



Date Approved 10/25/16

By: Manuel J. Jimenez, Jr.  
**Manuel J. Jimenez, Jr., MA, MFT,  
Behavioral Health Care Services  
Director**

**POLICY TITLE**

**Integration of Spiritual Interests In Recovery and Wellness**

Policy No: 1602-1-1

Date of Original Approval: March 23, 2016  
Date(s) of Revision(s): N/A

**PURPOSE**

This Policy is intended to promote openness and inclusiveness towards the spiritual and religious beliefs of all people receiving ACBHCS services and/or participating in ACBHCS sponsored events, regardless of their choice of religion or whether spirituality or religion are overtly important in their lives. This Policy respects the personal philosophies and faiths of persons of all ethnic and cultural backgrounds and is intended to create an atmosphere in ACBHCS programs where staff support and do not attempt to change a person's chosen spiritual path or religion. ACBHCS staff and contracted treatment providers are aware that spirituality and religion may make a powerful impact on the lives of people we serve, including the professionals themselves.

**AUTHORITY**

California Mental Health and Spirituality Initiative, SAPT contract with CA Department of Health Care Services (DHCS)

**SCOPE**

This Policy applies to all staff representing ACBHCS, including employees, interns, volunteers and contractors.

**POLICY**

Recognition and acceptance of consumers/clients' spiritual beliefs may be a key component in helping them achieve their recovery goals. Inclusion of a spiritual component in treatment has been associated with successful outcomes. The guidelines in this document are intended to assist ACBHCS staff and contracted treatment providers as they inquire about and address the spiritual beliefs, concerns, needs, strengths, interests and practices of consumers/clients, their families and other supportive social contacts. Recognition and support of spiritual beliefs should be an integral part of behavioral health assessment and, when appropriate, goals formulation and treatment planning--but should not be confused with proselytizing. ACBHCS staff and treatment providers are not permitted to proselytize under the auspices of their work for Alameda County.

## PROCEDURE

### A. ASSESSMENT:

1. Inquiry about spirituality and religion may be done at any time, but in particular should be a normal part of the assessment process included in the section concerning Cultural Indicators. As part of discovering current emotional and social supports for the person served, treatment providers may pose open-ended questions about spirituality without leading the person's responses in any way. Such non-judgmental inquiry and interest are appropriate and encouraged. In turn, the person served or family and other supportive relations may directly provide information and raise concerns and discussion about spirituality and religion. As part of the overall assessment, treatment providers are encouraged to participate in spiritual discussion of this type, consciously *refraining* from proselytizing or in other ways directing a client to adopt specific religion beliefs or spiritual practices contrary to the ones of their own choosing. Such discussion may be a critical component identifying the person's resources and challenges, and supporting their strengths.
2. **Assessing the Child/Youth:**  
In assessment of a child or youth, the interviewer must take even greater care to assure openness and non-proselytizing. The interviewer should not assume uniformity of feeling and opinion around spiritual beliefs between the child and the parent(s) and/or guardian(s). Particularly when working with minors, treatment providers should follow regulations, guidelines and their clinical judgement regarding when to include parents and guardians in discussions about these issues.

### B. TREATMENT PLANNING:

Appropriate integration of spiritual dimensions within Treatment Planning could include:

1. Bringing culturally relevant spiritual practices, supports, resources and goals into recovery-based treatment and planning.
2. Making and coordinating contact, when desired by the person served and clinically appropriate, with their chosen spiritual counselors or advisors. Ideally, the person served should be present at such contact and Staff should:
  - a. Obtain consent before initiating contact.
  - b. Treat the contact with cultural sensitivity and respect.
  - c. Note the outcome of such contact in the clinical record.

### C. BOUNDARY ISSUES:

1. Staff shall use sound professional judgment, and consider seeking consultation when choosing to:

- a. Share the staff member's personal spiritual information, ideas, or beliefs. Such sharing must always be for the benefit of the person served, not for the benefit of the staff member.
  - b. Overtly encourage specific spiritual practices.
  - c. Participate directly in spiritual activities with the person served (e.g., religious weddings, coming of age ceremonies, funerals, etc.)
2. ACBHCS and contracted treatment providers are expected to recognize the important role of spirituality and religion in the life experiences and wellbeing of many consumers/clients and their families. Treatment providers support the consumers/client's interest and participation in spiritual and religious organizations of their choice. Staff and contracted providers are also sensitive to conflicts in relation to spiritual or religious beliefs, and are able to non-judgmentally assist consumers/clients in working through those concerns or conflicts. ACBHCS staff and contracted treatment providers should inform and consult with their supervisor or program manager when uncertain about how to non-judgmentally and constructively help a consumer/client who is struggling with his/her spiritual or religious beliefs.
  3. Under no circumstances may staff and contracted treatment providers take actions that create an appearance of proselytizing.

**D. ADMINISTRATIVE ISSUES:**

1. If a consumer/client requests specific changes in services or Staff on the basis of spiritual beliefs, ACBHCS Programs should evaluate and act on these requests in an appropriate fashion, in accordance with the usual protocols available to consumers/clients for requesting a Change of Provider.
2. All ACBHCS administrative and clinical activities, including any that are related to spiritual practices or beliefs, must comply with existing governmental regulations and recognized ethical and professional standards including those described in ACBHCS Charitable Choice Policy and Procedure.

**E. STAFF TRAINING:**

Appropriate integration of spiritual issues in assessment, case formulation and treatment planning should be taught in clinical trainings, as well as in cultural competencies trainings, on an ongoing basis. ACBHCS programs should seek out teachers for these trainings who are competent to discuss and teach spiritual issues without bias or proselytizing.

**CONTACT**

<b>ACBHCS Office</b>	<b>Current as of</b>	<b>Email</b>
Javarré Cordero Wilson, MPH   Ethnic Services Manager	10/25/2016	jwilson@acbhcs.org

**DISTRIBUTION**

This Policy will be distributed to the following:

- ACBHCS Staff
- ACBHCS County and Contract Providers
- Public

**ISSUANCE AND REVISION HISTORY**

**Original Authors:** Gigi Crowder, Rob Lee, Sharon Loveseth, Linda Stewart, Khatera Aslami, Tom Trabin, Rosa Warder and includes input from the Cultural Responsiveness Committee and the Pool of Consumer Champions April 2015.

**Original Date of Approval:**

Revise Author	Reason for Revise	Date of Approval by (Name)
		Date: June 2016 by Manuel J. Jiménez, Jr., MA, MFT; Director ACBHCS

**DEFINITIONS**

Term	Definition
<b>Family</b>	Family members may be the biological parents, adoptive parents, foster parents, siblings, spouses, domestic partners, children, aunts, uncles, cousins, friends, or anyone else whom the consumer/client defines as "their family members."
<b>Proselytize</b>	To induce someone to convert to one's own faith, spiritual beliefs or lack thereof.
<b>Religion</b>	An organization, structured set of spiritual beliefs and ideas—generally related to the practice of one's beliefs in connection with an organization.
<b>Spirituality</b>	A person's deepest sense of belonging and connection to a higher power or philosophy which may or may not necessarily be related to an organized religious institution. It is a process of pursuing meaning and purpose in life.