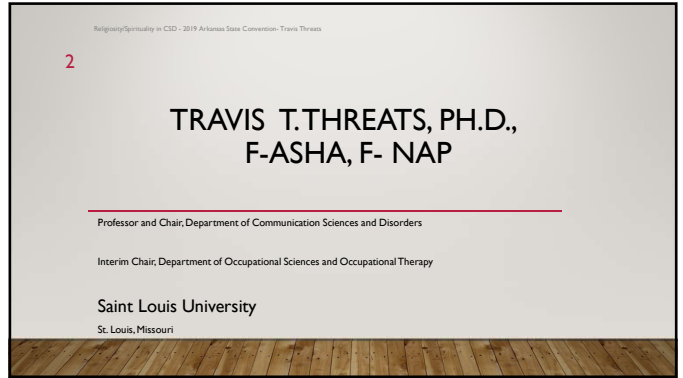
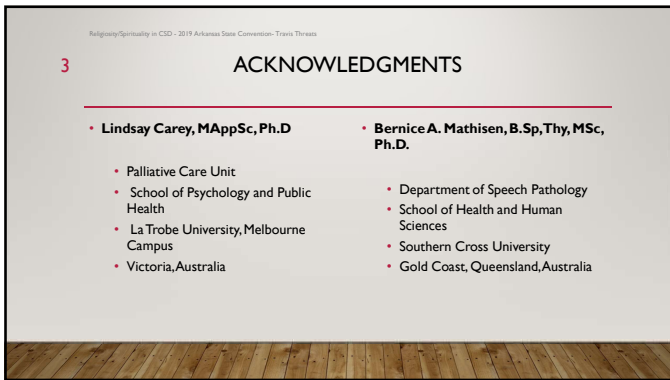




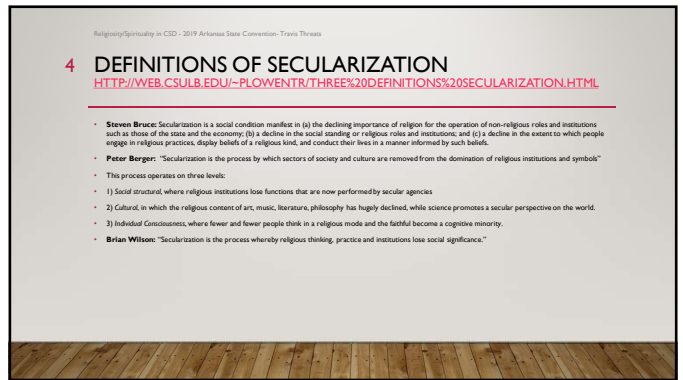
1



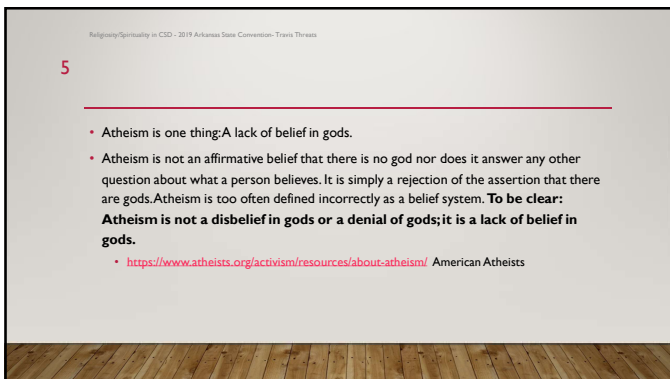
2



3



4



5



6

7 MOST AND LEAST RELIGIOUS COUNTRIES

- <https://www.telegraph.co.uk/travel/maps-and-graphics/most-religious-countries-in-the-world/>

7

8 CERTAINTY OF GOD'S EXISTENCE BY COUNTRY

- <https://www.livescience.com/19972-atheism-belief-god-countries-ranked.html>

8

9 SPIRITUALITY- ATTEMPTS AT DEFINITION

Spirituality is the aspect of humanity that refers to the way individuals seek and express meaning and purpose and the way they experience their connectedness to the moment, to self, to others, to nature and the significant or sacred

- Puchalski, et. al. Improving the quality of spiritual care: The report of the consensus conference, *Journal of Palliative Medicine*, 12 (10), p. 885-903,887

9

10 SPIRITUALITY VS RELIGION: WHICH IS BEST FOR YOU? [HTTPS://METIZA.COM/SELF-LOVE/SPIRITUALITY-VS-RELIGION/](https://metiza.com/self-love/spirituality-vs-religion/)

- There are no rules in spirituality
- Spirituality is based only on love and not fear
- Religion tells you the truth – spirituality lets you discover it
- Religion separates, Spirituality unites
- The difference between karma and punishment
- Spirituality allows you to walk your own path

10

11 PEW CENTER FOR RESEARCH- PREDICTIONS BY 2050

- Number of Muslims will nearly equal the number of Christians in the world
- Four out of every ten Christians in the world will live in sub-Saharan Africa
- Global Buddhist population will stay the same while Hindu and Jewish will be larger
- Atheists, agnostics, and no affiliation will continue to grow in Western countries but decrease percentile worldwide

11

12 THE SACRALIZATION PARADIGM- PROF. EM. HANS MOL

- **Mol, H. (1976) *Identity and the Sacred: A sketch for a new socio-scientific theory of religion.* Oxford: Basil Blackwell.**
- "Sacralization is the process of setting apart, preserving, dedicating, consecrating and/or instituting something or someone, as especially acceptable to, and coming under the auspices of a religious organization/spiritual movement deity or deistic principles."
- Sacralization of identity is the extent by which a person's identity is primarily developed via sacred principles in constant to more secular influences

12

13 MYTH (NARRATIVES AND LEGENDS)

- Stories that provide a meaning of life and relationships
- Explain events and the word as not arbitrary, not chaos
- State that greater cause that links even non related events or issues

13

14 RITUAL

- Repetition of meaningful behavior reinforces the belief both individually and collective when done as a group
- Need especially in times of transition such as weddings, deaths, birth of a child that separates the past from the future, especially new identities

14

15 OBJECTIFICATION (TRANSCENDENTAL ORDERING)

- There is a reason for things, the order they have, even if seem ordinary
- Sense of order even in adversity or seeming chaos
- In Christianity, it could include a belief in Father, Son, and Holy Spirit
- That if follow a given path (including relatively mundane) that will lead to positive or negative result

15

16 COMMITMENT (EMOTIONAL ANCHORING)

- Belief that are fundamentally emotionally attached to and lives person life meaning and sense of order
- Attachment to others in the same belief system, as shared emotional identity
- Is deliberate, demands sacrifice, show loyalty toward even in face of opposition
- Personal sense of awe
- Active participation

16

17 SPEECH, LANGUAGE, SWALLOWING IN RELIGIOUS PRACTICE

- Linguistic/cognitive and eating roles in rituals
 - Individual and common said prayers
 - Foods associated with ritual such as communion or food traditional eaten on religious holidays
- Can the communication disorder interfere with full understanding/connection of religious or spiritual beliefs
 - Parents worry if child with autism can understand their faith
 - Can adult with acquired disorder such as dementia still use the faith to help through the difficulties

17

18 INTERACTIONS WITH RITUAL AND PRACTICE OF FAITH

- Smiley, D., Smiley, H., & Richburg, C. *Audiology and Spiritual Care*. In Carey, L.B. & Mathisen, B. *Spiritual Care for Allied Health Practice: A Person Centered Approach*. London: Jessica Kingsley Publishers.
- Church musician and bilateral hearing loss
- "Lynn is a talented 40-year-old musician who enjoys playing the piano and flute in her church's band. However, Lynn has a bilateral, moderate to severe hearing loss. She wears hearing aids in both ears and depends on amplification to give her adequate access to auditory input. In quiet environments, Lynn has little to no trouble hearing or communicating with others. However, in areas that are noisy, or in environments that are highly reverberant (i.e. echoing), Lynn often experiences difficulty with speech perception, thus affecting her ability to know what others are saying during services or during post-worship fellowship times.

18

19 MUSICIAN AND HEARING LOSS (CONT.)

- "While Lynn's personal ability to connect to God through prayer is not affected, her involvement in corporate worship is often limited by her hearing loss. She has difficulty hearing the band's conductor, as well as her fellow musicians. Corporate prayer is often impossible for her to full understand. Lynn's sense of community with her fellow worshippers and musicians, and by extension, her connection to a Deity, are diminished by her hearing loss. This limitation often leaves Lynn frustrated and struggling."

19

20 RELIGIOUS DIVERSITY

- Over 4000 different specific dominations in the world
- Pew Center for Research 2015 report
 - Two religions, Christianity and Islam, each have over a billion members
 - Third largest belief system in the world is atheists and agnostics, largely in high income countries
- By 2050
 - 4 out of every 10 Christians will live in sub-Saharan Africa
 - By 2050, number of persons identifying as Muslims will equal number identifying as Christians
 - Buddhist population will stay the same
 - Hindu and Jewish will be larger

20

21 LINGUISTIC DIVERSITY

- Over 7000 languages in the world
- Half of languages spoken by fewer than 10,000 people
- 23 languages account for half the world's population
- 2/3 of all languages in the world in Africa and Asia
- 86% of world speaks one of the European or Asian languages
- Many of most populous countries have over 100 languages spoken in them

21

22 RELIGIOUS AND LINGUISTIC DIVERSITY

- Two people same religion different languages
- Two people same language, different religions
- Religious thought and customs influenced by native country, socioeconomic level within that country, and what culture belong to in that country
- Given religion such as Christianity and Islam have such broad and significant differences among different specific denominations that can actual consider the people in other as not practicing the true faith

22

23 OBSTACLES TO INCORPORATING FAITH INTO PRACTICE

- Academic and clinical training
- Uncomfortable discussing faith
- Belief that out of scope of practice and even inappropriate
- Clinician faith different and even in conflict with faith of client

23

24 NOT IN OUR SKILLS BASKET

- "A lack of concreteness and objectivity" about spirituality; that is, SLPs found spirituality and religious issues difficult to include in their practice because spirituality was difficult to quantify and qualify" (Spillers, 2001).

24

25 RELIGION/SPIRITUALITY EDUCATION IN ACADEME

- Tobin, G. & Weinberg, A. (2007) *Religious beliefs and behavior of college faculty*. Institute for Jewish and Community Research
- College faculty as whole
 - Five times more likely to be atheists than rest of US population
 - Religion less of a central role in life
 - Highest in health and education fields
 - Psychology professors estimated as majority are non believers.

25

26 RELIGION/SPIRITUALITY IN ACADEMIC COMMUNICATION DISORDERS PROGRAMS

- This author has unpublished study that looked at communication disorders programs located within universities with web stated adherence to the principals of a specific religious faith
 - 46 such universities and 12 responded to questionnaire, and those one most likely to not only have religious faith expressed on the university webpage but also on the department webpage.
 - Some departments such as one at Calvin College in Grand Rapids, Michigan incorporate specifically in each syllabus with assigned readings and description of application of faith part of tenure process
 - Many have as part of Department Mission statement such as Harding University
 - The educational mission of the Speech-Language Pathology Program at Harding University is to prepare highly competent speech-language pathologists in a rigorous academic curriculum with an emphasis on Christian living. The program is designed to reflect the University's goal of integrating faith, learning and living in order for the students to function within professional and global communities.
 - Saint Louis University
 - The Department of Communication Sciences and Disorders and the Reiner Speech-Language-Hearing Clinic at Saint Louis University are grounded in the Jesus tradition. Through academic and clinical education, we prepare future professionals to provide accessible, effective, and compassionate services that are informed by a multicultural perspective. We provide person-centered and culturally-competent care that is inclusive of all who seek services and conduct state-of-the-art research to improve the life participation of individuals with communication and swallowing difficulties.

26

27 AUTHOR'S EXPERIENCE WITH LACK OF TOLERANCE TOWARD RELIGIOUS THOUGHT IN CSD

- Unnamed university – Answering machine message
- Another unnamed university – Faculty negative reaction to saying could not attend get together at faculty's house because of Bible study
- Third unnamed university - I does not equal 3

27

28 RELIGION IN CSD AS A DIVERSITY ISSUE

- Should religion be discussed and is that a violation of students with different beliefs or no belief?
- Ignoring violates respect for cultural diversity/multicultural issues and expectation that clinicians should have cultural competence to understand and incorporate into assessment and intervention
 - Danger – superficial explanation or stereotyping

28

29 WESTERN AND NON WESTERN RELIGIONS

- Abrahamic religions- common root and monotheistic
 - Christianity
 - Islam
 - Judaism
- Fundamental beliefs could have some commonality but surface appears completely alien even to the non-believer in a Western country
 - Example- my student and the serpent worshippers

29

30 OTHER OBSTACLES

- Uncomfortable discussing faith
- Belief that out of scope of practice and even inappropriate
- Clinician faith different and even in conflict with faith of client

30

31 RESEARCH LITERATURE ON RELIGIOSITY/SPIRITUALITY IN COMMUNICATION DISORDERS

- Behind other health fields including medicine, nursing, social work, and occupational therapy. In medicine and nursing, research indicates can be associated with improved health outcomes
- Most concerning speech-language pathology completed by Drs. Bernice Mathisen and Lindsay Carey
- **Book chapter- Mathisen, B. & Threats, T. (2018). Speech-Language Pathology and Spiritual Care. In Carey, L.B. & Mathisen, B. *Spiritual Care for Allied Health Practice: A Person Centered Approach*. London: Jessica Kingsley Publishers.**

31

32 AREAS OF POSSIBLE INFLUENCE SHOWN IN LITERATURE

- Whole Person and Client Centered Care
- Disability
- End of Life Care
- Cultural and Linguistic Diversity

32

33 WHOLE PERSON AND CLIENT CENTERED CARE

- Client's core beliefs influence behavior regarding intervention outcomes
- Interpretation of events involving illness, trauma, loss, can be influenced by religious thoughts
- Coping with stress, loss of meaning, loneliness

33

34 DISABILITY

- Persons with disabilities rights to be able to continue to practice their faith
- Faith can be connected to their quality of life and sense of purpose and belonging
- Should be considered an aspect of human rights that recognized in social and health policy

34

35 END OF LIFE CARE

- Not well understood or researched in communication sciences and disorders
- Is situation that clinicians often face, with little professional guidelines to assist resulting in avoidance
- Dysphagia and last words/thoughts with loved ones
- Often thought is entirely the province of chaplains
- Chahda, L., Mathisen, B. & Carey, L.B. (2017) The role of speech-language pathologists in adult palliative care. *International journal of speech-language pathology*, 19(1), 58-68.

35

36 CHALLENGES IN INCORPORATION OF FAITH IN THERAPY SERVICES

- **Case 1- An agnostic clinician with a conservative evangelical Christian client**
- Mrs. Jones has dysarthria and dysphagia secondary to a stroke. She has been put on a restrictive diet by the SLP clinician. The clinician suspects that the client has not been compliant with the recommendations. When asked, Mrs. Jones said that she misses her favourite food -pork chops and that she does eat slowly and not as much. She says that she is not worried about the effects on her health because she knows that God is overseeing her recovery. When the clinician appears to frown, Mrs. Jones asks him if he believes in God.

36

37

- **Case 2 – A conservative Islamic religious SLP clinician with a gay client who is a leader of an activist group that seeks to stop discrimination against homosexuals.**
- Mr. Graves has a functional voice disorder and has a rally coming up in a month in which he wants to participate. The clinician finds out that the protest he is going to be at is at her mosque, where they will be there to denounce the “hateful homophobic anti-gay rhetoric” that the clinician’s imam they claim is a prominent public spokesperson. He wants help with projecting what exactly he wants to say. The clinician goes to her supervisor saying that the client is violating her right to her faith and wants to be relieved of this client.

37

38

- **Case 3- Both SLP clinician and client are devout in their shared Christian faith, but attended churches with different specific beliefs.**
- Ms. O'Donnell's son has just been diagnosed with a hearing loss. The son is 3 years old and already has been in speech-language pathology for a month. The speech-language pathologist supports the recommendation given by the audiologist that the child be fitted with a hearing aid. Ms O'Donnell states that she will instead take her child to a faith healer because in the Bible Jesus cures the disabled. The clinician states that this is a medical issue, not one of faith. Ms. O'Donnell tells the clinician that she assumed because of the cross she wears every day that she was a Christian and why does she not believe in the healing power of God.

38

39

- **Case 4 – A married couple has a different response to a hit and run car accident leaving the husband with an acquired traumatic brain injury (TBI)**
- In the course of a therapy session, the husband tells the SLP clinician that the accident has brought him closer to God and the wife interrupts and says that she used to go to church but how can she believe in a God who would let such a wonderful man be hit by a drunk driver while he was walking down the street on the footpath. She then asks the clinician if the increased religious belief was due to his brain damage in that he cannot think logically anymore. The wife wants one of his therapy goals to stop “obsessively” talking about God

39

40

- **Case 5- A possible case of hyper-religiosity secondary to dementia**
- Mr. Gullick is in the middle stage of dementia. He says the rosary at least 100 times a day even when his family tries to visit him in the nursing home. He sometimes refuses to eat because it would interfere with him completing the prayers. The family wants you as the SLP to work with the other therapists involved to stop this-they believe this to be perseverative behaviour.

40

41

- **Case 6 – A SLP clinician thinks that their client's religion is not a “real” religion**
- Mr. Anderson has had a stroke and wants to go back to participating in his religion's ceremonies. He practices Wicca, which his clinician thinks is a demonic pagan cult. He wants help saying the chant in the service. The clinician thinks the words are from Satan and thinks that saying the words with him will jeopardize her own soul.

41

42

42 WORLD HEALTH ORGANIZATION CODES FOR RELIGIOSITY/SPIRITUALITY

ICD-10 codes

- Spiritual Assessment
- Spiritual Counseling, Guidance, or Education
- Spiritual Support
- Spiritual Ritual
- Allied Health Intervention

International Classification of Functioning, Disability, and Health (ICF)

- Activities and Participation – several Religion and Spirituality codes
- Environmental Factors
 - Produces and Technology for Religion and Spirituality
 - Social norms, practices and ideology
 - Association and organizational services

42

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43 TSPILLERS, C. (2011). SPIRITUAL DIMENSIONS OF THE CLINICAL RELATIONSHIP. IN FOURIE, R. F. (ED.), THERAPEUTIC PROCESSES FOR COMMUNICATION DISORDERS: A GUIDE FOR STUDENTS AND CLINICIANS (P. 229-243). EAST SUSSEX: PSYCHOLOGY PRESS. PAGES

Physical Journey	Metaphysical Journey
Assessment, Diagnosis, Treatment, Rehabilitation, Palliative Care.	Imperfection, Isolation, Loneliness, Fear, Grief, Anxiety, Life, Death

43

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44 **Table 4. Including Spiritual Care in Speech-Language Pathology**

Strategies recommended (Carrey-Sargeant et al. 2012)	Strategies <u>not</u> recommended (Koenig 2007)
<ul style="list-style-type: none"> Be aware / sensitive to client's religious and spiritual beliefs and needs. Identify / seek to understand client's religious and spiritual needs, issues and concerns. Take a client spiritual history / screening Respect and value the belief system of the client Consider creative ways to incorporate religious/spiritual aspects into therapy Become spiritually literate. Utilize the WHO ICF spiritual / religious / pastoral care codings. Respect professional boundaries / competency and use referrals Include religion/spirituality as part of university curricula- academic and clinical education (Eckermann et al., 2019) 	<ul style="list-style-type: none"> Pressure patients / clients about their spiritual history / narrative Coerce patients to believe or practice spirituality / religion Prescribe religion as a solution / answer to issues Provide spiritual / religious counsel Encourage any spiritual / religious activity that is not client / family-centred Argue with patients over spiritual/religious beliefs

44

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45 **Table 5. Examples of religious/spiritual screening tools appropriate for SLPs**

Instrument	Acronym / Abbreviation	Specialty
Mot's "Sacralization of Identity" Paradigm (Mot, 1974; 1983; Carey et al, 2009)	M = Myths and Legends R = Rituals and Symbols O = Objectification / Transcendental Ordering C = Commitment	<ul style="list-style-type: none"> Multi-faith / Cross cultural
Stoll's Guidelines (Stoll, 1979)	1. Concept of God or Deity 2. Sources of Hope or Strength 3. Religious Practices 4. Relationship - beliefs and health	<ul style="list-style-type: none"> Acute Chronic Illness Palliative Care
Maugens' Spirit Screening (Maugens, 1996)	S = Spiritual belief system P = Personal belief system I = Integration (with community) R = Ritualized (practices) I = Implications (for medical care) T = Terminal events planning	<ul style="list-style-type: none"> Chronic illness Palliative Care

45

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<p>Lilly's Spiritual Relationship Model (Lilly, 1997)</p> <ul style="list-style-type: none"> 1. Spiritual - with others and things 2. Intra-personal - with self 3. Inter-personal - with others 4. Transpersonal - with "other", "ultimate reality" 	<ul style="list-style-type: none"> Multi-faith / Cross cultural Palliative Care
<p>Puchalski & Rummel's Spiritual History (Puchalski & Rummel, 2006)</p> <ul style="list-style-type: none"> 1. Importance 2. Community involvement 3. Address care and action 	<ul style="list-style-type: none"> Spiritual Practice
<p>Andersson & Wright's Spiritual Assessment Questions (Andersson & Wright, 2003)</p> <ul style="list-style-type: none"> 1. = Hope - "Source of strength, meaning, love?" 2. = Organized - "Part of organized religion?" 3. = Personal - "Personal spirituality and practices?" 4. = Effects - "Effects of spirituality / beliefs, about medical decisions" 	<ul style="list-style-type: none"> Chronic Illness Palliative Care
<p>Fitchett's Spiritual Needs Assessment (Fitchett, 2003)</p> <ul style="list-style-type: none"> 1. Belief and Meaning 2. Vocation and Obligations 3. Experience and Emotions 4. Social (Counseling and Support) 5. Ritual and Practice 	<ul style="list-style-type: none"> Spiritual Practice

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47 **SPIRITUALLY LITERACY**

Readings

Koenig, H., King, V. and Carson, B. (2012). Handbook of religion and health. New York, Oxford University Press

Cobb, M., Puchalski, C. & Rumbold, B. (2012). Oxford Textbook of Spirituality in Health Care. Oxford: Oxford University

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48 **POSSIBLE CHANGE IN RELIGIOSITY/SPIRITUALITY WITH CHANGES IN FUNCTIONAL HEALTH**

- Do not assume because did not mark a religion or express little interest at onset that might not change
- Do not assume because religion stated as important at beginning that will continue to be so
- Life stressors- best in you, worst in you
- Separate different levels of religious centrality to life, do have a faith preference and how often do you to church not enough- KEY use of it in past times of difficulty

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49 FAITH AS A COMPONENT OF ALL THERAPY

- Executive Functioning
 - Vigilance
 - Planning
 - Repair
- Why try?

49

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50 LANGUAGE AS A GIFT FROM GOD

- It is through symbolic thought that have words
- Since God is beyond direct and complete comprehension by humans, must know only indirectly
- This is through prayer (oral language) and scripture (written language)

50

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51

SMILEY, D., SMILEY, H., & RICHBURG, C. AUDIOLOGY AND SPIRITUAL CARE. IN CAREY, L.B. & MATHISEN, B. SPIRITUAL CARE FOR ALLIED HEALTH PRACTICE: A PERSON CENTERED APPROACH. LONDON: JESSICA KINGSLEY PUBLISHERS.

- P. 55
- "... Depending on which translation is read, the Bible makes reference to the word "hear" (or various transliterations of the word "hear") approximately 2130 times... in both texts, communication with God is essential; indeed, it is the pathway to salvation and eternal life."

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52

IN THE BEGINNING . . .

52

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53

... WAS THE WORD

53

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54

. . . AND THE WORD WAS WITH GOD, AND THE WORD WAS GOD.

JOHN 1:1-

2

54

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55

- With the single most powerful linking of language with God being ...

55

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56

AND THE WORD BECAME FLESH

56

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57

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