# The Ethical Integration of Christian Faith Into Counseling Veterans

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#### **PPT Information**

This presentation can be found under "Resources" at www.drlaurelshaler.com

\*If you sign up on my website, you will be entered into my Thanksgiving Giveaway. Winner announced Nov 26.\*

# **Learning Objectives**

- Learning Objective #1: Participants will discuss the current climate of counseling veterans including the roles of counselors and unique concerns of veterans.
- Learning Objective #2: Participants will be able to describe evidence based therapies for the most pressing issues expressed by veterans.
- Learning Objective #3: Participants will analyze strategies of integrating the Christian faith of the client into counseling sessions with veterans.

# Background

- Began as intern with Department of VA during MSW program
- Worked as mental health social worker
- Earned PhD from Christian institution
- Now faculty at Liberty University, in part researching military issues (more on that later)

# Departments of Defense and VA

- Both departments can hire licensed counselors, marriage and family therapists, social workers, and psychologists to provide psychotherapy services.
- Within the DoD, many of these individuals are contract employees (including "MFLC")
- With the VA, many of these individuals are social workers and psychologists.
- Despite advocacy and change in laws, counselors are not well represented in the VA.
- Many private practice therapists also work with veterans and their families.

# **Approved Psychotherapies**

- VA therapists use a wide variety of therapeutic interventions for the spectrum of behavioral, emotional, and relational problems.
- They endorse three forms of evidence based therapies (EBT) for the treatment of Posttraumatic Stress Disorder (PTSD).
- These three are: Cognitive Processing Therapy (CPT), Eye Movement Desensitization and Reprocessing (EMDR), and Prolonged Exposure (PE). (See www.ptsd.va.gov for more information).

# **Unique Military Issues**

- Some unique issues that we will briefly review:
  - o PTSD
  - o TBI
  - Effects of MST
  - Relationship/Family Issues
  - Substance Issues
  - Suicide

## **Barriers to Treatment**

- 1) Availability of providers
- 2) Availability of service member or veteran
- 3) Stigma within military culture

• In a 2010 APA publication, it was stated, "Biblical counseling is a movement among conservative Christians—mostly Protestants—to reclaim the role of counseling within the ministries of the church. Biblical counselors consider the Bible to be superior and more authoritative than psychological science, theory, or technique. As such, it is highly unusual to find professional psychologists who also identify as biblical counselors" (McMinn, Staley, Webb, and Seegobin, para. 10).

# **Christian Integration**

- Let's chat...
  - Can you integrate your professional identify as a social workerwith "Christian integration"?

With over 70% of Americans identifying as Christian (Pew Research, 2015), this is an important topic. Let's look at some of the research on Christian integration...

- Therapists are more likely to use religious and spiritual interventions if they are personally religious, have training with religious clients, and training in appropriate interventions (Walker, Gorsuch, and Tan, 2005).
- But is Christian integration helpful to clients?

# **Christian Integration**

- Spirituality as a whole:
  - A 2008 study found large effect sizes for reducing PTSD symptom severity, psychological distress, and increasing quality of life when studying mantram repetition (repeating a sacred word/phrase through the day); however, it was a small group of 29 of who completed the study (Bormann, Thorp, Wetherell, & Golshan, 2008).
  - In a study with over 400 veteran participants, "A more negative concept of God was related to higher severity of PTSD and depressive symptoms, whereas, a more positive concept of God was related to lower severity of depressive symptoms" (Tran, Kuhn, Walser, & Drescher, 2012, para. 22).

- A 2011 meta-analysis of 46 studies (N = 3,290) compared psychological and spiritual outcomes to:
  - o 1.) A control condition (such as only assess.)
  - o 2.) An alternate treatment (non-religious)
  - 3.) A dismantling design (example: CBT vs CBT with religious accommodation

Reference: Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. *Journal of Clinical Psychology: In Session, 67*(2), 204-214.

# **Christian Integration**

#### • Results:

- Those in religiously accommodated psychotherapies showed "greater improvement than those in alternate secular psychotherapies on psychological (d = .26) and spiritual (d = .41) outcomes."
- On dismantling, psychological outcome was the same but spiritual outcomes showed greater improvement (d = .33).
- Reference: Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. *Journal of Clinical Psychology: In Session*, 67(2), 204-214.

#### • Weaknesses of research:

- We don't know that the theology of the therapist matched that of the client.
- Amount of spiritual accommodation was variable.
- Research was mostly facilitated with theologically conservative clients.
- Most research was on CBT.

Reference: Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. *Journal of Clinical Psychology: In Session*, 67(2), 204-214.

# **Christian Integration**

#### • What is "Christian accommodation"?

- Being a Christian therapist?
- Praying for client outside of treatment?
- Praying for client in treatment?
- Treatment consistent with Christian values?
- Treatment that uses Scripture?
- o Reading Bible in session?
- Answering theological questions? (Where was God when my buddy was killed?)
- Helping the client find a church?
- Helping clients understand God?

Reference: Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. Journal of Clinical Psychology: In Session, 67(2), 204-214.

# THERE IS NO "CORRECT" ANSWER.

# **Christian Integration**

#### • Recommendations:

- Assess....
  - \* Know your clients (faith, concerns, etc)
  - \* What and how much does the client want?
  - × Does religious accommodation fit your client?
  - Does it fit the treatment that is most appropriate for client?
  - × Does your client improve? Show it works.

Reference: Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. *Journal of Clinical Psychology: In Session*, 67(2), 204-214.

# **Christian Integration with CPT**

- Activating Event: My best friend was killed in front of me.
- Belief: God is not loving.
- Oconsequence: Sadness
- When using the challenging beliefs worksheets, this can be challenged through questions such as:
  - What is the evidence for or against?
  - × Are you thinking in "all or none" terms?
- When using the patterns of problematic thinking, this can be challenged with the following:
  - × Drawing conclusions with contradictory evidence.
  - × Overgeneralizing.

#### Reflections

- Other examples of clients who wanted Christian integration:
  - Veteran who was a retired police officer whose son was brutally murdered.
  - Group who chose to pray together at the end of every session.
  - Female veteran who specifically requested a Christian therapist.

# **Institute of Military Resilience**

- Primary Purpose: to assess effectiveness of faith-based protocols in addressing the most pervasive and persistent mental and behavioral health issues in the U.S. Armed Forces
- Overarching Research Questions:
  - 1. Do before, during, and after best faith practices (prayer, hope, encouragement, and life instruction from the Bible; faith community interaction, et al) help to mitigate the impacts of military trauma and the ensuing mental & behavioral health challenges?
  - 2. Does active faith practice (esp Christian) contribute to resilience in military personnel and their families?
  - 3. Does active faith practice (esp Christian) improve outcomes related to key military issues?

# **Institute of Military Resilience**

- Right now, we have a number of projects:
  - Retention and GPA of military affiliated students
  - Extrinsic vs Intrinsic motivation for military spouses pursuing higher education
  - Self-efficacy among disabled veterans in higher education settings
  - o Needs of military affiliated students in order to be successful
  - Moral injury and forgiveness among veterans
  - O AND MORE!

# **Concluding Slide**

- Question and Answer Time
- Contact Information:
  - o Dr. Laurel Shaler
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  - o www.drlaurelshaler.com
  - @DrLaurelShaler
  - o www.facebook.com/drlaurelshaler
  - (Available to speak on a wide variety of topics related to faith, culture, and emotional well-being.)

#### References

- Bormann, J.E., Thorp, S., Wetherell, J.L, & Golshan, S. (2008) A spiritually based group intervention for combat Veterans with posttraumatic stress disorder. *Journal of Holistic Nursing*, 26, 109-116.
- McMinn, M., Staley, R., Webb, K., & Seegobin, W. (2010) Just what is christian counseling anyway? *Professional Psychology: Research and Practice*, 41(5), 391-397.
- Tran, C., Kuhn, E., Walser, R., & Drescher, K. (2012). The relationship between religiosity, PTSD, and depressive symptoms in veterans in PTSD residential treatment. *Journal of Psychology and Theology*, 40(4), 313.
- Walker, D.F., Gorsuch R.L., & Tan, S. (2005). Therapists' use of religious and spiritual intervention in Christian counseling: A preliminary report. *Counseling and Values*, 49, 107-119.
- Worthington, E., Jr., Hook, J., Davis, D., & McDaniel, M. (2011). Religion and spirituality. *Journal of Clinical Psychology: In Session*, 67(2), 204-214.

## References

- Further information will be obtained from the Department of Veterans Affairs "National Center for PTSD" <u>www.ptsd.va.gov</u> and "Veterans Crisis Line" <u>www.veteranscrisisline.net</u>
- Also recommend CPT training via MUSC at www.musc.edu/CPT