



# A spirituality teaching program for depression: Qualitative findings on cognitive and emotional change<sup>☆</sup>

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## KEYWORDS

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Quality of life;  
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## Summary

**Objectives:** This study was conducted with participants from a trial evaluating an 8-week spirituality teaching program to treat unipolar major depression. The objectives of this study were to understand the nature of the observed mood following participation in the spirituality based intervention.

**Design:** This study used the methods of a naturalistic inquiry.

**Setting:** A total of 15 interviewees were purposefully sampled from the trial population.

**Intervention:** The intervention consisted of audio CDs for home-based use that delivered lectures and stories about spirituality, suggested behavioural applications and included relaxation practices.

**Main outcome measures:** In-depth, semi-structured interviews were conducted with each participant 6 months post program completion. Interviews were audio recorded and transcribed verbatim. The data were coded for patterns of substantive core meaning in terms of the participants' subjective and behavioural experiences of the program materials.

**Results:** Participants described an expanded spiritual awareness, characterized by a sense of connection with self, others, the world and universal energy. The primary influences participants reported occurred as a result of practicing forgiveness, compassion, gratitude and acceptance in their daily lives and included reduced negative thinking patterns, being less judgmental, reduced ego-centricity, and improved self-esteem. Concurrent with these shifts, participants experienced an improved mood characterized by reduced anxiety and/or depression, mental clarity, calmness and improved relationships.

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*Conclusion:* Findings suggest that the spirituality teaching program impacts depression by expanding spiritual beliefs and shifting perspectives of life situations, oneself and others. Spiritual teachings and practices could be an innovative and valuable adjunct intervention to treat depression.

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## Introduction

“What do you think are the main causes of depression? Well, the phrase that comes to my mind is the disconnection of spirit with self.” WJS (42 year old woman married with children and a business career).

A growing body of research suggests that spiritual well-being may play a role in depression prevention and recovery.<sup>1</sup> Evidence from this research indicates that more religiously involved individuals experience fewer depressive symptoms and faster recovery from a depressive disorder than those with less religious involvement.<sup>2,3</sup> While research has yet to shed light on how spirituality benefits mental health, some theories have been formulated. It has been hypothesized that religion/spirituality acts as a coping resource in distressing life situations including illness and loss.<sup>4</sup> Hedelin and Strandmark suggest that religion/spirituality may address the struggles of depressed patients of feeling separated from their surrounding world as well as from their inner self.<sup>5</sup> Other authors propose that a sense of the spiritual is central to our existence propelling a quest for meaning and counteracting feelings of boredom and emptiness.<sup>6</sup>

Psychotherapists have responded to the growing research evidence on spirituality and mental health by incorporating clients' beliefs into their psychotherapy approaches. A small number of experimental outcome studies have investigated the use of faith-focused psychotherapy interventions for depression.<sup>7</sup> These interventions were largely developed for clients of Christian or Muslim faith and incorporate prayer as well as scripture texts into therapy sessions. Findings from these studies indicate that faith based approaches to psychotherapy are effective and appear to achieve equal or higher effect sizes than secular psychotherapy.<sup>7</sup>

For interventions with a spiritual component to be applicable to a broad spectrum of the population they would need to address spirituality in a way that is not bound to a particular religion. Such a non-faith based spiritual intervention was developed by Dr. Badri Rickhi, a psychiatrist and research chair at the Canadian Institute of Natural and Integrative Medicine (CINIM). This spirituality teaching program aims to nurture spiritual growth by addressing spiritual concepts common to Western and Eastern traditions, including the quest for meaning and purpose, connectedness, compassion, acceptance, and forgiveness. The eight-week, self study program is delivered on audio CDs and consists of eight 60 min teaching sessions listened to over a period of 8 weeks with a 15 min daily visualization exercise. Using didactic comment and storytelling the eight teaching sessions present concepts that help the user understand and develop the role of spirituality in their daily lives. The purpose of the daily visualization practice is to create regular periods of

tranquility and self reflection for the user. A more detailed description of the program was published previously.<sup>8</sup>

CINIM has assessed the value of the spirituality teaching program for adults diagnosed with major depression of mild to moderate severity.<sup>9</sup> A total of 84 depressed individuals were randomized to a spirituality teaching program group or a wait list control group. Depression severity, response and remission rates were the primary trial outcomes and were based on the Hamilton Depression Rating Scale (HAM-D).<sup>10</sup> The analysis showed a significant difference in depression severity change, response and remission rates at 8 weeks between the two groups and improvements following the use of the spirituality teaching program were maintained up to the 24 week follow-up point.

To develop a richer understanding of these encouraging trial results, we decided to carry out a qualitative investigation to explore what trial participants experienced while being enrolled in the spirituality teaching program and how the program impacted mood, spirituality and life in general. We were also interested in learning whether participants felt the benefits of the program persisted in their lives after completion of the program.

## Methods

This study was conducted in accord with principles of naturalistic inquiry and interpretive qualitative traditions, whereby phenomena are investigated from the perspective of the research participant in order to better understand their subjective experience.<sup>11</sup>

## Study population

Informants were sampled from a group of clinically depressed individuals who had participated in a randomized trial on a spirituality teaching program and whose depression had improved. All interviewees were sampled from a group of clinically depressed individuals who were recruited for a randomized trial on a spirituality teaching program and whose depression had improved post participation. To be eligible for the randomized trial, individuals had to be aged 18 or over and meet criteria for major depression of mild to moderate severity. Individuals were eligible for the trial if they were not receiving treatment or if they had residual depressive symptoms while on pharmacological or psychotherapy for a minimum of 3 months. To determine the effect of the trial intervention, study participants were not permitted to start or make changes to ongoing pharmacological or psychotherapy while completing the trial intervention.

The goal was to choose informants who would be able to provide information on how the program contributed to an improvement of their mood state. Participants were

**Table 1** Characteristics of interviewees.

	Spirituality group (N = 54)	Interview group (N = 15)
Age (mean)	43.0	41.5
Gender:		
Male	12 (22.2%)	4 (26.7%)
Female	42 (77.8%)	11 (73.3%)
Marital status:		
Married/common law	33 (61.1%)	9 (60.0%)
Not married	21 (38.9%)	6 (40.0%)
Education:		
≤High school	8 (14.8%)	4 (26.7%)
Some college or university	0	1 (6.7%)
Graduated from college or university	41 (75.9%)	8 (53.3%)
Postgraduate or professional degree	4 (7.4%)	2 (13.3%)
Not available	1 (1.9%)	0
Employment status:		
Paid work	42 (77.8%)	11 (73.3%)
No paid work	12 (22.2%)	4 (26.7%)
Religion:		
No religion	18 (33.3%)	7 (46.7%)
Christian	31 (57.4%)	7 (46.7%)
Other	5 (9.3%)	1 (6.7%)
Medication:		
Taking medication (>3 months)	15 (27.8%)	5 (33.3%)
Not taking medication	39 (72.2%)	10 (66.7%)
Hamilton depression scale		
Baseline score (mean)	20.4	20.5
Post intervention score	10.9	9.7

systematically selected so that multiple perspectives could be obtained (maximum variation sampling). Participants' selection was initially guided by characteristics that could be of possible importance (gender, age, depression severity, religious affiliation). Further patient selection was guided by the open coding process which was used when analyzing patient interviews. This way, patients could be selected who provide further insight into a particular area or who were expected to differ from previous patients.

A total of 15 interviews were conducted 6 months after completion of the spirituality teaching program. Informed consent was obtained from each participant and the study received ethical approval from the Conjoint Ethics Board of the University of Calgary. Of the 15 sampled interviewees, 11 were female and 4 were male. They ranged from 23 to 58 years of age, and the majority were well educated (see Table 1 for participant characteristics).

## Interviews

Semi-structured interviews were conducted by an experienced qualitative interviewer. The interview objectives were:

- to understand what participants experienced while undergoing the spirituality teaching program,
- to elicit how the program may have impacted their mood,
- and to explore any insights participants may have gained from the program.

The interview guide was reviewed and modified by the interviewer in collaboration with the investigator throughout the process of the data collection. Interviews lasted on average 60 min. At the beginning of the interview, permission was requested to record the conversation. Interviews were then audio-taped and transcribed verbatim. Participants were asked open-ended questions such as: "Could you describe some of your thoughts and feelings while you were doing the program?"

## Analysis

Interview transcripts were read for meaning and coded line by line using NVIVO computer software, based on a coding framework developed by the research team. These preliminary categories of data were further compared across all the interviews to further identify broad thematic categories that described and captured the nature of the changes in participants' mood improvement. We interrogated the data that we had assigned to the various categories, analytically asking how the data were conceptually linked.<sup>12,13</sup>

In order to verify that coding was anchored in the data and to provide proof of validation, the analysis was audited by a second qualitative researcher to correct for possible researcher bias. The two researchers engaged in iterative exploration of the data until consensus was reached regarding the meaning.

## Findings

### Expanded spiritual awareness

An expanded spiritual awareness and deeper sense of meaning about life developed in the lives of the men and women who completed the spirituality teaching program. Participants entered the program from diverse spiritual affiliations; however, all expressed appreciation for the expanded spiritual perspective they received. A 23-year-old woman who had been on anti-depressants for four years and felt no motivation in her life before the program shared:

To tell you the truth, before I started this, I had no spiritual beliefs. I didn't know exactly if it existed, what it was. I had never opened a book about it. So this was like an introduction to spirituality for me, it was the "door"... and it was probably the best thing that ever happened to me. It was just explained so thoroughly, so well that it's going to be my Bible for the rest of my life.  
NP

For participants who identified as members of traditional religions, the Program expanded the understanding they held of their own religious faith. A 49-year-old Christian woman who had been on Prozac for almost fifteen years described how she incorporated the new material:

The exciting component I realize now [is] that something like this could help in my religion, is a new insight along the practical side. I'd like to go to the Christian bookstores now and ask if they've got some kind of meditation teachings on CD or relaxation tapes or some kind of meditation within my doctrine, within my religion. I think that would be really exciting because I enjoyed these so much... AMC

The overarching spiritual expansion was also often described as an expanded connection with self, others, and for some, with universal life energy. The Program helped participants realize the limited connection to a deep spiritual practice and spiritual faith. A 47-year-old woman revealed how the spirituality training impacted the understanding she held of her own state:

A sense of disconnection from (forced-back tears) God and that was for me what a lot of the tapes I heard were dealing with... I felt that I had the ability to see how spiritually isolated and alone I've been feeling (tears) and it's like being able to be in the world and see the trees but not being able to be connected with them. And I find it was the same way with spirituality. And so that's what I'm going to be working on, that I feel I can really take away from this... It's the isolation and loneliness of feeling disconnected and it's become far more apparent for me and... it's a new direction. CH

The experience of spiritual connection formed the bedrock of the subsequent positive mental and emotional changes participants underwent. A single mother with two young children and a fulltime job described herself as "floundering throughout [her] life because she "didn't feel that connection". She articulates why the experience of spiritual connection is vital for improving her mental health:

With depression, I think, you get too inwardly focused. You're worried about your hurts, your feelings because it overwhelms you spiritually, mentally, physically. It helps to draw you out of that into the bigger picture, and instead of closing out that universal energy, you're opening yourself up to it. So it was good to know it was there! I wasn't sure... There is something beyond 'you', and you can add to it, be part of it... once you make those connections, it can't help but change how you deal with your life... if you commit to that kind of thought process and that kind of understanding I mean it, it has to change your life. I mean, your life's never the same after that... it's definitely life altering. KP

### Cognitive shifts

The daily practices of the Program over 8 weeks allowed participants to transform negative thinking patterns. Participants reported cognitive shifts, particularly a shift from negative to positive thinking. A 23-year-old woman stated:

I was always going that negative route, always being the pessimist; always feeling like life is just such a drag. Now, it's turned my perspective around, and I think this is going to be long lasting. NP

The Program exposed participants to the notion of approaching adversity while remaining rooted in spiritual faith and encouraged participants to investigate their own cognitive style. In their interviews, participants discussed extensively the process of becoming aware of, and changing, their own negative thinking style. A 28-year-old man summarized the change:

And spirituality gave me that new 'pair of glasses' that I needed just to open up my eyes... and then during this Workshop I found myself thinking in a whole new perspective... my whole perspective on life changed, and everything along with it. My mood, everything... my whole perspective changed like as to how to hold a new positive attitude as opposed to my negative attitude before. (CU)

A 43-year-old married woman with teenage children shared how her thoughts and feelings became more positive and that this allowed her to feel happy and normal for the first time in 5 years:

... your thoughts affect how you feel and definitely that's been huge for me over the years. And now, my thoughts just automatically aren't negative. Not that they're automatically positive, they're just not automatically negative. (PK)

A 42-year-old married Catholic man who described himself as "really down" and his life as "really a struggle" shared how he addressed his negative thinking pattern with the spiritual practice of gratitude that he learned in the Program:

... it's real simplicity, that's what I liked about it. There's no drugs, it's just proper thinking really... maybe "better thinking"... I think my mood changed when my perspective and the way I looked at things changed. My thought pattern changed... It wasn't like a huge mind-blowing spiritual experience, where a beam of light comes through the window and just goes "wow"... It was just kind of little teeny steps and everyday when I listened to the tapes, I thought of little things... "what am I grateful for today? My kids are awesome, my wife is awesome, I've got a great house, great job... my car is operating fine"... Before I was always like, "Oh, man... my son is not studying, or my daughter is neglecting her dance classes", there was always a kind of a negative bend to it. LA

Participants also changed negative thinking patterns by learning and practicing forgiveness, compassion and acceptance. For example, a 47-year-old non-religious woman who had three sons and concerns about conflict in her marriage described how she benefited from the spiritual practices:

... so I was being very judgmental and then after doing the Study or throughout the Study if I could stand back and not be judgmental and not criticize him for how he's doing something. Just know that this is the way he's doing it and it's okay, then it was so much less stress in my life, because I'm not trying to change it, and just accepting it for what it is. (TE)

Another woman stated: "It made me more compassionate toward other people. It gave me a new perspective...

the perspective of openness and compassion and love and understanding versus suspicion and pessimism.” WJS

As participants transformed their cognitive style to a more positive frame and practiced the exercises and meditations, the cognitive shift provided a space where participants also changed reactive emotional patterns and unhealthy emotional habits.

### Emotional changes

The spirituality exercises introduced participants to a broader perspective on events and people in their lives. As a result, many participants described a process that illustrated they had become less ego-centric in their outlook, and showed less emotionally reactive behaviour. A 46-year-old married woman with two children who worked at home, and had been feeling sadness for over ten years, disclosed:

I used to think whatever happened to me was that person's fault. The other person's fault for doing that, for making me the way I was. But I've come to realize that it's not — it's how I took that in, and how I absorbed it and processed it. Made me think about things in a different way... there's so many ways to think about things... I was like a time bomb. I could be fine and then one comment and I could just lose it... I feel myself in a way better mood, and a lot has to do with the fact that when something comes up, I'll think about it before I react. (VG)

Similarly, a woman who had long standing depression and had sought help from several psychiatrists, without success, outlined her own change process:

I think one of the main ones that stands out to me is being able to forgive others, understand where they're coming from... and sometimes people might say a certain thing they don't really mean it that way... or having me 'snapping off' comments or something that you regret later just in the heat of the moment and trying to gain a different perspective before I react. I mean, perspective is a big thing that the Workshop also taught me. (FR)

A 44 year-old father, going through a separation from his partner and son, shared how the Program provided him with the tools to see life from multiple perspectives instead of focusing exclusively on his own personal difficulties. He summarizes:

It seemed to not only relieve the burden of stress, but sort of relieve some emotional burdens as well. [I was] kind of wrapped up in what was going on and how I was interpreting events in my life, just very self-involved. I wasn't going beyond myself and I think the study has helped open that up for me a lot. GC

As participants practiced the spirituality exercises, changed negative thinking and reactive emotional responses, they enjoyed a gradual improvement in mood and relief from anxiety and depression.

### Mood improvement

The improvement in mood that participants achieved was characterized by: the ability to maintain a state of calmness; reduced negative feelings such as fear, anger, low self-esteem; and reduced feelings of anxiety and/or depression. The experience of calmness provided a welcome respite from the previous mental and emotional states the participants struggled with. One woman, like many others, shared:

... it was more of a calmness within myself and a peace... I think a better understanding of myself and then my relationship to or my perception of the rest of my life or the people around me... mostly what I thought was more calm and not letting things kind of upset me. TE

A 50-year-old man who had been in psychotherapy for 10 years and tried 15 different antidepressants shared his mood change:

And now, because I feel stronger about myself and my place and that I'm worth something, I don't feel quite so worthless anymore. I don't feel, despite having a few tears now, I don't feel so on the verge of crying all the time and so emotionally strung out all the time... And, I just noticed that I'm much calmer with the whole big picture. And maybe there's something that I can create that would be useful for others [with depression]. So in a number of areas right now I feel very positive. RC

Participants were able to extend the calmness they experienced in the meditation and visualization practices into other areas of their lives, reducing their anxiety or depression:

I feel a lot more relaxed and just peaceful... before, I was even on the antidepressants, I used to get so anxious all the time and I'd always be thinking about the things that I had to do and what I had to do, and just getting so far ahead of myself and so — panicking, right... now I just take it easy. CU

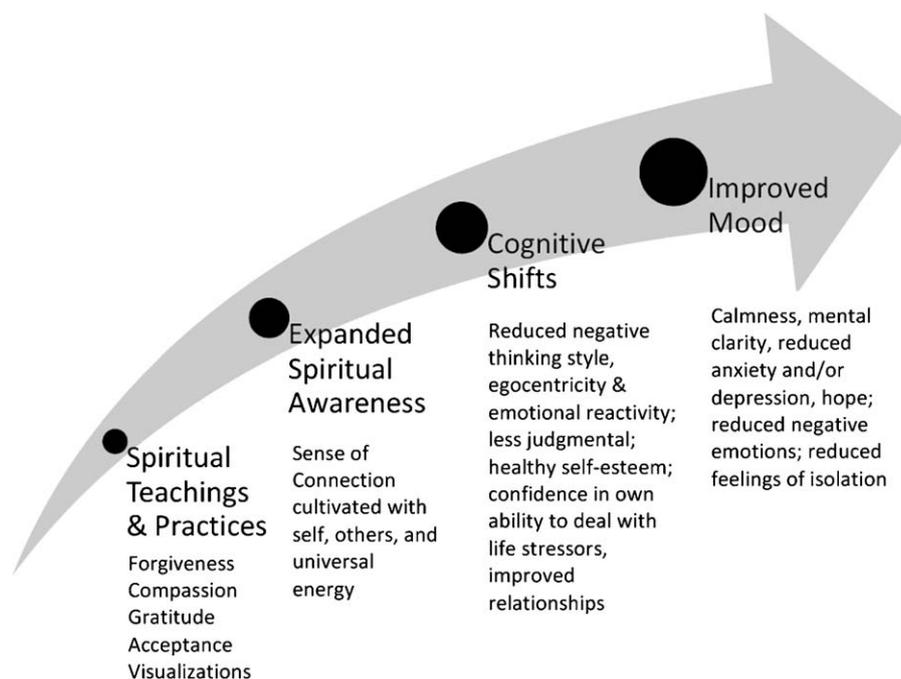
Increased calmness also helped with relaxing more in social situations, coping with stressful interpersonal circumstances, and curtailing negative reactions.

The positive mood improvement provided the impetus to continue learned practices. As one woman observed, "when I feel anxious I know, 'Go and meditate'. And I know that when I meditate regularly I don't feel anxious, and then I don't get depressed." PK

### Improved relationships

A domino effect occurred for many participants, in that as their mood improved, this positively affected their social relationships. As other people responded with warmer, friendlier behaviours, this feedback provided encouragement.

Actually at work I do know how my mood affects the whole office actually (laughing). I noticed that lately since I'm a bit more outgoing... I guess you could say that in a sense my mood is better, and that I affect people in the office slightly different and they get in a better mood.



**Figure 1** Thematic interview categories and their interconnectedness.

So when their mood level is up my mood level is up... I never quite realized that but I do. SH

Many participants reported positive relationships changes with immediate family members. A 47 year-old woman described the change in her interactions with her husband:

Well, just for example my husband and I, I think we really struggled, we had a lot of issues in our relationship. Like before I did the study—both of us—it was that we didn't really want to be around each other, or you know. We didn't, we didn't really enjoy each other's company and, there's always such a strain there. And then since I had done this Study, and I'm progressing through this study. He wanted to be with me, he wanted to do things with me that he never *used* to want to do with me. For example going shopping, he would never want to go. But he was asking *me*, "Do you want to go to the mall?" should we go do this and that, you know, just little things, but they were important to *me*. And they were signs to me that things had shifted—because *he* was addressing me, not always me wanting to be with him. So to *me* that was a big sign that there has been a shift in our relationship. TE

Participants related the changes in their relationships to their willingness to treat others in a more caring fashion, an ability to examine their own role when confronted with interpersonal conflicts, a more positive and/or assertive attitude toward others, the practice of self-acceptance, and the awareness of one's own needs.

### Interconnectedness of changes in well-being

From the above findings a model emerged that illustrates the interconnection of the described changes. The circu-

lar model (see Fig. 1) shows spiritual learning and practices as an integral part of psychological well-being resulting in expanded spiritual beliefs, cognitive shifts and an improved mood.

### Discussion

Findings from this qualitative study indicate that depressed individuals participating in an eight week, self study spirituality teaching program experience an expansion in their spiritual awareness as well as cognitive shifts, reduced emotionally reactive behaviour, improved relationships and improvements in their mood. Interviewees perceived their spiritual growth to be at the core of the described improvements. They also portrayed spiritual deprivation and disconnection as having played a role in their depression. These personal descriptions point to *spiritual wellness as a factor in the prevention and recovery from depression and support the notion that promoting spiritual wellness could open up a new treatment avenue for depression.*

We would like to discuss the present findings in the context of related, standard psychological interventions for depression. Amongst different psychotherapeutic approaches to depression, cognitive behavioural therapy (CBT) has been shown to be the most effective.<sup>14</sup> Research indicates that CBT reduces depressive symptoms and provides protection from recurrent depressive episodes by changing patient's thinking style.<sup>15,16</sup> This is achieved through identifying, questioning and changing existing thought patterns. While participants in the spirituality teaching program also described shifts in their thinking patterns, these shifts appeared to be related to a change in life perspectives prompted by exploring spiritual concepts such as self-transcendence, connectedness,

wholeness, and detachment. Thus the spirituality teaching program cultivated a frame of reference that accommodated and motivated cognitive and behavioural changes. The spirituality teaching program included an active behavioural component requiring a daily practice of progressive relaxation. We conjectured that the benefits of practicing the progressive relaxation were likely cumulative and deepened over time, thereby contributing to the reported mood improvements.

In faith-based cognitive behavioural therapy scriptures and rituals from patients' personal faith provide the foundation to address negative thinking patterns.<sup>17</sup> A review of the empirical literature on faith based CBT concluded that this form of treatment can be considered a well-established intervention for treating depression in Christians and Muslims.<sup>18</sup> In contrast to faith based cognitive behavioural therapy, the exploration of spiritual concepts in our spirituality teaching program offers a frame of reference suitable for individuals from different religious, spiritual, or secular beliefs. Some experts theorize that spiritually augmented therapy is effective because the human need for spiritual meaning in life becomes satisfied and character development occurs alongside the emergence of spiritual practices.<sup>17,19</sup> Our findings confirm this theory. Several individuals in our study who had undergone secular psychological therapy or counselling remarked that the spirituality practices they learned were more helpful than the conventional therapies, suggesting that spirituality may contribute significantly to wellness. Interviewees reported a sense of well-being which they related to a newly found sense of spiritual connection, spiritual meaning, and enhanced spiritual awareness.

Our study has several limitations related to the small sample size, the disproportional number of females and the absence of a control group that underwent a different form of spirituality intervention. Also, study findings only reflect participants' mood state at the time of the interview, i.e., six months post completion of the intervention. It would be of interest to explore pre-post as well as long-term changes in cognitive and emotional patterns.

## Conclusion

A spirituality teaching program provided new perspectives and a sense of spiritual connection that led to mood improvements in depressed individuals. Interventions comprised of spiritual perspectives suitable for a broad spectrum of beliefs and practices are worthy of continued development.

## Conflict of interest

This study was funded by the Alberta Innovates and private donors. All authors declare no competing interests.

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