

Is Spirituality Relevant in 21st Century Mental Health Forensic Populations

Robert J. Alves

Department of Psychology

University of Mount Olive

Psychology 101: Applications in Psychology

Professor Natalie Kemp

Abstract

Most of the psychological community views the use of spirituality in mental health therapy as fringe or pseudoscience, leading some of the forensic populations to recidivism. The American Psychological Society has only in recent years begun to explore the impact of spirituality on the treatment of mental health patients. Spirituality as a treatment method for forensic populations has rarely been explored, if at all, due to available resources, improperly trained professionals, and internal debate among psychologists in their attempts to define spirituality and how one can be an expert in the field. The limited information and data that is available clearly points in the direction that forensic populations benefit from mental health therapies built around spirituality. However, spirituality that is also built upon the solid foundation of an established religion is less prone to recidivism.

Keywords recidivism, forensic populations, spirituality, mental health

Is Spirituality Relevant in 21st Century Mental Health Forensic Populations?

The field of psychology can be hampered by informational delay curves in its treatment approaches and methods. Psychology can be delayed by a decade or more of yet to be analyzed information (Morris et al., 2011). Science potentially remains buried in outdated traditions and information regarding spirituality, its emerging importance in mental health, and spirituality's importance in forensic populations. Psychology's embrace and encouragement of secular humanism leads one to ask if spirituality is relevant in 21st-century mental health forensic populations.

As society continues to push headlong into the 21st century, technology, learning, and access to knowledge bases continue to grow at a rapid rate. According to research, it can take up to 17 years for information to go through research and evidence-based methods to finally reach practice (Morris et al., 2011). The psychological approaches to treating the human psyche are based on these evidence-based findings, research methods, and long-standing traditions (APA Presidential Task Force on Evidence-Based Practice, 2006). However, evidence-based methodologies and traditions of psychology are not all encompassing or infallible, and the information gleaned from this rapid knowledge expansion is subject to an informational delay curve (Morris et al., 2011). Therefore, are current methods used in psychology truly current?

Only in recent years have researchers used evidence-based exploration to investigate the role of spirituality in addressing mental health (O'Connor & Duncan, 2011; Stansfield et al., 2019). Documented case studies, research, and data collection on spirituality on mental health is rare and as a possible treatment in forensic populations is rarer. The use of spirituality is often dismissed as fringe or pseudoscience, viewed by many in the psychology community as having little merit (Gonsiorek et al., 2009). In the attempt to dismiss spirituality and hold to its

traditions, have some in the field of psychology chosen to overlook a fundamental aspect of humanity, the human spirit?

The number of people incarcerated, just within in the United States, is approaching a staggering level (Sawyer & Wagner, 2023). However, information regarding the use of spirituality as a form of treatment in mental health is limited and practically nonexistent in dealing with spirituality in forensic populations.

As the incarcerated population continues to grow, society demands results from mental health providers, prison personnel, religious providers, and community agencies, to protect their communities from the chances of repeat offenders. Additionally, it is the right of the incarcerated to receive proper care and treatment. This is not always the case, however, and therefore, the incarcerated population's mental health could continue to decline (O'Connor & Duncan, 2011; Stansfield et al., 2019).

Studies have indicated that the successful reintegration of prisoners back into society begins with rebuilding their character with positive rehabilitative methods that fosters meaning to their lives, sanctity of the life of others, self-realizations, and consequences of actions (Stansfield et al., 2019; Testoni et al., 2022). The use of spirituality in assisting with suicide prevention has been shown to be beneficial in giving those at risk a sense of purpose and belonging; also, noted that those who had continued access to support professionals after release from incarceration lessened recidivism and suicide rates in forensic individuals (Testoni et al., 2022).

Older forensic populations who have been incarcerated for extended periods, have higher states of mental health declines (Allen et al., 2008). Depression, feelings of abandonment, guilt, and longing to die can all be commonplace issues with this demographic. Ellison (1994) developed a treatment model to better understand how the use of spirituality and religion could

provide positive impacts for older and longer incarcerated prisoners. Incorporating religion and spirituality into the resources available to prisoners could provide a positive effect on self-esteem, social connections, stress reduction, and self-perceptions (Allen et al., 2008). However, it should be noted that stressors, such as depression, were greatly affected based on the prisoner's feelings of being connected to or abandoned by God and access to daily spiritual connections.

According to Smith et al. (2007), the positive effects of spirituality in treatment practices are evident. Incorporating spirituality can assist with the recovery process of forensic populations. The available data verify that forensic patients with access to spiritual treatment approaches had more positive results than those who had not received such care (Smith et al., 2007).

Contrary to some psychologists' stance on spirituality, the American Psychological Association (APA) determined that combining mental health psychotherapy with religion and spirituality did produce positive results and suggested that its members begin incorporating those models in their treatments of patients whose strengths were spiritual, indicating they fared better than those who were being treated through alternate humanistic methods (O'Connor & Duncan, 2011). These same positive spiritual treatment models should continue and expanded into forensic populations; however, the issues for forensic populations are resource availability and, more importantly, proper training and expertise by the mental health professional (APA Presidential Task Force on Evidence-Based Practice, 2006).

Given the available research dealing with spirituality in forensic populations, it should be clear that spirituality does play a role in the mental health, treatments and rehabilitations of prisoners while incarcerated and release back into society (Testoni et al., 2022). However, findings also suggest that spirituality alone is not enough. When incorporating spirituality with

the community support foundations, structures, and ease of access to religion, the patient had better overall mental health, less chances of recidivism, and stronger feelings of belonging and forgiveness (Stansfield et al., 2019).

Is spirituality relevant in 21st century mental health forensic populations? When combined with the foundations built upon by established religion, spirituality can benefit forensic populations (Stansfield et al., 2019). An individual can be spiritual but not religious, or religious but not spiritual; however, the true strength is being able to combine both and not forsaking one for the other (*King James Bible*, 1769/2017, Hebrews 10:25).

References

- Allen, R. S., Phillips, L.L., Roff, L. L., Cavanaugh, R., & Day, L. (2008). Religious/spirituality and mental health among older male inmates. *The Gerontologist*, 48(5), 692-697. <https://doi.org/10.1093/geront/48.5.692>
- APA Presidential Task Force on Evidence-Based Practice. (2006). Evidence-based practice in psychology. *American Psychologist*, 61(4), 271-285. <https://doi.org/10.1037/0003-066X.61.4.271>
- Ellison, C. G. (1994). Religion, the life stress paradigm, and the study of depression. In J. S. Levin (Ed.), *Religion in aging and health: Theoretical foundations and methodological frontiers* (pp. 78-121). Sage Publications.
- Gonsiorek, J. C., Pargament, K. L., Richards, P. S., & McMinn, M. R. (2009). Ethical challenges and opportunities at the edge: Incorporating spirituality and religion into psychotherapy. *Professional Psychology: Research and Practice*, 40(4), 385-395. <https://doi.org/10.1037/a0016488>
- King James Bible*. (2017). Cambridge University Press. Online, <https://www.kingjamesbibleonline.org> (Original work published 1769)
- Morris, Z. S., Wooding, S., & Grant, J. (2011). The answer is 17 years, what is the question: Understanding time lags in translational research. *Journal of The Royal Society of Medicine*, 104, 510-520. <https://doi.org/10.1258/jrsm.2011.110180>
- O'Connor, T. P., & Duncan, J. B. (2011). The sociology of humanist, spiritual, and religious practice in prison: Supporting responsivity and desistance from crime. *Religions*, 2, 590-610. <https://doi.org/10.3390/rel2040590>

Sawyer, W., & Wagner, P. (2023, March 14). *Mass incarceration: The whole pie 2023*. Prison Policy Initiative. <https://www.prisonpolicy.org/reports/pie2023.html>

Smith, T. B., Bartz, J., & Richards, P. S. (2007). Outcomes of religious and spiritual adaptations to psychotherapy: A meta-analytical review. *Psychotherapy Research*, 17(6), 643-655. <https://doi.org/10.1080/10503300701250347>

Stansfield, R., O'Connor, T., & Duncan J., (2019). Religious identity and the long-term effects of religious involvement, orientation, and coping in prison. *Criminal Justice and Behavior*, 46(2), 337-354. <https://doi.org/10.1177/0093854818801410>

Testoni, I., Zamperini, A., Gorszegno, V., Vincenzo, C. D., & Macarini, A., (2022). Minimum-security prison and suicide prevention. An Italian qualitative study on spirituality and social reintegration. *Counseling and Values*, 67(1), 44-65. https://brill.com/view/journals/cvj/67/1/article-p44_003.xml?ebody=article%20details