

## Exploring the Intersections of Religion and Spirituality with Race-Ethnicity and Gender in Counseling

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*"If I were really asked to define myself, I wouldn't start with race; I wouldn't start with blackness; I wouldn't start with gender; I wouldn't start with feminism. I would start with stripping down to what fundamentally informs my life, which is that I'm a seeker on the path. I think of feminism, and I think of anti-racist struggles as part of it. But where I stand spiritually is, steadfastly, on a path about love."*

—bell hooks

### Introduction

The above quotation by bell hooks (Lewis, n.d.) serves as an inspiration for this chapter which explores the intersections of religion and spirituality (R/S), race-ethnicity, gender, and sexual orientation in counseling. As a feminist social activist, bell hooks has critiqued race, class, and gender, which are central targets of social oppression in American society. And yet, when asked to define herself, she is clearly centered in her spirituality. It is our (authors) belief that for psychologists to understand clients holistically, religious and spiritual (R/S) perspectives are important considerations, along with many other multicultural dimensions in counseling.

This chapter is based on multicultural counseling principles (Sue & Sue, 2008) and spiritual competencies (Savage & Armstrong, 2010) and the work of Cole (2009) on intersectionality. Zinnbauer and Pargament (2000) suggested that there are four worldviews that mental health

professionals may hold towards religious beliefs and values in counseling. The two positions that are most compatible for working with R/S issues are the *constructivist* who sees beliefs as socially constructed by the individual and the *pluralist* who recognizes a spiritual absolute with multiple interpretations. The least compatible positions are the *rejectionist* who is antagonistic towards religion and the *exclusivist* who believes in absolute religious beliefs, i.e., that his or her belief is the *only* right way. Regardless of one's world view, it is essential that religious/spiritual diversity be considered in the context of multicultural counseling.

Our collective experience is that trainees often lack exposure to R/S or have had negative R/S experiences which can be corrected through positive interactions around R/S topics. In addition, psychology training programs have increasing numbers of highly religious trainees who may need to expand their worldview to be sensitive to religious diversity. If exploration of diverse faiths is too dissonant, it may be advisable for them to seek counseling training in a program that is consistent with their religious worldview. A multicultural framework assists in the process of becoming more open to R/S themes, which we

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will follow in this chapter. Dimensions of diversity and commonality in relation to the social categories of race-ethnicity, gender, sexual orientation, and religion/spirituality will be elaborated in Table 2.1. But first, let us understand what the term “intersectionality” means.

## Intersectionality

In keeping with the emphasis of this handbook on the intersection of identities, we will first reflect upon the meanings associated with negotiating multiple social identities, with R/S being one of many. According to Cole (2009):

Intersectionality makes plain that gender, race, class, and sexuality simultaneously affect the perceptions, experiences, and opportunities of everyone living in a society stratified along these dimensions. To understand any one of these dimensions, psychologists must address them in combination; intersectionality suggests that to focus on a single dimension in the service of parsimony is a kind of false economy. This insight invites us to approach the study of social categories with more complexity and suggests ways to bring more nuance and context to our research on the social categories that matter most in a stratified society (p. 179).

Cole (2009) recommends that researchers consider the “meaning and consequences of multiple categories of social group membership” (p. 170), by asking three questions to analyze the interrelationships of gender, ethnicity, sexual orientation, and R/S: “Who is included within each category? What role does inequality play? Where are there similarities between the social groups?” (p. 170) Cole clarifies that these questions attend to diversity and commonalities *within* groups, as well as analyze hierarchies of power and privilege or oppressions the groups may experience.

Although the intent of Cole’s critical analysis is directed towards social psychological research, political action, and alliance building, we believe that the basic questions are applicable in a therapeutic setting as well. We have considered these questions and offer an illustration of their complexity and layered meanings in Table 2.1. The table includes four dimensions to consider related to each social group: diversity, commonalities, power, and oppression. These dimensions might

seem like dichotomous scales with diversity versus commonalities within each group on one scale and the powerful versus the oppressed on the other. However, rather than looking at the four dimensions linearly, it may be more helpful to visualize it as a spherical model of self; this allows each of the elements within each of the dimensions to intersect or overlap throughout the sphere. For example, there are several elements of diversity within the gender group (e.g., gender expression, male–female, masculine–feminine); rather than placing them along a continuum, the elements may overlap and intersect with the other elements of diversity as well as the elements in the other dimensions. Furthermore, individuals may experience each of these qualities at differing levels; the elements at the surface may only cause a minor impact, whereas the elements experienced more deeply towards the core of the self could impact individuals more strongly. For example, a woman may identify as a female, yet feels more comfortable expressing herself in masculine ways. These elements of her diversity may intersect with her perceived flexibility in the roles she plays (i.e., commonalities dimension), her participation in the feminist movement (i.e., power dimension), and her experience with sexism (i.e., oppression). Additionally, if any of these elements are more significant for her, she may experience greater impact from them.

Additionally, the spherical representation allows a more complex layering of the intersecting areas of her life between groups. In the example above, the combination of her ethnicity, gender, sexual orientation, and R/S beliefs intersects to make her unique. The additional dimensions provide a way of seeing the diversity and commonalities within and between the groups as well as the power and oppression that she experiences as a part of each group.

There are many levels of intersections. Therefore, we caution the reader to avoid simplification of the multidimensional, complex, overlapping parts of self, community, society, and culture. For example, White males may have the perceived shared experience of more power over other groups. However, a White Jewish gay man may experience more oppression related to those aspects of his life than a White Christian

**Table 2.1** Race-ethnicity, gender, sexual orientation, and religion/spirituality on dimensions of diversity, commonalities, power, and oppression

Social category	Diversity within group	Commonalities within group	Power/privilege/movements	Types of oppression
Race-ethnicity	Traditional people of color categories (African American, Latino, Asian American, American Indian) Mixed race Social class (SES) Acculturation and generational status	People of color Unity Freedom Equal opportunity	White/European = dominant culture Civil rights movement Ethnic/racial pride	Prejudice Discrimination Racism Genocide
Gender	Fluidity of gender expression Male–female dichotomy Intersex/transgender Masculine–feminine Androgyny	Freedom Choice Authenticity Flexibility in roles	Male = dominant culture Feminist movement Men’s movement	Sexism Rape
Sexual orientation	Fluidity of identities Lesbian Gay Bisexual Pan-sexual Queer Questioning	Freedom Privacy Family life Love partnerships Noninterference of state	Heterosexual = dominant culture Human rights movement	Heterosexism Homophobia Bullying Violence (internalized = suicide)
Religion/spirituality	Fundamentalist—strict, literal, authoritarian, orthodox, conservative—traditional Liberal—moderate, flexible, reformed Secular—humanistic nontheistic Agnostic Atheist Extrinsic (other oriented) vs. intrinsic (inner) External/internal motivations exoteric vs. esoteric (private)	Universal truths, Meaning & purpose, Love, Compassion, Social justice, Connectedness	Christian = dominant culture Mainstream or minority status Minority religions: e.g., Jewish, Muslim, American Indian, Wicca	Anti-semitism Islamophobia Xenophobia Hate crimes

heterosexual male. The complexities of the individual experiences are unlimited; therefore we provide a variety of cases throughout this chapter to highlight the intersections of race-ethnicity, gender, sexual orientation, and R/S, and we invite the reader to revisit Table 2.1 throughout the remainder of this chapter.

In addition to the social categories of race-ethnicity and gender, we intentionally included sexual orientation because of the saliency of sexuality in exploring R/S issues with clients. In the table, there is a fair amount of diversity *within* each social category, including religion/spirituality. We will refer to representations of this diversity in the table as “groups” and discuss diversity/commonality within and between these social groups throughout the chapter. For example, if one explores the common ground (i.e., areas of agreement or shared values) between racial/ethnic groups, there are shared values such as identifying as “People of Color, unity, freedom, and equal opportunity.” Diversity factors in R/S will be discussed further in the section on R/S considerations.

Following Cole’s (2009) suggestions, one can explore dimensions of power, privilege, and oppression in multiple social identities. What follows is a discussion of some of the features represented in the table and ways in which we may encounter them in the clients we serve. We will illustrate these complexities through counseling vignettes where specific social categories in client presentation will vary and we will explore the clinical implications of each. All vignettes are fictionalized composites of typical clinical issues.

### The Case of Chanel

*Chanel is a 23 year old (yo) African-American college student who attends her African Methodist Episcopal congregation weekly. She feels spiritually empowered by her faith, challenged by racism in the larger community, frustrated by sexism inherent in her Black congregation, and privileged through her college education. She gains a sense of wholeness through her women’s group in her church and finds purpose through service projects with the homeless community. However,*

*she has yet to reveal her sexual orientation and has somewhat reluctantly come to counseling to talk about coming out.*

There are multiple oppressions Chanel is arguably experiencing: she is an African-American woman in a society where racism and sexism remain a problem. Conversely, her Christian faith and access to a college education represent points of privilege. Her experience of the various identities with which she identifies and related emotions can clearly shift from context to context (e.g., church, family, and school). We will return to Chanel later to address these issues in greater depth.

In the remainder of the chapter we propose to explore the following themes: (1) historical perspective and rationale for addressing R/S in the multicultural counseling literature; (2) R/S considerations and race-ethnicity, gender, and sexual orientation; (3) applications in clinical practice; (4) training and supervision considerations; and (5) summary and recommendations. We have included a list of resources (e.g., books, films, and websites) and the Association for Spirituality, Ethics, Religion and Values in Counseling (ASERVIC, 2009) spiritual competencies in the Appendices.

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## Historical Perspective and Rationale for Including R/S

Historically, mental health professionals have been reluctant to delve into R/S issues (Cashwell & Young, 2011; Plante, 2009); however, including these in the counseling literature is increasingly important. American society is becoming more diverse as people from multiple countries and cultures are making the USA home (U.S. Census Bureau, 2010). For them, and for the majority of Americans, R/S practices are important aspects of life and may impact physical wellness and psychological well-being (Spector, 2003). Spirituality and religion can also correlate with mental health and illness (Koenig, 2005). Although about 90 % of Americans believe in God (Newport, 2011) and about 40 % attend

worship services regularly (Newport, 2007), R/S has been off-limits in the therapy office for many practitioners.

However, interest in R/S research and practice has steadily increased (Pargament, 2007; Puig & Adams, 2007; Richards & Bergin, 2000) and numerous studies focusing on R/S have been conducted in the field of psychology (Zinnbauer, Pargament, & Scott, 1999). The social sciences literature is also filled with research exploring the role of R/S on constructs that impact clients' lives (e.g., psychological well-being, coping with stress, illness, death, dying, and grief, among others; Koenig, 2005). Division 36 of the American Psychological Association, the Society for the Psychology of Religion and Spirituality, has an established record of addressing diverse religious and spiritual themes in psychological research and practice. Psychologists and scholars can no longer ignore the central role of R/S in our increasingly multicultural population.

## Definitions of Religion and Spirituality

Religion and spirituality are overlapping constructs and often used interchangeably. Religion often refers to the organized or institutionalized expressions of spiritual yearning. These various expressions include rituals and other sanctioned or guided behaviors that arise from a *search for the sacred* (i.e., that which is set apart, holy, and of Ultimate value) and are supported and validated within a particular religious group (Hill & Pargament, 2008). Although spirituality is at the center of religion, it can encompass broader experiences that may not be related to religion (Pargament, 1999). Religion has been easier to research because it involves measureable (behavioral) data (Koenig, 2005). Spirituality, on the other hand, is more subjective, and definitions are as varied as its proponents. Since there are many possible definitions for spirituality, we suggest that psychologists maintain an open and curious attitude as they strive to understand the client's R/S worldview.

We offer this definition of spirituality from the counseling profession:

'Spirituality' is defined as a capacity and tendency that is innate and unique to all persons. This spiritual tendency moves the individual toward knowledge, love, meaning, peace, hope, transcendence, connectedness, compassion, wellness, and wholeness. Spirituality includes one's capacity for creativity, growth, and the development of a value system.... While spirituality is usually expressed through culture, it both precedes and transcends it (ASERVIC, 1995).

Moreover, Griffith and Griffith (2002) provided a definition of spirituality as a contextual and relational experience: "a commitment to choose, as the primary context for understanding and acting, one's relatedness with all that is" (p. 15). To elaborate further, transpersonal psychologists identified nine dimensions of spirituality:

- 1) A transcendent dimension, 2) meaning and purpose in life, 3) mission in life, 4) sacredness of life, 5) material values (meaning that material things are valued but not sought as the end of spiritual pursuits), 6) altruism, 7) idealism, 8) awareness of the tragic, and 9) fruits of spirituality (Elkins, Hedstrom, Hughes, & Leaf, 1988, pp. 10–12).

In a study using a grounded theory approach, Puig and Fukuyama (2008) investigated the meaning of spirituality with members of differing ethnic groups. In this qualitative study, persons of diverse spiritual and religious traditions and ethnicities were interviewed and six emergent themes were identified: Concepts of God (higher power, the Ultimate, mystery), relationship and connection, subjective personal inner experience, outward actions or behaviors, way of life (morals, culture), and religion.

According to ASERVIC (2009) guidelines for spiritual competencies, practitioners are asked to "actively explore one's own attitudes, beliefs, and values about spirituality and/or religion and continuously evaluate the influence of his or her own spiritual and/or religious beliefs and values on the client and the counseling process." Thus, we suggest that psychologists begin R/S exploration by discussing their personal histories and understandings of what it means to be "spiritual."

## R/S Diversity *Within* Group

Multicultural educators often focus on within-group diversity when exploring race-ethnicity. The same is true for R/S, and there is much diversity in expression of religious beliefs and practices (Puig & Fukuyama, 2008; also see Table 2.1). First, religious expression may range on a continuum from fundamentalist or orthodox, which is literal, rule bound, and authoritarian on the “right,” to conservative, traditional, or moderate in the middle, to progressive, liberal, or reformed, with flexible and relativist values on the “left” (see Borg, 2001; Spong, 1992). Although some mainstream denominations are known to be conservative or liberal, this continuum of difference exists *within* denominations and in the major world religions. In addition, persons who subscribe to secular humanistic values may describe themselves as spiritual but not religious, and some persons may identify as agnostic or atheist. On the far extremes of this continuum are fanatics and radicals who profess religious ideology but operate outside of social norms and intent of mainstream R/S values.

To complicate issues further, the media tends to present negative news which distorts R/S and promotes prejudicial stereotypes about religion (Plante, 2009). There are also personal and communal expressions of R/S; expressions may stem from intrinsic (inner oriented) and/or extrinsic (outer oriented) reasons, and similarly, R/S practices may be invisible (private/esoteric) and/or visible (public/exoteric). The degree to which individuals feel power and privilege from their R/S affiliations may vary a great deal depending upon sociocultural context. If we consider the commonalities across R/S differences, race-ethnicity, gender, and sexual orientation, we find basic human values such as the desire for freedom of choice, authenticity, compassion, universal truths, and unity. Interfaith initiatives and ecumenical communities strive to bridge R/S divisiveness, such as the Taizé (n.d.) community in France. In considering multiple social identities, people are often at different levels of awareness, identity development, and empowerment related to the various categories (Fukuyama & Ferguson,

2000; Funderburk & Fukuyama, 2001). These domains of difference within R/S practices are relevant when considering counseling with clients around R/S themes and will be discussed further in the applications section.

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## R/S Considerations and Race-Ethnicity, Gender, and Sexual Orientation

In this section we will explore the intersections of R/S and race-ethnicity, gender, and sexual orientation, respectively. These intersections contain complex interactions that require focus and study, not quick assumptions.

### R/S and Race-Ethnicity

Religion and culture historically have been interactive and central for defining racial-ethnic minorities, hereafter referred to as people of color. Cervantes and Parham (2005) stated that religious/spiritual dimensions tend to prominently frame life experiences for people of color. R/S influences that are present in racial-ethnic cultural groups will impact working with people of color in counseling; for example, there may be R/S attitudes such as viewing the dominant American culture as too permissive, misunderstanding or distrusting psychology, or requiring certain beliefs and practices to be an in-group member. What follows is an overview of how these linkages manifest for a variety of racial and ethnic groups. Understandably, there is a wide variation on how individuals define their R/S and racial-ethnic identities.

R/S themes intersect with race-ethnicity for many communities, such as the African-American church (Boyd-Franklin, 2003), which has provided social support to resist racism and therapeutic responses and validation of life struggles through communal worship (Frame & Williams, 1996). Some counselors have incorporated a spiritual approach based on African-centered cosmology for counseling Black clients (Parham & Parham, 2002).



American Indian spirituality which is tied to the land has been disrupted through colonization and genocide. A return to indigenous spiritual practices has been associated with healing addictions and recovery from trauma for American Indian clients (Duran, 2006). Strong extended family ties have been associated with observing religious traditions (such as in Jewish and Latino families; McGoldrick, Giordano, & Garcia-Preto, 2005). East Asian Americans represent a wide diversity of R/S affiliations and yet share some commonalities (e.g., Confucianism and Buddhism; Ano, Mathew, & Fukuyama, 2009). South Asian immigrants may come from Hindu, Muslim, and Christian backgrounds. Participation in religious groups aids new immigrants to adjust to a new culture as well as to preserve some of their traditional cultural values, but it also may increase more R/S pressures on clients. That is, it would be extremely difficult to disconnect from one's religious identity if it is submerged into one's racial/ethnic identity.

Middle Eastern individuals may identify with a number of religious traditions: Christian, Coptic Christian, Greek Orthodox, Jewish, or Muslim. With the increase in the number of immigrants from many nations, it is important for counselors to be aware of these variations.

For example, Jewish people live in the intersection of ethnicity and religion with some groups identifying as secular Jews and others as various degrees of religiosity by affiliation (e.g., Zionist, Orthodox, Conservative, Reform, and Reconstructionist). It is interesting to note that a large number of Jewish individuals also identify with Buddhist practices (see Fischer, 2003).

In Latin American cultures it is common to find a mixture of religious traditions including Catholicism, Fundamentalist Christian religions, Afro-centric practices (e.g., *Santería*), and indigenous folk beliefs (e.g., *espiritismo*). For the latter, communing with spirits, psychic phenomena, or participating in secret society rituals are common practices. However, not all clients will be open with their counselor about these spiritual beliefs and practices, which are outside of the dominant culture (Zea, Mason, & Murguía,

2000). Some Latina women who have psychic abilities may serve as healers and be promoted in status as mediums within Cuban American communities (Espin, 1990). So as a female she may lack social power, but as a female psychic, she may gain social status and influence. Psychologists may need to be open to collaborative relationships with indigenous healers (see Moodley & West, 2005).

## R/S and Gender

For psychologists who aspire to be cross-culturally sensitive to R/S beliefs and practices, it is suggested that they maintain a curious and open attitude towards world religions (Smith, 1995) and become aware of personal biases and cultural blinders. In this section we will discuss women's and men's spiritualities as found in recent social movements.

### Women's Spirituality

Most women's spiritual development takes place within patriarchal cultural and religious systems, which has relatively few feminine symbols for the Sacred. Recent feminist R/S movements have rediscovered the Divine Feminine and redefined spiritual power with inclusive language (Anderson & Hopkins, 1991). Carol Christ (1995) argues that the lack of feminine cultural/spiritual role models is not historically the norm nor is it true for all religions. Shakti is a powerful goddess in the Hindu religion that is related to death and rebirth—the cycle of life. Worship of the Virgin Mary in the Catholic religion can be traced back to the early church. There has been a resurgence of interest in Goddess worship in Western cultures as well. Christ describes this “Rebirth of the Goddess” as finding:

a compelling image of female power, a vision of the deep connection of all beings in the web of life and a call to create peace on earth. The return of the Goddess inspires us to hope that we can heal the deep rifts between women and men, between “man” and nature, and between “God” and the world, that have shaped our western view of reality for too long. (p. xiii).

In addition to challenging a masculine God image, feminists have criticized spiritual development models as being too narrowly defined. Fowler's (2004) stages of faith development is perhaps one of the better known R/S models and is based on the premise of individuation from family of origin beliefs in the process of forming one's own internalized spirituality. This linear model is based on adult development models (Erikson, 1982) and masculine archetypes of the journey and hero myths common in Western civilization (see Campbell, Moyers, & Flowers, 1991). Anderson and Hopkins (1991) argue that women's transformations may happen while remaining connected to the home vs. the imperative to sever ties and venture into the unknown in order to mature fully. Parks (2000) describes the experience of developing faith for women as involving both "venturing and dwelling" (p. 52).

Warwick (2001) stated that "sometimes women need to change religious identities as they redefine themselves" (p. 127). Christ (1995) described women's spiritual development as involving the process of experiencing nothingness, awakening, insight, and new naming. The experience of nothingness may be common to both men and women; however, it emerges from different sources. Christ posited when a woman rejects the self-hating and misogynistic messages of the culture she experiences a feeling of nothingness and questions the meaning of her life. This questioning can lead to an awakening and insight into her grounding in the powers of self and being. New naming happens when women give words and form to their personal experience.

### **The Case of Shanaz**

*Shanaz is a 28yo married Muslim, college educated woman who had let go of her faith, having been acculturated into American mainstream values. Now, she is the mother of two young daughters, and she wants to connect with her religious roots in order to raise her children as Muslims. She is struggling with how to reconcile both feminist and traditional values.*

As Shanaz's psychologist, your personal cultural identities may influence your approach to counseling her. You may wish to consider what

resources would be helpful to Shanaz's search for her cultural and religious roots and reconciling these with her feminist identity. Other important considerations are Shanaz's socioeconomic class and her skin tone as these factors may influence her experiences of power and privilege.

Gender may interact with other factors such as race-ethnicity to create other unique developmental paths for women. For example, Rodriguez (2004) proposed a new paradigm for Mestiza spirituality that critically analyzed the role of religion in the colonization of Latin America. She stated that "Latino(a) culture, religion, and spirituality are so integrated that to try to define spirituality separated from culture creates a false dichotomy and does a disservice to the Latina community" (p. 319). Rodriguez suggested a process whereby Latinas (drawing from Catholic and indigenous roots) simultaneously engage in traditional religious rituals and community and social justice initiatives. She posits that one's spirituality is strengthened by learning to function in these cultural borderlands of multiple identities, not seeing them as oppositional or exclusive ("either/or"), but being able to shift identities and recenter self, depending on the cultural context and type of oppression (sexism, racism, heterosexism, etc.). The bicultural Latina has to deal with conflicting languages and values, see beyond dichotomies, and transform oppression through developing compassion. This process manifests through shared community-based stories and participating in daily rituals that "foster habits of the heart" (p. 338), for example, religious traditions such as *las Posadas* (the Inns) or *Dia de los Muertos* (Day of the Dead). The process of being bicultural necessitates that one be able to hold multiple worldviews simultaneously, and in doing so, creatively build bridges that emerge with new paradigms, often resulting in inclusive or "both/and" perspectives. This is an example where being in the intersection is empowering by living it.

### **The Case of Maria Elena**

*Maria Elena is a 45yo, second generation Mexican American (Chicana) who is both deeply religious and actively involved in the migrant*



*worker justice movement in her hometown. Her 19yo daughter came home from college challenging Maria Elena's religiosity and refusing to participate in what she called "patriarchal, misogynistic oppressive rituals." This family conflict represents the challenges of bicultural identities and generational divides that can exist. They decide to seek counseling to help resolve their heated arguments.*

In this case, there are multiple considerations for each woman and for the mother–daughter relationship. For example, you may choose to attend to the family system (mother–daughter dyad) or each woman's worldview (i.e., what it means to be a woman, an immigrant, second- or third-generation immigrant, religious vs. secular). Sometimes when family arguments arise based on religion, it may not be primarily about religion, but other power dynamics instead. There may be other relevant intersectionalities to consider (e.g., new feminist ideals, exploring sexual orientation, rejecting the traditional culture of origin in favor of the new culture experienced at college, and degree of acculturation). Exploring relevant factors behind the apparent conflicts is an important task as you counsel this family.

Gender roles within organized religion mirror the larger society and cultural context, with women gaining access to leadership positions in some congregations. From a dominant culture perspective, men's culturally ascribed role to be in control may actually limit their experiences of the numinous. On the other hand, women may be more attuned to mystical experiences through socially sanctioned sensitivity to emotions and intuition and receptivity to others through caretaking roles (Christ, 1995).

### Men's Spirituality

A men's movement has incorporated ways to access nontraditional expressions of masculinity and spiritualities (Bly, 1990; Hillman, 1996). Based on Jungian archetypes, the mythopoetic movement has encouraged men to go more deeply into the meaning of father–son relationships in defining what it means to be a man. In parallel fashion, following a call from Louis

Farrakhan, hundreds of thousands of African-American men gathered in Washington, DC, in October 1995 for the Million Man March to affirm their commitments to family and community (CNN, 1995). These movements speak to the need for men to mentor one another and to go beyond the limitations of traditional masculine gender roles. Bly (1990) introduced using sacred space and rituals, similar to indigenous rituals for initiation into manhood, to aid men to get in touch with their authentic selves and to heal psychological wounds, such as disconnecting from feelings (Bryannan, 1990; Smith, 2000).

A conservative evangelical Christian men's movement called Promise Keepers was predominant in the news in the 1990s. Largely appealing to White males, this movement endorsed traditional gender roles and strict Biblical interpretations. Mass rallies were a means for inspiring men to lead moral lives (Ontario Consultants on Religious Tolerance, n.d.).

### R/S and Sexual Orientation

Although the main emphases of this handbook are gender and race-ethnicity, we believe that it is important to include sexual orientation in discussing R/S themes. People who are in the process of defining their sexuality often seek counseling, and R/S attitudes towards sexual orientation may be salient. The issue of sexual orientation and religion has unfortunately been polarized by politics and the media. For a thoughtful analysis of religious and psychological considerations related to sexual orientation, see a special issue on the topic in *The Counseling Psychologist* where authors discuss the pros and cons of reparative therapy (see Morrow & Beckstead, 2004). It is unethical to try to change someone's sexual orientation, but personal religious values may be considered by clients as they explore sexual decision making and relationships.

It is important to note that although the media portrays sexual orientation as dualistic (either/or) and religion as conservative (condemning), neither positions are reality. In fact, there is a wide

range of R/S attitudes that run along a continuum from conservative to liberal and affirmative, just as sexual orientation may be defined as being more fluid than dichotomous. National religious denominations continue to work on this issue with some taking an affirmative stand and others splitting on the issue (Gray & Thumma, 2005). R/S liberation themes for LGBT persons of color are emerging in response to this divide, working towards integrating spirituality and homosexuality (see Griffin, 2010; Lassiter, 2011).

The Metropolitan Community Church (MCC) was established specifically to reach out to LGBT persons, and even within mainstream denominations, nonofficial support groups have formed such as Dignity within the Catholic Church. Although it is possible for individuals to find affirmative congregations, they may not be representative of the seeker's race-ethnicity. Urban settings such as San Francisco and New York City offer a greater range of affirmative and racial/ethnically diverse congregations. Counseling LGBT clients with R/S issues will be discussed further in the applications section. Now, let's return to the case of Chanel.

### **The Case of Chanel (Reprise)**

*Chanel has been seeing you for the past 6 weeks about coming out to her family and church community. Although she consistently leads with her faith she is increasingly frustrated with her church, especially when the pastor speaks against homosexuality.*

Chanel may find her faith as a source of strength and shield against racism. But her emerging sexual awareness may threaten her sense of community and group identity. She may wonder if there are any other Black women who are like her. Chanel's experiences with racism and sexism may have affected her feelings about coming out. It is important for clinicians to understand their conceptualization of sexuality and spirituality as these are often connected to each other vs. it being an "either-or" proposition. Again, consider your personal, cultural, and religious identities that could influence your approach to counseling Chanel.

### **Dominant Culture: Christianity, Maleness, White Privilege, and Heterosexuality**

Although the diversification of the USA is changing its demographics, including representation of diverse R/S traditions, America remains a predominantly Christian nation with about 85 % of Americans identifying with some form of Christianity. Within that number, 59 % identify with being Protestant and 26 % Roman Catholic (Newport, 2000). This dominance is also manifest in the observance of national holidays from the Gregorian calendar. Dominant R/S images of many Christian denominations include depictions of God as an older White father figure. This trend harkens to artistic renditions of the Christian narrative from the Renaissance, such as found in the Sistine Chapel in the Vatican. The words of Reverend Martin Luther King remain true to this day that "the church is still the most segregated major institution in America" (Archives and Archives and Regional History Collections, 1963). The divisions within organized religion continue to involve race-ethnicity, gender, sexual orientation, national origin, and socioeconomic status.

Scholars and practitioners have underscored the importance of attending to issues of power and privilege as they relate to multicultural counseling practice (Carter, Helms, & Juby, 2004; Fukuyama, Hernandez, & Robinson, 2007; Fukuyama, Siahpoush, & Sevig, 2005; Helms, 1990; Ivey, Ivey, & Zalaquett, 2010; Nazario, 2003; Sue & Sue, 2008). Specifically, the study of White racial identity development, White privilege, and the impact of racism, prejudice, discrimination, and micro-aggressions has contributed towards understanding the dynamics of dominant culture (Helms, 1990, 1992; Sue & Sue, 2008). These attitudes and behaviors may be overt and evident or so subtle as to appear invisible and innocuous (Sue, 2003). The various intersections of these positionalities may influence an individual's ability to see their impacts, including interpersonal relationships, community involvement and contributions to solving social problems, sociopolitical beliefs and affiliations, and

general worldview. The discussion of R/S issues also calls for attending to the intersectionality of these constructs, including the impact of Christianity as part of the dominant paradigm (Heppner et al., 2009; Parker, 1998; Trimble, Helms, & Root, 2003).

Mental health professionals have an ethical responsibility to become aware of how their social group memberships (and inherent privileges and biases) may find their way to the therapy session. Psychologist training and supervision must attend to these issues and consider approaching the training of all practitioners as agents of social justice (Goodman et al., 2004).

### The Case of David

*David is a 21yo White, Jewish male of upper-middle class socioeconomic status. He presents as a mandatory diversion client after a DUI arrest. He claims that he was just unlucky to have been caught and denies having a substance abuse problem. He also reports that his mother, who is a recovering alcoholic, has advised him to go to Alcoholics Anonymous. However, he refuses because he doesn't like to acknowledge a "higher power." David has not attended synagogue since his Bar Mitzvah, and says that he is atheist.*

David experiences both privilege and oppression through his multiple identities; as a White male, empowered, as a Jew, oppressed. We can hypothesize how he may be impacted by his race-ethnicity, gender, and religious background. Substance abuse has been considered at times as a failed spiritual search (see May, 2007), and in this case, David's antireligious attitude will impact his ability to attend to his substance abuse and recovery issues.

## Applications in Clinical Practice

In the following section, we discuss the impact of multiple identities in the therapy relationship as related to R/S factors. First, psychologists must consider theoretical approaches that can accommodate cultural complexity and assess the salience of identities and the relevance of R/S to the presenting issues. R/S expressions may be

beneficial and/or harmful. Therapists may consider utilizing spiritual interventions when appropriate. A brief discussion of mindfulness meditation practices related to mental health is also included.

### Theoretical Approaches

Passalacqua and Cervantes (2008) recommended using a narrative approach to counseling and exploring the salience and relevance of religion/spirituality to the client's problems. They cite the work of Swartz-Kulstad and Martin (2000) who have proposed a Cultural and Contextual Guide (CCG) process as an attempt at this integration. The CCG provides a method for therapists to consider culture and context in their diagnostic and treatment practices through an assessment of five contextual cultural factors: cultural orientation, family environment, community environment, communication style, and language. The goal is to establish an integrative narrative of the client that is intertwined with contextual components and multiple identities that define human experience.

Nazario (2003) described oppression sensitive therapy as an empowerment model of counseling, stating that "Oppression Sensitive is not a series of techniques, but a philosophical and political stance that provides a broad umbrella of social justice and power, as lenses for conversations with clients" (p. 111). The author suggests that a social category not be isolated from another but for the counselor to explore "all domains of influence" simultaneously (p. 107). For example, three overlapping communities were identified for Latino/a gay couples (LGBT, Latino/a, and the dominant culture), which are often at odds with each other. The role of the therapist is to engage in an open egalitarian conversation with clients on where they see privilege and/or oppression operating in their family system and in their relationships. The therapist is open about his/her privileges also when considering oppressions like racism, sexism, heterosexism, classism, or ethnocentrism. The therapist maintains an attitude of curiosity in asking about "domains of influence"—where they converge/diverge, when does one feel

privileged or oppressed, and how does one deal with partner's issues. Issues of power may be related to topics like income, language, monogamy, family, or religion, while also dealing with heterosexism, homophobia, and power vis-à-vis the dominant culture.

### **The Case of Juan and Greg**

*Juan is a 28yo Venezuelan Catholic partnered with Greg, a 35yo Caucasian Methodist. They present to therapy to address increased tension and arguments related to Juan's parents' recent relocation to their city.*

Based on an oppression sensitive approach, questions would be posed to begin exploring the potential identities, domains of influence, or systemic factors impacting this couple. In this case, the messages in Latino, dominant, and LGBT cultures towards being a committed gay couple need to be examined carefully. Additionally, religious differences may affect the couple's ability to negotiate other family dynamics.

### **Saliency of Identities in Therapy**

Robinson and Howard Hamilton (2000) affirmed that attention to the intersection of gender, culture, class, and race is salient to understanding that psychosocial identities embody each of those constructs and determine one's psychological framework. We add that R/S can be construed as salient identities that clients must negotiate alongside other social identities. More specifically, in the case of multiple social identities, the counselor may want to consider which identities are salient to the "problem" and how those identities are part of the solution and/or part of the problem. Many scholars have stated that R/S can be a double-edged sword for clients, either helping and/or hindering problem solving (see Fukuyama & Sevig, 1999). Psychologists can analyze these social identities with a "test" for saliency (that is, asking how relevant this identity status is to the client) and analysis of privilege (or lack thereof) in considering power in each identity status.

### **R/S Assessment**

Assessment of R/S domains may be qualitative, quantitative, or mixed in nature (Gill, Harper, & Dailey, 2011). The assessment process aims to gather information about the client and begins to conceptualize the clients' issues, sources of distress, and resilience or support. Minimally, counselors may inquire about R/S affiliation and practices routinely during an intake and ask if the client would like them to be considered as part of treatment (Plante, 2009). A more in-depth interview is warranted for clients who have a more complex R/S history or who are presenting specifically with R/S issues. Granted, there may be times when R/S issues are present but may be denied as relevant by the client, such as in the "Case of David" discussed above. These situations warrant caring and careful consideration and consultation.

Richards and Bergin (2005) have described several categories for consideration in a spiritual assessment, including religious affiliation and orthodoxy, spiritual identity, God image, value–lifestyle congruence, and R/S health. Griffith and Griffith (2002) suggest that counselors focus on listening for images, metaphors, and meaning-making through words that point to the Sacred. Often existential issues are salient in dealing with death and other significant loss, traumatic events, or abuse. Qualitative and constructivist approaches allow for client elaboration. Asking clients to "check a box" to describe R/S affiliation may be too restrictive. Basically the clinician is seeking ways to understand how the client "makes meaning" related to their salient social categories.

### **Healing R/S**

As implied above, sometimes R/S is a resource for change. Clinebell (1995) contends individuals can assess their R/S lives by asking whether or not participation in such activities enhances their sense of spirituality. Health promoting (salutogenic) religion/spirituality includes feeling nurtured, stimulated for growth, connecting with others and nature, and lessens feelings of isolation or

depression. Religious groups provide a much needed sense of community and safety net for many. Compilations of studies on religion and health show positive associations with religious coping, such as having healthier lifestyles, greater hope and optimism, purposeful living, and more pro-social traits like forgiveness, sociability, and altruism (Levin, 2001).

### **Harmful R/S**

It is important to note that R/S is not always a source of healing; indeed, it has been documented to be a potential source of harm (Griffith, 2010). Problematic manifestations of R/S may take several forms. First, a person may seek God as a parent figure because of insecure attachments or seek security through belonging in a worship community. These may set the stage for an inflexible or absolutist view of God or ascribe power to the community to define the individual worshiper. These, in turn, can create intrapsychic or interpersonal problems for clients. A second issue is the effort to assert dominance of personal spirituality over religion; that is, the individual wrestles with the messages of organized religion once a sense of personal spirituality and a direct relationship with God are established. In doing so, the individual may create problems in other areas of his or her life (partnership/marriage, family, worship community). This would depend on the messages the individual receives within these contexts. Finally, a problem may manifest in the conviction that one's religion is superior to another's and this may create divisiveness, tension, or political conflicts. The latter has become increasingly problematic not only within the USA but also around the globe.

Historically speaking, psychiatry has regarded religious preoccupation as a symptom of mental illness, and sometimes it is. R/S may become distorted by a mood disorder (e.g., bipolar mania) and R/S may also present as disorganized beliefs in clients who are psychotic or have lost touch with shared reality. Anxiety disorders may be exacerbated by orthodox or rigid religious adherence. Practitioners have outlined specific ways in which these issues present in therapy and how to address them (Griffith, 2010; Koenig, 2005).

It is generally not advisable to engage in religious talk with someone who is having a psychotic break, for example. However, there may be instances when disorganized thoughts and behaviors may be a "spiritual emergency" (see Grof & Grof, 1989). Other examples of harmful spirituality include child abuse (by clergy or in a context of highly religious adults), cults, spirit possession, spiritual bypass (that is, using a spiritual reason to avoid needed psychological work), and religious wounding (Fukuyama & Sevig, 1999).

### **Spiritual Interventions**

Not all spiritual issues need spiritual interventions, but recent literature now provides guidance on the "what and how" of incorporating spiritual interventions. Helminiak (2006) suggested four ways to address spiritual issues in counseling: (1) validate and use client's spirituality as a resource for healing or problem solving, (2) reinterpret client's spirituality using client's language to reframe problem and expand R/S understanding, (3) resist client's spirituality, for example, questioning a "punishing God" as healthy for client's well-being, and (4) make referrals to trusted religious leaders (e.g., clergy, Rabbi, Imman, chaplains, Buddhist teacher).

Aten, McMinn, and Worthington (2011) included the following topics in formulating spiritually oriented interventions: "making meaning" with clients, dealing with values conflicts in therapy, assessing the sacred in clients' lives, incorporating prayer, understanding the power of forgiveness, challenging problematic religion/spirituality, learning a variety of meditation practices (specifically mindfulness meditation and yoga as adjuncts to therapy), exploring when and how to utilize sacred writings, and using spiritual journaling for personal growth. The authors suggested that practitioners consider the following recommendations when using spiritually oriented interventions: (1) be clear about ethical guidelines that relate to R/S diversity issues in the workplace, (2) select interventions that are congruent with the client's religious worldview, presenting problems, and the therapist's theoretical



orientation, (3) consider the evidence that supports the interventions, and (4) seek training, consultation, and supervision on integrating spiritually oriented interventions.

Plante (2009) provided an inclusive list of spiritual practices that could be applied across faith traditions, describing it as

Thirteen tools for your psychotherapeutic toolbox: 1) Prayer, 2) Meditation, 3) Meaning, purpose, and calling in life, 4) Bibliotherapy, 5) Attending community services and rituals, 6) Volunteerism and charity, 7) Ethical values and behavior, 8) Forgiveness, gratitude, and kindness, 9) Social justice, 10) Learning from spiritual models, 11) Acceptance of self and others (even with faults), 12) Being part of something larger than oneself, and 13) Appreciating the sacredness of life. (p. 33)

Based on our experiences as practitioners, we would recommend that psychologists interested in incorporating any of these “tools” practice them with supervision/consultation before actually utilizing them with clients.

### Mindfulness Meditation

A recent trend in psychology is the inclusion of meditation into individual and group counseling. Mindfulness is based on Eastern meditation practices and encourages individuals to focus their attention in the present moment with a nonjudgmental manner (Germer, Siegel, & Fulton, 2005).

Several psychotherapy approaches have incorporated mindfulness meditation practices, including Mindfulness-Based Stress Reduction (MBSR; Kabat-Zinn, 1979), Mindfulness-Based Cognitive Therapy (MBCT; Kabat-Zinn, 2003), Acceptance and Commitment Therapy (ACT; Hayes, Strosahl, & Wilson, 1999), and Dialectical Behavior Therapy (DBT) for working with borderline personality disorder (Linehan, 1993). These mindfulness-based approaches have been used to treat anxiety disorders, depression, trauma, pain management, and other health-related concerns.

The interplay between developing ego strength and being able to surrender (or let go) is an ongoing process. Remember the bell hooks’ quotation from the beginning of this chapter. Acquiring positive gender and racial/ethnic identities are worthy psychological goals, and paradoxically, transcending these identities may be empowering, also. To paraphrase Ram Das, a

spiritual teacher, “psychology is concerned with arranging the furniture in the room. Spirituality is concerned about getting out of the room” (D. Hackett, personal communication, June 10, 1990)” (cited in Fukuyama & Sevig, 1999, p. 87).

### Training and Supervision Considerations

The authors contend there is a critical need to incorporate spiritual and religious issues in counseling (Burke et al., 1999; Fukuyama & Sevig, 1999; Hage, Hopson, Siegel, Payton, & DeFanti, 2006; Myers & Williard, 2003). Although 90 % of Americans have strong religious beliefs (Gallup & Lindsay, 1999) and 81 % of clients prefer a therapist competent in integrating their beliefs and values in counseling (Sims, 1994), it is surprising that graduate training programs may not be addressing R/S issues (Hage et al., 2006). Although ASERVIC (2009) outlines the R/S competencies for training and supervision (see Appendix 1), faculty may lack the knowledge, preparation, and competence to address these issues in training (Adams, Puig, Baggs, & Wolf, 2011). Therefore, a crucial first step may not necessarily be related to how to train students but how to train faculty and clinical supervisors in R/S topics in counseling, training, and supervision. The following recommendations by R/S experts may be helpful in beginning this process: (1) implement continuing education for faculty and clinicians, (2) allow faculty and training clinicians a time and place to explore their own spiritual beliefs and biases towards R/S, (3) promote discussion among faculty about R/S issues, and (4) encourage faculty to explore ways to integrate R/S in their own coursework (Adams et al., 2011). As faculty and clinical trainers have opportunities to explore their own biases and prejudices related to R/S issues, gain comfort in addressing R/S topics, and acquire R/S clinical competency, they will be better suited to supervise and train students to do the same.

Although a lack of consistent training in R/S issues exists, R/S competency benchmarks have been identified for trainees (Savage & Armstrong, 2010). In a recent study (Baggs, Wolf, Puig, & Fukuyama,



2011), researchers evaluated a course specifically designed to educate trainees on the integration of spiritual issues in multicultural counseling. Preliminary findings indicated that after their training, students who took the course reported that they felt more competent in addressing spiritual issues in counseling related to the 14 ASERVIC competencies. Graduate programs and clinical training sites need to prepare trainees to address R/S issues with clients by providing specific R/S education and supervision that allows time to process the impact of the R/S issues on the trainees' personal belief system as well as their clinical work. If constraints (e.g., budgetary) limit a stand-alone class, the 14 ASERVIC competencies offer a nice framework from which to integrate R/S issues into other courses such as multicultural counseling, gender studies, life span development, assessment, couples and family counseling, and professional identity and ethics. Exposing counseling trainees to potential R/S issues through class exercises, role plays, assignments, and discussions could be helpful in preparing them to become more sensitive and responsive in their work with clients. Using Table 2.1 may also be a way to promote dialogue about within group diversity, between group commonalities, and types of power and oppression among groups and illuminate R/S issues as they intersect with race-ethnicity, gender, sexual orientation, and other individual differences. For example, in a human sexuality course, a class discussion or role play may introduce a woman with an unexpected pregnancy. Alone, this could be a challenging issue for a client; however, add the intersections of age, ethnicity, personal R/S beliefs, partner R/S beliefs, and family R/S beliefs, it may easily become more complicated. Attending to these complexities is not meant to overwhelm trainees but rather promote a diversity-oriented, systemic counseling approach in which the trainee is aware of and competent to explore potential aspects of a client's individual experience as well as the systemic and relational influences that may be affecting the client as well.

Given the intimate and unique nature of the supervisory relationship, supervisors are also well positioned to assist supervisees in their

development of their clinical competency in addressing R/S issues with clients. Supervisors have the opportunity to provide trainees with support and guidance as they discover and explore their biases and prejudices related to R/S. Supervisors can help supervisees assess for R/S issues with their clients, identify R/S themes as they arise, and assist them with becoming clinically competent and comfortable in exploring the potential impact of R/S on their clients' wellness. Exploring the supervisee–client relationship and how the various intersections of R/S (e.g., race-ethnicity, gender, sexual orientation, power and oppression, etc.) impact the counseling process itself may be particularly relevant to address in supervision. Perceived diversity, commonalities, power, and oppression (See Table 2.1) in the supervisor–supervisee and supervisee–client relationship can be explored to determine how they inhibit or contribute to the efficacy of supervision and the therapeutic process. For the multi-culturally aware supervisor, these multiple layers of identity may be addressed in the supervisory dyad, and in parallel fashion, the trainee can learn to address them with his or her clients.

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## Summary and Recommendations

To summarize, this chapter explored the intersections of multiple social identities: race-ethnicity, gender, sexual orientation, and religion/spirituality (R/S), by introducing four dimensions for analysis: within group diversity, between group commonality, power, and oppression (see Table 2.1). Understanding the saliency of these social identities in their social context is essential for a holistic approach in psychotherapy. It is particularly important for practitioners who want to incorporate R/S in therapy to stay within their areas of competence, to avoid dual role relationships in R/S communities, and to avoid bias and prejudice in working with R/S clients (Plante, 2009).

Savage and Armstrong (2010) also cautioned practitioners not to exceed their level of competency when incorporating R/S themes in therapy. They emphasized that the “psychotherapist does not advance a specific expression of spirituality or religion but facilitates consideration based on

the client's beliefs" (p. 387). They provided the following recommendations for practice: (1) gain informed consent and conduct a thorough assessment, (2) assess if there are any contraindications in addressing R/S issues, (3) work within the client's belief system, (4) tailor interventions to fit client R/S worldview and presenting problem, and (5) consult with R/S leaders and refer appropriately.

Additional resources have been included in Appendix 2 which may be useful in supervision, training, and the classroom. Clearly, this topic is expansive and complex. We encourage psychologists to pursue ways to actively engage in R/S study, contemplation, and discernment to know how to incorporate R/S themes appropriately in their clinical work.

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## Appendix 1 : ASERVIC Competencies

Association for Spiritual, Ethical, and Religious Values in Counseling (ASERVIC)

Competencies for Addressing Spiritual and Religious Issues in Counseling (2009)

Culture and Worldview

1. Describe the similarities and differences between spirituality and religion
2. Recognize that the client's beliefs (or absence of beliefs) about spirituality and/or religion are central to his or her worldview and can influence psychosocial functioning

Counselor Self-Awareness

3. Actively explore one's own attitudes, beliefs, and values about spirituality and/or religion and continuously
4. Evaluate the influence of his or her own spiritual and/or religious beliefs and values on the client and the counseling process
5. Identify the limits of one's understanding of the client's spiritual and/or religious perspective and be acquainted with religious and spiritual resources

Human and Spiritual Development

6. Describe and apply various models of spiritual and/or religious development and their relationship to human development

Communication

7. Respond to client communications about spirituality and/or religion with acceptance and sensitivity
8. Use spiritual and/or religious concepts that are consistent with the client's spiritual and/or religious perspectives
9. Recognize spiritual and/or religious themes in client communication and be able to address these with the client when they are therapeutically relevant

Assessment

10. During the intake and assessment processes, the professional counselor strives to understand a client's spiritual and/or religious perspective by gathering information from the client and/or other sources

Diagnosis and Treatment

11. When making a diagnosis, the professional counselor recognizes that the client's spiritual and/or religious perspectives can a) enhance well-being; b) contribute to client problems; and/or c) exacerbate symptoms
12. Set goals with the client that are consistent with the client's spiritual and/or religious perspectives
13. Modify therapeutic techniques to include a client's spiritual and/or religious perspectives and utilize spiritual and/or religious practices as techniques when appropriate and acceptable to a client's viewpoint
14. Therapeutically apply theory and current research supporting the inclusion of a client's spiritual and/or religious perspectives and practices

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## Appendix 2: Additional Resources

### Popular Books

*Race and Ethnicity: Cultural Roles, Spiritual Practices and Social Challenges*

(Crennan, 2010)—Reviews important data on race and ethnicity as it relates to culture, gender, healthcare, and spirituality.

*This Side of Heaven: Race, Ethnicity, and Christian Faith*

(Priest & Nieves, 2006)—A discussion of diversity in the Christian context.

*Walkin' the Talk: Keepin' the Faith in Africentric Congregations*

(Speller, 2005)—The implications for what it means to be both Black and Christian in today's society.

*My Soul is a Witness: African-American Women's Spirituality*

(Wade-Gayles, 2002)—Describes the variety of ways African-American women experience spirituality.

*Teaching Spirits: Understanding Native American Religious Traditions*

(Brown, 2010)—A synthesis of common themes across a variety of native cultures; how the themes connect with each culture, yet still represent the individual traditions.

*Silent Victims: The Plight of Arab & Muslim Americans in Post 9/11 America*

(Elaasar, 2004)—The impact of increased hostility and bias towards Arabs and Muslims and the nation of Islam after the events of 9/11.

*Bent Rib: A Journey Through Women's Issue in Islam*

(Khattab, 2007)—Examines controversial issues including domestic violence, female genital mutilation, and lack of education and points out the differences between Islamic teaching and culturally influenced practices.

*Bulletproof Faith: A Spiritual Survival Guide for Gay and Lesbian Christians*

(Chelley-Hodge, 2008)—Exploration of the journey that gay Christians experience in the church and tips to overcome oppositions and challenges.

*Trans-Gendered: Theology, Ministry, and Communities of Faith*

(Tanis, 2003)—Shares the journeys of individuals struggling with their gender identity from a cultural and religious standpoint.

## Films

*Ajami* (2009)—Five stories about the religiously mixed communities of Muslims and Christians in Tel Aviv.

*Amreeka* (2009)—an immigrant single mother moves with her son to a small town in Illinois; she deals with the challenges and expectations of being Muslim in the USA.

*Baptist's at Our Barbecue* (2004)—a Mormon park ranger reports to his new assignment in a town with 262 Mormons and 262 Baptists; his arrival has tipped the scales.

*The Help* (2011)—set in the 1960s, this story chronicles the power and oppression experienced between the African-American maids and the wealthy White families for which they worked.

*I Can't Think Straight* (2008)—after three failed engagements and a wedding looming, a young Jordanian woman falls for a woman of a different culture, religion, and lifestyle.

*James' Journey to Jerusalem* (2003)—from a small remote village, James journeys to the Holy Land but encounters cultural problems along the way.

*Ocean of Pearls* (2008)—a young Sikh surgeon realizes the appearance of his beard and turban may threaten his success and his religious compromises have negative consequences.

*Pariah* (2011)—an African-American teenage girl struggles with her authentic gender identity and sexual orientation as it conflicts with her outspoken mother's religious beliefs.

*Sabah: a Love Story* (2005)—A Muslim woman falls in love with a non-Muslim man which creates a clash of cultures between the families.

*The World Unseen* (2007)—Set in 1952 South Africa, the apartheid laws conflict with the cross-cultural and lesbian relationships encountered.

## Documentaries

*Crossroad* (2008)—Perspectives of seeing the world through social and cultural differences, religion, and politics.

*A Walk of Wisdom* (2004)—Buddhist nun, Mai Chee Sansanee, shares her wisdom.

*The Women's Kingdom* (2006)—Unusual to mainstream China, observe the Mosuo, an ethnic minority, which has one of the last matriarchal societies in the world.

*Anyone and Everyone* (2007)—A diverse group of parents discuss their experiences of having a son or daughter who is gay.

*For the Bible Tells Me So* (2007)—Exploration of how the religious right has used its interpretation of the Bible to stigmatize the gay community.

*Trembling Before G-d* (2001)—A look into the lives of gay and lesbian Jews who struggle with reconciling their faith and sexual orientation.

*Through My Eyes* (2009)—A look at young gay Christians who share their struggles and experiences with Christianity.

## Websites

<http://www.beliefnet.com>  
<http://www.interfaith.org>  
<http://www.religioustolerance.org>  
<http://www.sacred-texts.com>  
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