusion of spirituality in training programs for future counselors.

Participant Selection

You have been selected to participate in this study because you are a Graduate student at the University of Victoria in Child and Youth Care, Social Work, or Educational Psychology and intend to enter clinical counseling practices in the near future. By agreeing to participate in this study you are also showing an interest in counseling and spirituality, either what contributes to or prohibits the inclusion of spirituality in counseling.

What Is Involved

If you agree to voluntarily participate in this research, your participation will include attending one of two focus group discussions that will last approximately two and a half hours and take place in a classroom in the Human and Social Development Building. Each group will be introduced to the topic of interest, the researcher, and the others participating in the conversation. You will then be asked a question to provoke conversation. The conversation will be audio recorded and transcribed for data analysis and dissemination purposes.

If you agree to participate in the first focus group, your participation will include the dissemination of results, a list of the key findings, to the second focus group. It will be ensured that your confidentiality and anonymity will be maintained. Your consent to participate in the first group will require you to sign an additional Participant Consent Form.

Risks

There is one potential risk to you by participating in this research, yet you may find this risk to also benefit you personally and in your future practice. The known risk is the contemplation you may find yourself having prior to, during, or following the discussion about your personal and professional beliefs and values regarding spirituality. If at any point in the discussion it is apparent that you or another participant is feeling distressed, a break in conversation will be encouraged to help settle feelings and process the thoughts you may be having. A check in with you, if at any point you show signs of distress, will occur during this break period and 24-48 hours following the discussion. A tip sheet on ways to process your feelings will also be available.

Benefits

The potential benefits of your participation in this research include benefits to yourself, to society, and to the state of knowledge. You may find that you are encouraged to further explore your own relationship with spirituality and the way in which it influences your future clinical practice with adolescent clients. By having practitioners more aware of the clinical practices that include spirituality and the potential benefits and/or risks of including spirituality in practice, it will encourage better practice in the counseling field and will allow counselors to serve their clients better. Further, understanding how you perceive your competence levels through academic and professional training will allow educational institutions to adapt and/or include further training for students. This research will also begin to fill the gap between the need to include spirituality, that is noted in the current literature, and how to include spirituality in practice by providing care practitioners with ideas of what contributes and what prohibits the inclusion of spirituality in practice.

Compensation

As a way of thanking you for your contribution to this study, pizza and pop will be provided at each of the focus group discussions. If you agree to participate in this study, this form of compensation to you must not be coercive, it is unethical to provide undue compensation or inducement to research participants. If you would not participate if the compensation was not offered, then you should decline.

Voluntary Participation

Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study, your contribution up to that point in the discussion will not be discarded as you have helped shaped the conversation up to that point. However, your anonymity will be made when analyzing and presenting the data results.

Anonymity

Your anonymity within the group is limited as you are directly in conversation with the other participants. To make sure that your anonymity is maintained outside of the discussion it will be requested that all participants refrain from speaking about the focus group outside of the group. Pseudonyms will be used when transcribing and presenting data results and all key-identifying features will be altered or left out of the dissemination of results.

Confidentiality

Your confidentiality and the confidentiality of the data will be protected by the use of pseudonyms and secure storage. All electronic copies of transcripts, audio recordings, result analysis, and write-ups will be stored in password-protected files on my computer at home. All paper copies, audio recordings, and anything placed on a USB key will be stored in a locked filing cabinet at my house.

Dissemination of Final Results

It is anticipated that the results of this study will be shared with others through my thesis and potentially as a published article and a presentation at a scholarly meeting such as a conference. There will be no commercial use of the results found.

Disposal of Data

Data from this study will be kept for a maximum of five years (till December 31, 2017). At this point the hard copies of the data, including transcripts and audio recordings, will be shredded. Electronic copies will be destroyed using the appropriate means.

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria.

Your signature below indicates that you understand the above conditions of participation in this study, that you have had the opportunity to have your questions answered by the researcher, and that you agree to participate in this research.

Waiving Confidentiality (Please select this statement **only** if you agree)

I agree to be identified by name in the results of the study:

_____ <i>Name of Participant</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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I agree to participate in this research:

_____	_____	_____
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Name of Participant

Signature

Date

In Addition

In addition to the consent signed above, by signing below I agree to allow Shemine, the researcher, to use the data collected for future journal articles and scholarly presentations.

If you choose not to sign below, following the dissemination of results for my thesis, your contribution to the conversations will be deleted from all transcripts created to ensure the data you have provided will not be utilized in further disseminations of the results.

Name of Participant

Signature

Date

A copy of this consent will be left with you, and a copy will be taken by the researcher.

Appendix III – Consent to Participate in Focus Group One

Participant Consent Form

Adolescent Spirituality in Counseling: Investigating Counselors Usage of Spirituality

You have agreed to participate in the first round of the focus group discussions for my study, Adolescent Spirituality in Counseling: Investigating Counselors Usage of Spirituality. By signing this consent form, you agree to allow me to use the data collected, in summary format, to help initiate the conversation in the second focus group.

I intend to create a list of the key findings, without the use of names or descriptions of the content surrounding the finding, to encourage the second group to explore other factors and/or highlight factors they feel strongly contribute to prohibit a counselor from including spirituality in their clinical counseling practice. Your confidentiality and anonymity will be maintained throughout this process, however, because of the small group sizes there is a slight chance members of the second focus group will know who participated in the first focus group.

Again, you have the right to withdraw from this study at any point without any consequences or explanations. In this case, your contribution to the discussion will not be discarded, however your anonymity will be maintained in the dissemination of the results to the second focus group and during the final dissemination.

Your signature below indicates that you understand the above conditions of participation in first focus group of this study, that you have had the opportunity to have your questions answered by the researcher, and that you agree to participate in this research.

I agree to participate in the first focus group:

_____ <i>Name of Participant</i>	_____ <i>Signature</i>	_____ <i>Date</i>
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Appendix IV – Focus Group Questions (Draft)

Research Question

What factors do you think do or would contribute to and/or prohibit you as a counselor from engaging in conversations and/or activities in regards to spirituality with adolescent clients (ages ten to fifteen)?

Interview Questions

Main question.

Can you think of a time in a practice setting where spirituality came up?

Examples of prompting questions.

- (1) How did you feel?
- (2) Were you comfortable with the language being used by your client (or counselor)?
- (3) What was your initial reaction?
- (4) What do you think you did well?
- (5) If you could repeat that experience, would you do anything differently?
- (6) If you have had training, how has that contributed to your response, here in this conversation and/or in how you would engage in a similar situation in the future?

Examples of situational based questions if presented with a challenging experience.

- (1) What have you learned from your experience?
- (2) How did you react to the anxiety you felt?
- (3) Do you wish you did something differently?
- (4) What kind of self-care/reflection did you engage in following this experience?
- (5) How would you feel and/or react if a similar experience occurred again?

Appendix V – Tips to Process Potential Harm

Tips to Process Potential Harm

As many of you are aware, self-care is an important and critical part of the work we do, as students and practitioners. You may all have a unique method of self-care that you have obtained through training and practice that I suggest you rely on, however, I would like to provide you with some options to participate in if you are finding it challenging to process some of the feelings that may have come up because of your participation in my study.

Personal practices you can try:

- Journaling
- Yoga/Meditation (engage in your own spiritual retreat!)
- Going to the gym, for a walk, or coffee with a friend
- Take a bath with Epson Salt or Sea Salt
- Get a massage
- Read a good book, or
- Find a journal on self-care and practice some of the techniques provided
 - Here are a few journals I found:
 - Burnout and the ethics of self-care for therapists by Tracy L. Wityk (2003)
 - Teaching self-care to caregivers: Effects of mindfulness-based stress reduction on the mental health of therapists in training by Shauna L. Shapiro, Kirk Warren Brown, & Gina M Biegel (2007)
 - The development of the trauma therapist: A qualitative study of the child therapist's perspectives and experiences by Beth A. Lonergan, M. Sean O'Halloran, & Susan C.M. Crane (2004)

Assisted practices you can try:

- Debrief with me, Shemine
- Talk with a mentor
- Visit Counseling Services on Campus or other counselor

I hope the above provide you with a technique that helps you engage with and/or process any feelings that may have come up during your participation in this study. If you would like to debrief with me, please do not hesitate to contact me at any time.

Sincerely,

Shemine Gulamhusein