

**Paper 3: Applications Paper**

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### **Crisis Support Work and Spirituality**

In this paper, the role of spirituality in assisting a person experiencing a crisis will be examined. Despite the fact that there are numerous types of crises, such as developmental crises, existential crises, and situational crises, the focus of this paper is any crisis involving the loss of something and the subsequent grieving process. Loss is not limited to the loss of a loved one, such as a human or animal family member; it can also be the loss of a physical part of oneself, such as a limb, or an imagined object, such as a title or an expected path in life, which can occur following a divorce.

When confronted with a severe crisis, regardless of its nature, one is frequently compelled to consider the less pleasant aspects of life, such as the inevitability of death, as well as the accompanying unpleasant emotions, such as sadness, fear, loneliness, and emptiness. Depending on a person's worldview, which includes their values, beliefs, and general life expectations, they may be better or worse equipped to handle a crisis. Consequently, one frequently begins to ask questions about oneself and life that one may not have needed to ask earlier. Questions like how could this occur, what is the meaning of everything, how can life be so unfair, how can I continue to live after this may arise. Finding answers to these questions, as well as having a chance to process the event or events that ultimately caused the crisis, frequently requires the support of others.

This paper is organized into three sections. The first section includes definitions relevant to crisis and examines the various facets of crisis support work. While the second section examines the role of spirituality in relation to crisis support work, the third section discusses the importance of a deeper sense of understanding when supporting someone going through a crisis, which appears to aid not only in healing but possibly also in connecting to the divine.

### **Definitions Relevant to Crisis and Crisis Support Work**

A few key concepts, including what constitutes a crisis and crisis support, need to be defined in order to establish an understanding of what crisis support work is and is not, as well as how spiritual matters can play a crucial role in integrating a crisis.

#### **Crisis Definition**

According to James (2008), a crisis is any unbearable and overwhelming struggle, incident, or experience in which a person is unable to successfully employ their existing coping strategies. For instance, a crisis often occurs when a person is unable to achieve a particularly important life goal due to the presence of an obstacle that they are unable to overcome with their existing skills and knowledge (Caplan, 1961). Thus, a crisis develops when a person lacks knowledge of effective ways to respond to a problem or challenge (Carkhuff & Berenson). In addition, it is common for people to become immobilized during times of crisis, also referred to as a freeze response, making it difficult for them to exercise deliberate control over their lives (Belkin, 1984). A state of disorganization caused by the ineffectiveness of old coping strategies is a common feature of a crisis, resulting in frustration and bewilderment in milder crises and fear, shock, and even terror in more severe crises (Brammer, 1985). The critical factor is not the event or situation in and of itself, but rather how it is perceived by the individual experiencing the crisis, implying that the more experience and coping skills a person has, the easier it will be for them to handle future crises.

Marino (1995) summarizes that a crisis can occur in four different phases. First, a disruption occurs in a person's life to which they are unable to successfully respond using their normal coping skills. Second, a lack of resources leads to a period of disorganization during which mental, emotional, and physical stress and tension accumulate. Third, unless the situation

can be successfully managed, additional assistance, such as support from friends, family, or a professional support worker, is required. Fourth, if traditional support work is insufficient, the individual may need to consult with a therapist or psychologist in order to resolve more complex issues associated with overcoming and integrating the crisis.

### **Various Types of Crises**

Brammer and MacDonald (2002) differentiate between three common types of crises: *developmental crises*, *situational crises*, and *existential crises*. Everyone experiences developmental crises as a normal part of growing and maturing through various life stages, such as becoming a parent, beginning or finishing school, changing jobs, or even retiring. Even though these events are natural parts of life, they are stressful and frequently force a person to grow and find new ways to deal with life's problems. Because any major and unexpected change in a person's life frequently involves a loss, adequate time is usually required to mourn and grieve that loss.

A crisis that is even more common than a developmental crisis is the crisis that occurs suddenly and unexpectedly, also referred to as situational crisis. These events are frequently overwhelming because they occur without warning, that is, they occur so unexpectedly that one is caught off guard and consequently overcome by strong emotions (Schottke, 2001). Situational crises include accidents, natural disasters, violent attacks, job loss, and the unforeseen illness or death of a loved one, and they are frequently accompanied by unanticipated loss and grief.

Even though most crises affects a person on an existential level, in the sense that one's world-view and stronger held beliefs about life, oneself, and the world are being questioned, it is specifically during an existential crisis that a person experiences the inner conflicts associated with questioning or thinking deeper about one's direction in life, life purpose, and various

spiritual matters. In this process of internal questioning is quite common to experience existential anxiety. For instance, as a person approaches various life transition stages, such as realizing at the age of 40 that one may never actually make a significant impact on one's life, or at the age of 50 that one is regretting the things one did not do, such as marry, have a child, or move to a different location, or when retiring and realizing that one is no longer important or that life in general feels meaningless (James, 2008). When confronted with life's limitations, feelings of inner turmoil or even panic may arise, often leaving a person in a state of hopelessness.

Nonetheless, reflecting on the darker aspects of life can act as a catalyst for personal growth and transformation (Janosik, 1984). The pain and despair that often accompany a severe crisis make a person more vulnerable and helps them to find new ways of not only overcoming their suffering, but also of finding a sense of purpose or gratitude for what they have.

In conclusion, life can be viewed as a series of interconnected challenges and crises. When a challenge becomes overwhelming, it may be considered a crisis, forcing a person to choose between facing it or not, whether to live or die (Carkhuff & Berenson, 1977). Choosing to ignore the crisis is also a choice, and since it frequently results in additional suffering and negativity, it is a rather destructive one (James, 2008). However, when the pain surpasses a certain threshold, such as when the pain of not growing is greater than the fear associated with the various obstacles preventing change, it often becomes easier to choose change, for example, by making the necessary inner and outer changes, as well as seeking the necessary assistance from a friend, family member, or even a professional.

### **Crisis Support Work**

Although the goal of crisis support work varies depending on the actual crisis, some common features include creating a safe space for the client to talk about their experiences and

feelings related to the crisis, assisting the client in down-regulating the nervous system, aiding in re-establishing or improving an individual's coping mechanisms, assisting in gaining a deeper understanding of what and why the crisis occurred, and helping with setting up support network consisting of friend and family members (James, 2008). In relation to these goals, Geroski (2017) identifies three critical factors of assisting someone in a crisis. The first part is *obtaining information* about the event by allowing the client to speak about the parts of the event that is most important to them, such as their needs, worries, reactions, and feelings. The client is given the opportunity to express what happened and how they feel about it. The support worker uses active listening, open questions, and validation to help the client understand and integrate what has occurred.

In this process it is vital for the support worker to *provide both physical and emotional safety* for the client, relating to Geroski's second point. Using a warm, calm, and compassionate approach, the support worker seeks to create a strong alliance with the client. The support worker may provide necessary and appropriate information related to the actual event, as well as give psychoeducation to assist in understanding psychological and physiological reactions and various aspects of the recovery process. The last and third aspect relates to assisting the client in *connecting to various resources* that can assist the client in dealing with the crisis effectively. As an example, since isolation and loneliness are typical after a crisis, it is crucial to aid in maintaining connections with others and developing routines that give stability and functionality (Wong et al., 2008, as cited in Geroski, 2017). However, quite often these measures are not sufficient due to the existential and spiritual nature of a crisis, in which the essence of what it means to be human and the meaning of life may be questioned, which leads to the spiritual dimension of crisis support work.

### **The Role of Spirituality in Crisis Support Work**

Spirituality is derived from the Latin word *spiritus*, which literally translates to "breath," and Merriam-Webster (2022a) describes the word *spirit* as a vital basic component giving life to all physical organisms. In this understanding, the opposite of spirit or that which gives lives, is death. In the context of a crisis, this can be any process of decline, stagnation, or death, which means that in a crisis, not only biological death but also psychological death may be unavoidable. Psychological death refers to the experience of an aspect of oneself passing away in favor of the formation of a new aspect, ideally a version of oneself that feels even more true to one's deeper aspects. During this process, a person's beliefs, deeper sense of self-identity, and life priorities may shift. The following case study demonstrates the relationship between life and death in the context of a crisis.

#### **A Marine Core Soldier Suffering from Moral Injury**

A short while ago, a Marine Corps' soldier called Jeff, a fictitious name, sought me out to receive support in his process of integrating his experience of serving two tours overseas, one in Afghanistan and one in Iraq. Jeff was in a state of disillusion due to the fact that he had seen too much death, including both dear friends and enemy insurgents. Jeff was struggling to make sense of his time in the military. He was asking himself what was the point of it all.

Jeff was raised in a military family and was taught the goodness and righteousness of defending one's country. Jeff had been raised as a Lutheran Christian, but he was not sure if he still believed in God. After returning from his second tour, he began to question himself, his faith, and his conviction that he was doing the right thing. However, it was not until the withdrawal of troops from Afghanistan in 2021 that he realized it had all been in vain. Not only did Jeff feel betrayed by the political leaders in charge, but also by society and God in general.

After several sessions with Jeff, in which he felt it to be a safe place to talk about his experiences, he revealed that he was not able to forgive himself for some of the things he had done overseas. He described that the initial anger and feeling of being betrayed, originated in a deeper anger with himself. Due to some of the transgressional acts he had done, in which he had caused suffering to other people, he felt that he deep down was a bad person. He was not able to forgive himself for what he had done. It appeared that Jeff was experiencing two major inner conflicts. First, if God exists, why does he or she permit all the killing and death that occurs during wars? The second conflict arose from the fact that he had committed acts that he deeply regretted and considered to be extremely bad, and as a result he perceived himself to be an evil person. As a means of resolving these conflicts, we needed to incorporate religion and spirituality into our sessions.

#### **Four Major Factors of Spirituality and Religion that Promote Resilience**

Regarding the incorporation of religion and spirituality into the process of overcoming adversity, Pargament and Cummings (2010) identify four crucial factors that not only aid in crisis management but also foster resilience. *Meaning making*, or the search for meaning, is the first of Pargament and Cummings' four factors, relating to the fact that a person's belief system is frequently challenged during a crisis. Pargament and Cummings explain that when an overwhelming event or stressor occurs, the individual interprets the event on a cognitive level, with the individual's long-held assumptions about the world automatically influencing this interpretation. Assumptions can be viewed as a transitional stage between deeply held core beliefs and more automatic thoughts, and they can manifest in "x" and "y" statements, such as "if or since x occurred, then y follows." In the case of Jeff, his assumption of himself or God as a completely benevolent being had been challenged, prompting him to wonder, "If God exists, then



how can he allow so much death," or "Since I have done these acts of transgressions, then I must be a bad person."

The second factor is the client's need or desire to *reduce negative emotions* such as anxiety, sadness, and grief, and to gradually *regain emotional stability*. In relation to a person's cognitive interpretations of an event, assumptions and core beliefs elicit both emotional and behavioral responses. Beliefs that make it difficult to incorporate the crisis into one's worldview, i.e. irrational or nonconstructive beliefs, are being challenged, resulting in negative emotions such as anxiety, depression, and a lack of meaning. Furthermore, a person's neurobiological defense mechanisms are being activated in a crisis, including the fight or flight response, and the freeze response. The emotions produced to assist in flight, can be worry, fear, and panic, as arousal increases, or irritation, anger, and rage, in relation to the fight response. The freeze response, on the other hand, causes "attentive immobility" (Kozłowska et al., 2015, p. 269), which includes a drop in heart rate, muscular tension, and limited energy for movement. On an emotional level, it is commonly experienced as more depressive and limiting emotions, such as shame, guilt, sadness, and meaninglessness. In relation to Jeff, it appeared as if he was more or less trapped in a neurobiological freeze response, in which his nervous system did not produce energy for physical movement and he felt emotionally depressed and that life had no meaning.

The third factor identified by Pargament and Cummings is the promotion of a sense of *social connectedness*, in which the client is able to receive social support from others, which often acts as a buffer against the effects of a crisis. Due to Jeff's debilitating physical and emotional state, which included feelings of fatigue, depression, and self-hatred, he had begun to isolate himself. The more he became isolated, the more pessimistic he became about the future, to the point where he considered suicide. However, by receiving support from people in his

surroundings, over time Jeff's nervous system was able to down-regulate from the freeze response into what Porges (2011) refers to as the Social Engagement System, resulting in an increased interest in interacting with other people again.

In relation to the fourth factor of Pargament and Cummings, *connection with the sacred*, research indicates that a deeply spiritual or religious person, may use despair and isolation to reach deeper within themselves and strengthen their connection with the divine. However, a person who is questioning themselves or God frequently does the opposite. The paradox, which accurately describes Jeff approach to the matter, appears to be that since negative feelings are unpleasant, it is natural to avoid or disconnect from them, which frequently reinforces them over time. On the other hand, it appears that by attuning to negative feelings and simply "breathing through them," as one of my teachers once put it, negative feelings not only become gradually weaker, but they also appear to communicate vital information and strengthen a sense of connectedness with oneself, life, and even the spiritual aspects of life.

In Jeff's case, as he felt safer with me, he was able to attune more with the various layers of negative feelings he was experiencing. In the process of expressing these feelings, he gradually gained a deeper sense of connectedness with himself, allowing him to also express and integrate the various feelings he had toward God and the hatred he had for himself. As a means of assisting Jeff in the spiritual aspects of his crisis, it became apparent that I would not be able to assist him if I had not personally confronted some of the questions we discussed, highlighting the importance of a crisis support worker being sufficiently versed in the various spiritual topics being discussed, such as good and evil, life and death, forgiveness and love.

### **Understanding as a Gateway to Healing and the Sacred**

Throughout the years of assisting clients through a crisis, particularly when spirituality-related questions were involved, I have observed that the better my understanding of the client's experience is, the "easier" it seems for them to process their experience and associated emotions, as well as to eventually comprehend the new version of themselves that emerges after the crisis. Although relating to what my client is experiencing can be beneficial, relating too much on a cognitive level appears to hinder my ability to comprehend their unique experience and process. Therefore, in accordance with a phenomenological approach to assisting a client through a crisis, it is essential to investigate and comprehend the client's lived experience from the client's point of view (Neubauer et al., 2019). I have observed that when I allow myself to be captivated by my client's story by fully watching their facial expression and body language, listening to their voice and what they are saying, and remaining fully present in my own body and emotions, my thought process appears to slow down and I am able to empathize with my client much more strongly. After investigating this process of understanding, which appears to involve the interconnection of two individuals into a third, three distinct phases emerged.

### **The First Phase – Wanting to Understand**

The first phase occurs at the beginning of each session and lays the groundwork for the remaining two phases. The objective is for the crisis support worker to demonstrate that they want to understand the individual in crisis. For instance, the crisis support worker may adopt a warm and welcoming attitude towards the client in order to stabilize and down-regulate the client's nervous system via the process of co-regulation. The crisis support worker "holds the space" for the client, which refers to an inclusive attitude in which the crisis support worker is responsible for creating a safe space for healing while the client is still responsible for their own life and experiences. Additionally, actions are taken to establish rapport and a therapeutic

alliance with the client. Since the client is frequently in distress or experiencing negative feelings during this phase, *how* the crisis support worker communicates is far more important than *what* they say.

### **The Second Phase – Demonstrating Understanding**

After establishing a safe space for healing and demonstrating that one wants to understand the person in crisis, it is time for the crisis support worker to show that they truly understand their client. For instance, the crisis support worker uses active listening, open-ended questions, and silence to allow the client to verbalize their feelings and experiences. The crisis support worker is demonstrating their understanding of the client by validating and reflecting back key words. The client's nervous system is given the opportunity to process the sensory data, thoughts, and emotions associated with the crisis during this phase. *Emotional understanding* is more important than *intellectual understanding* at this stage. As a result, distinguishing between truly empathizing with the client and relating to what they are saying is critical. Empathy, according to Merriam-Webster (2022b), is the "action of understanding," and more specifically, "vicariously experiencing the feelings, thoughts, and experience of another."

### **The Third Phase – The Client is Increasingly Understanding**

The more the crisis support worker understands the client's cognitive, emotional, physical, and even existential or spiritual experience, the easier it appears for the client to progress in their process of understanding and integrating the crisis. A skilled and empathetic crisis support worker can assist the client in verbalizing their oftentimes pre-verbal understanding of their crisis. The client is not only integrating sensory impressions, thoughts, and feelings during this process, but they are also establishing a new post-crisis understanding of their past, present, and future. Finally, a strong rapport and alliance between the crisis support

worker and the client appear to help the client establish rapport and alliance with themselves, allowing the client to feel what they need to feel, think what they need to think, and say what they need to say in order to become a whole person again. Allowing loss and grief to coexist within a person, in my experience, frequently results in increased growth, resilience, and life wisdom.

In conclusion, by wanting to understand the client and subsequently demonstrating this understanding through the remaining crisis support work, the client appears to understand themselves better and the questions that arise during the crisis. During this process, the client is able to give meaning to diverse experiences, reduce negative emotions, and gradually regain emotional stability, resulting in an increase in connectedness not only with oneself, but also with others and the sacred. On a personal level, when rapport is strong and a profound sense of understanding is achieved between the crisis support worker and the client, it is almost as if two people's experiences merge into one. I have often contemplated the similarity between this type of experience and the definition of a mystical experience, which Merriam-Webster (2022c) defines as "direct communion with ultimate reality." Perhaps it is so that when a crisis support worker, or for that matter, any other individual, is able to fully empathize and understand a person who is suffering, the union of the two restores a connection with the deepest aspects of oneself, resulting in healing on all levels: mentally, emotionally, physically, and spiritually. If this is true, then the full subjective experience not only serves as a gateway to healing, but also as a gateway to experience God or the divine, revealing the importance of both crisis and receiving help to resolve the crisis.

### References

- Belkin, G. S. (1984). *Introduction to counseling* (2nd ed.). William C. Brown.
- Brammer, L. M. (1985). *The helping relationship: Process and skills* (3rd ed.). Prentice Hall.
- Brammer, L.M. & MacDonald, G. (2002). *The Helping Relationship: Process and Skills* (8th ed.). Pearson.
- Caplan, G. (1964). *Principles of preventive psychiatry*. Basic Books.
- Carkhuff, R. R., & Berenson, B. G. (1977). *Beyond counseling and therapy* (2nd ed.). Holt, Rinehart & Winston.
- Geroski, M. A. (2017). Helping people in crisis. In *Skills for helping professionals* (1st ed, p. 233–). SAGE Publications, Inc. <https://doi.org/10.4135/9781483397283.n9>
- James, R. K. (2008). *Crisis intervention strategies* (6<sup>th</sup> ed.). Thomson Books/Col
- Janosik, E. H. (1984). *Crisis counseling: A contemporary approach*. Wadsworth Health Sciences Division.
- Kozłowska, K., Walker, P., McLean, L., & Carrive, P. (2015). Fear and the defense cascade: Clinical implications and management. *Harvard review of psychiatry*, 23(4), 263–287. <https://doi.org/10.1097/HRP.0000000000000065>
- Marino, T. W. (1995). Crisis counseling: Helping normal people cope with abnormal situations. *Counseling Today*, 38(3), 25, 40, 46, 53.
- Merriam-Webster (2022a). Merriam-Webster Online Dictionary. Retrieved November 19, 2022, from <https://www.merriam-webster.com/dictionary/spirit>
- Merriam-Webster (2022b). Merriam-Webster Online Dictionary. Retrieved November 19, 2022, from <https://www.merriam-webster.com/dictionary/empathy>

- Merriam-Webster (2022c). Merriam-Webster Online Dictionary. Retrieved November 20, 2022, from <https://www.merriam-webster.com/dictionary/mysticism>
- Neubauer, B.E., Witkop, C.T. & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspect Med Educ* (8)90–97. <https://doi.org/10.1007/s40037-019-0509-2>
- Pargament, K. I. & Cummings, J. (2010). Anchored by faith: Religion as a resilience factor. In *Handbook of Adult Resilience* (1st ed.). Guilford Press.
- Porges, S. (2011). *The polyvagal theory: Neurophysiological foundations of emotions, attachment, communication, and self-regulation*. Norton & Company.
- Schottke, D., Pollak, A.N. (2001). *Emergency medical responder: Your first response in emergency care*. American Association of Orthopaedic Surgeons.