CSWE Religion and Spirituality Clearinghouse Submission Form

Contributors: Sachiko Gomi, MA, MSW, and Edward R. Canda, PhD

Institutional Affiliation: The University of Kansas

Please send any questions about this resource to Edward Canda (edc@ku.edu).

TITLE OF RESOURCE	TIME FRAME (Check all that apply)	
Teaching Resource on Spirituality and Mental Health Recovery: Insights From the Art and Words of Consumers of Mental Health Services	Class unit of < 30 minutes Class unit of 30-60 minutes _X_ Class period of > 1 hour _X_ Two or more class period Theme for academic term Homework assignment	
DESCRIPTION (Maximum 250 words)		

DESCRIPTION (IVIAXIIIIUIII 250 WOI

Background

This educational module, "Teaching Resource on Spirituality and Mental Health Recovery: Insights From the Art and Words of Consumers of Mental Health Services," is based on a presentation conducted at Spirituality and Mental Health Recovery: A Conference for Kansas Mental Health Service Providers and Consumers held in 2004 in Lawrence, KS. The PDF is available free online here.

The editors of the presentation have agreed to make it available to the CSWE Clearinghouse website (please see attachment). The artwork and essays shown in the presentation were produced by local mental health consumers in the eastern Kansas region and edited by Canda, Eichler, and Starnino of the University of Kansas, School of Social Welfare. These mental health consumers depicted the role of spirituality in their mental health recovery process through artistic mediums, including drawings, brief essays, and personally meaningful symbols. Explicit written permission for use was obtained from the contributors.

Purpose

This educational module can enhance social work students' understanding of the role of spiritual and religious insights and resources in promoting mental health recovery. Reflecting on the artwork and essays created by mental health services consumers, students are expected to explore and learn various spiritual beliefs, the role of spirituality/religion in mental health recovery, and the ways in which spirituality could be connected to recovery. Questions are provided to instructors that help students engage in a reflective process and generate discussion (see Description of Learning Activities and Procedures). The instructor can also explore with students how artistic mediums can be helpful to express spiritual beliefs and ideas.

RELIGIOUS/SPIRITUAL TRADITION OR PERSPECTIVE EMPHASIZED BY RESOURCE (Maximum 250 words)

The spiritual perspectives included in this module reflect the personal beliefs, symbolism, and experiences of the contributors and the cultural milieu of eastern Kansas. The consumers' artwork and essays include religious and nonreligious spiritual themes. Hence, no specific religious/spiritual tradition or perspective is emphasized in this module, though many of the consumers' artworks and essays include allusions to Christianity. Discussion questions encourage reflection on the cultural and religious context of the consumers' beliefs.

CONNECTION TO 2008 EPAS COMPETENCIES (Select most relevant; maximum of 3)
Identify as professional social worker and conduct oneself accordingly
Apply social work ethical principles to guide professional practice

X Apply critical thinking to inform and o	communicate professional judgments	
X Engage diversity and difference in pra	actice	
Advance human rights and social and	economic justice	
Engage in research-informed practice	e and practice-informed research	
X Apply knowledge of human behavior	and social environment	
Engage in policy practice to advance	social and economic well-being and to deliver effective social	
work services		
Respond to contexts that shape pract	tice	
Engage, assess, intervene, and evaluat	e with individuals, families, groups, organizations, and	
communities		
RELEVANCE OF RESOURCE FOR PRACTICE	(Maximum 250 words)	
This educational module is relevant to the CSWE, especially the following:	e 2008 Educational Policy and Accreditation Standards of	
 Educational Policy 2.1.2 regarding applying social work ethical principles and recognizing personal values to guide practice. 		
	g engaging spiritual and religious diversity and understanding ence and identity formation by intersecting with other diversity.	
	g applying theories and knowledge of spiritual development.	
 Educational Policy 3.1 regarding a spiritual and religious diversity 	an educational program's commitment to diversity, including	
,	portant aspect of the mental health recovery process. It is	
necessary for social workers and students to understand the role of spiritual/religious recourses in mental health recovery process. The learning from this educational module will enhance social worker's		
practice in promoting mental health reco		
ADDUCABLE DROCDANALEVE	CONTENT ADEA	
APPLICABLE PROGRAM LEVEL	CONTENT AREA	
Undergraduate Graduate	X Diversity and cultural competence X HBSE	
X Both	Policy	
A Botti	X Practice skills	
	X Other (specify): Mental Health	
	7. 2010. (00.001.7). 11.01.00.	
ASSESSMENT MEASURES (Check all that a	pply)	
Case study paper	Participation in group presentation	
Individual presentation	Research paper	
Journal	Other (specify):	
X Participation in group discussion		
SUGGESTIONS, IF ANY, IN APPLYING RESOURCE IN DIFFERENT SETTINGS (Maximum 250 words)		
This module can be used in different settings, such as classroom or workshop-type settings for social		

workers and/or mental health practitioners. The authors of this educational resource found that practitioners in mental health settings often express challenges of addressing spirituality in practice and lack of training on this topic. Hence, this educational module can be beneficial to practitioners who assist clients' mental health recovery. The required reading provides background for this presentation.

SUGGESTIONS, IF ANY, FOR PREPARATION FOR INSTRUCTOR (Maximum 250 words)

- Independently complete the educational module before using it in the class or workshop. By
 experiencing and reflecting on the material on his or her own, the instructor can be better
 prepared to process his or her own reaction, explore answers to reflective questions, and
 facilitate discussion.
- Read required reading and a selection of at least two other suggested readings on spirituality and mental health recovery to be familiar with this topic.
- Prepare questions for small group discussion (see attached Description of Learning Activities and Procedures)

READINGS OR OTHER LEARNING MATERIALS (APA format for references)

Required Reading on Spirituality and Mental Health Recovery

Starnino, V. R., Gomi, S., & Canda, E. R. (2012). Spiritual strengths assessment in mental health practice. *British Journal of Social Work*. doi:10.1093/bjsw/bcs179

Further Suggested Readings on Spirituality and Mental Health Recovery

- Canda, E. R. (Ed.). (2014). Spiritual Diversity and Social Work Initiative, Mental Health Recovery Resources. Retrieved from http://spiritualdiversity.ku.edu/resources/mental-health/mental-health-recovery
- Carpenter, J. (2001). Mental health recovery paradigm: Implications for social work. *Health & Social Work, 27*(2), 86–94.
- Fallot, R. D. (2001). Spirituality and religion in psychiatric rehabilitation and recovery from mental illness. *International Review of Psychiatry, 13,* 110–116.
- Fallot, R. D. (2007). Spirituality and religion in recovery: Some current issues. *Psychiatric Rehabilitation Journal*, *30*(4), 261–270.
- Gomi, S., Starnino, V. R., & Canda, E. R. (2013). Spiritual assessment in mental health recovery. *Community Mental Health Journal*. doi:10.1007/s10597-013-9653-z
- Leibrich, J. (2002) Making space: spirituality and mental health. *Mental Health, Religion and Culture,* 5(2), 143–162.
- Pargament, K. I. (2007). *Spiritually integrated psychotherapy: Understanding and addressing the sacred.*New York, NY: Guilford Press.
- Rapp, C. A., & Goscha, R. J. (2011). *The strengths model: A recovery-oriented approach to mental health services*. New York, NY: Oxford University Press.
- Starnino, V. R. (2008). Best practices for helping clients with a serious mental illness utilize spirituality as a recovery tool. In C. G. Petr (Ed.), *Multidimensional evidence-based practice: Synthesizing knowledge, research, and values* (pp. 179–203). London, UK: Routledge.
- Sullivan, P. (2009). Spirituality: A road to mental health or mental illness. Journal of Religion and

Spirituality in Social Work: Social Thought, 28(1), 84–9

Walsh, J. (2012). Spiritual interventions with consumers in recovery from mental illness. *Journal of Spirituality in Mental Health*, 14(4), 229–241.

Reference for the Presentation Accompanying This Module

Canda, E. R., Eichler, M., & Starnino, V. R. (2004). Spirituality and mental health recovery: Insights from the art and words of consumers of mental health services. Retrieved from http://spiritualdiversity.ku.edu/sites/spiritualdiversity.ku.edu/files/docs/Mental_Health/Spirituality%20Conference%20Slide%20Show%20Final%20Version%20for%20Website%202%2029%202010%20VS.pdf

Starnino, V. R., Gomi, S., & Canda, E. R. (2012). Spiritual strengths assessment in mental health practice. *British Journal of Social Work*. doi:10.1093/bjsw/bcs179

DESCRIPTION OF LEARNING ACTIVITIES AND PROCEDURES (Maximum 250 words) or Attachment (Maximum 6 pages, double-spaced)

Please see attached:

- 1) Description of Learning Activities and Procedures
- 2) Spirituality and Mental Health Recovery: Insights From the Art and Words of Consumers of Mental Health Services

Description of Learning Activities and Procedures

Teaching Resource on Spirituality and Mental Health Recovery:

Insights From the Art and Words of Consumers of Mental Health Services

Logistics of Learning Activities

Suggested logistics and time frame are listed below, followed by details for each learning activity.

- 1. Prior assigned reading for students in the case of classroom format; recommended reading in the case of workshop format.
- 2. Instructor's presentation of the slides (saved as PDF), including reflective questions (30 minutes). Please see attached PDF file of the presentation, which can be found at URL in the reference list.
- 3. Small group discussion of questions (20 minutes).
- 4. Reports to full class or workshop group (15 minutes).
- 5. Instructor's summary of insights generated (15 minutes).

Details of Learning Activities

- 1. Prior assigned reading. For a classroom setting, students are assigned to complete the required reading prior to the class session. This reading gives students an introduction to spiritual strengths assessment in mental health service settings. This provides background for the content of the presentation and helps participants consider practically how to engage spirituality in mental health practice. For a workshop presentation, the reading can be recommended for future reading (see References).
- 2. Instructor's presentation of the art and words of consumers about spirituality in mental health recovery. The instructor explains the background and purpose of the educational module (see slides 1–6). As the instructor goes through each artwork and essay with the

participants, the instructor helps them become more aware of each presentation by facilitating the participants to share what they notice about the contents of the consumers' artwork and words. Participants are also prompted to share what they notice about their personal reactions, biases, and strengths, in terms of implications for their personal and professional growth as preparation for addressing spirituality in mental health recovery. While examining the artwork and essays, the instructor can point out details such as the following:

- Some drawings have a description created by the same consumer. For example, Kathy
 McNett provides a drawing and describes its meaning in the following slide (see slides
 13–14).
- 2. It is important to pay attention to the details and the meanings expressed in the art. For example, Mick Swank expresses two sides (i.e., fear and love) of his experiences of spirituality in recovery (see slide 15). Connie English depicts her faithfulness through her praying hands wrapped with a rosary consisting of medicine capsules (see slide 23).
- 3. Some artwork may represent a specific religious theme, whereas others may blend religious themes or have no explicit religious theme. For example, Steven Davenport illustrates a Christ-like figure holding shapes of depressive thinking away from a praying man (see slide 18). Marcia Lynch expresses her spirituality in terms of Christianity and Zen (see slide 8). The winning art entry, "Youthful Spirit" by Daniel Rollheiser, is an abstract design (see slide 7).

After observing all the artwork and essays, the instructor briefly presents questions to help participants reflect further on the consumers' insights in order to prepare them for small group discussions. Example questions for reflection include the following (see slides 42–47 from which these questions are adapted and expanded). The instructor needs to select, adapt, or add

questions prior to presenting them to the class or workshop. We recommend that not more than eight questions be presented in order to stay within the small group discussion time frame. We also recommend that question 15 be included so that participants can apply insights to practice innovations.

Consumers' insights (see slides 42–44)

- 1. What types of spiritual beliefs, practices, and symbols are portrayed (whether religious or nonreligious)?
- 2. How do the consumers represent various understandings of the sacred or deeply significant meanings?
- 3. How is nature represented?
- 4. How is hope portrayed? Why is having hope important?
- 5. What are ways that these consumers indicate that they gain strength from their spirituality?
- 6. What are some examples of personal strengths and environmental resources for recovery stemming from spirituality as depicted in the artwork and essays?
- 7. What impact does spirituality have on how these consumers view themselves?
- 8. What attitudes are portrayed regarding standard mental health treatments and to what extent do consumers perceive these as compatible with their spirituality?
- 9. In what ways are relationships and community connections represented?
- 10. Overall, what are the ways in which spirituality is linked to recovery according to the artwork and essays?

Using art, essays, and symbols (see slides 45–46)

- 11. What might be some advantages or disadvantages in using artistic mediums in social work addressing spirituality with clients?
- 12. What are possible reasons why some people might find it easier to express spiritual beliefs and ideas through artistic mediums?

Considering cultural context (see slide 47)

- 13. Consider the cultural context implied by the artwork and essays created by local consumers of eastern Kansas. How does cultural context affect their expressions of spirituality?
- 14. How might this be similar or different from what you would likely find in your social work practice community context? What are the kinds of spiritual perspectives in your local area?
- 15. How do the insights from the presentation and discussion suggest ways that you can prepare to address spirituality in mental health recovery or other social work practice settings?
- **3. Small group discussion.** The instructor helps the participants to move into small groups of about four to six members in order to discuss the questions in the group. Each group must select one reporter who agrees to take notes and give a brief summary report of discussion to the full group after small group discussions are completed.

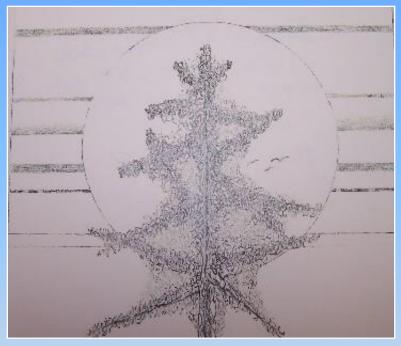
The instructor should set clear guidelines that participants are expected to communicate between themselves and the instructor in a manner that encourages open dialogue, appreciates diversity, and tolerates disagreement. The instructor should model this in her or his own classroom behavior. Participants may respectfully agree or disagree, but they may not coerce or denigrate each other. Participants should practice professional self-awareness by identifying their

comfort level to discuss matters of religion and spirituality in this group exercise, as this provides an opportunity to prepare for discussion of these topics with colleagues in professional work settings. Any self-disclosure that could result from the class discussion will be voluntary on the part of the participant.

- **4. Reports to full class or workshop group.** The instructor brings the participants back to the full class or workshop setting. A representative from each group reports a summary of their discussion and conclusions to the class. The instructor can jot down main points on the board. If there are too many small groups to present within the time frame, then the instructor can identify up to five groups to give a report. This is likely to provide a variety of insights.
- **5. Instructor's summary of insights.** The instructor gives a summary of insights gleaned from the reports to the class. She or he can also refer to the last slide to provide participants with additional resources. Please note that the name of the online Spiritual Diversity and Social Work Resource Center has been changed to Spiritual Diversity and Social Work Initiative.

<u>Spirituality and Mental Health Recovery:</u> Insights from the Art and Words

of Consumers of Mental Health Services



Edited by Edward R. Canda, Monika Eichler, and Vincent R. Starnino University of Kansas School of Social Welfare

Copyright 2010 by E. R. Canda: materials may be used for nonprofit educational purposes if proper attribution is given

Production of this module partially supported by the Shumaker Family Foundation

This educational module is developed from materials presented at-

Spirituality and Mental Health Recovery: A Conference for Kansas Mental Health Service Providers and Consumers

The conference goal was to bring together perspectives of nationally and locally reputed scholars, mental health professionals, clergy, and consumers of mental health services for understanding and promoting mental health recovery through spiritual and religious insights and resources.

Spirituality and Mental Health Recovery: A Conference for Kansas Mental Health Service Providers and Consumers

- Date & Place: October 28 & 29, 2004, Holiday
 Inn Holidome, Lawrence, Kansas
- Hosted by the University of Kansas School of Social Welfare, with partial funding by the United Methodist Health Ministry Fund of Hutchinson, Kansas.

Spirituality and Mental Health Recovery: A Conference for Kansas Mental Health Service Providers and Consumers

Keynote Speakers

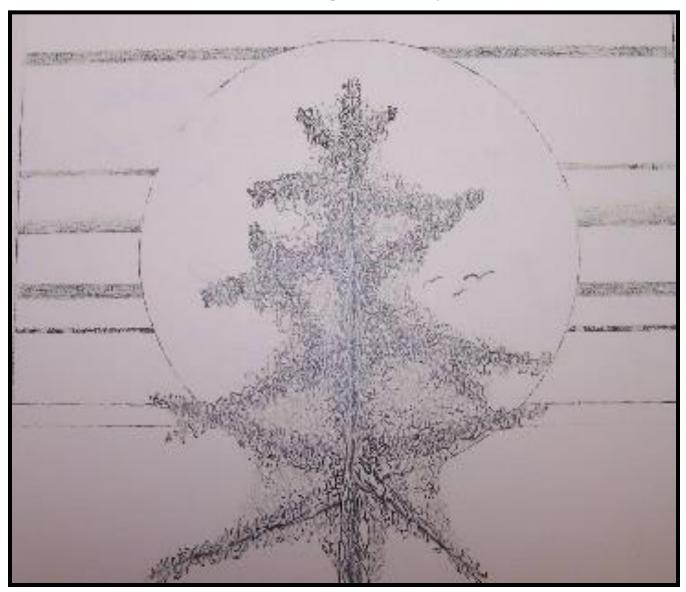
- Pat Deegan, Ph.D.: Spiritual journey of mental health recovery.
 University of Kansas; http://www.patdeegan.com/
- Edward R. Canda, Ph. D.: Spiritually sensitive mental health practice. University of Kansas; http://www.socwel.ku.edu/canda
- David Lukoff, Ph. D.: Intersections between spiritual crises and mental illness: Insights from transpersonal psychiatry. Saybrook University; http://www.spiritualcompetency.com/
- Priscilla Ridgway, Ph.D. Candidate (now Ph.D.): Hope,
 spirituality and recovery. Yale University School of Medicine.
- Plus, presentations, workshops, and panels by clergy, consumers, and mental health practitioners.

Art and Essay Show

- Local mental health service consumers were invited to submit brief essays and original artwork depicting the role of spirituality in their mental health recovery process
- All those who gave permission to use their work were included in a display of their work
- This presentation is based on quotes and images from their contributions, with their explicit written permission for use

- We have included these materials with little editing, in order to convey the insights of consumers in their own terms
- The spiritual perspectives included reflect the personal beliefs, symbolism, and experiences of the contributors and the cultural milieu of eastern Kansas
- A special thanks is given to Monika Eichler, who has played a key role in the project, including the production of this presentation
- Priscilla Ridgway and Edward Canda were also instrumental in developing this project and conference

Winning Art Entry



Youthful Spirit

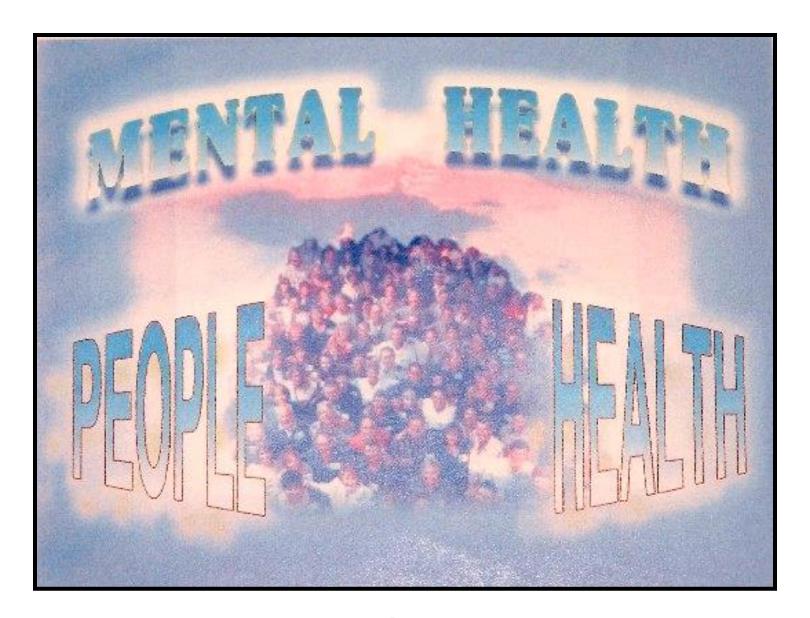
God keeps opening doors and I have the faith and strength to walk right on through....

Praying daily with my husband, I gain strength and wisdom. I ask God to give me guidance in everything I do. My Spirituality has helped me to respect others and to love myself more. It has brought me to the place where I actually trust people. It has opened up communication with new friends. I have let go of the past....

Sometimes I use my spirituality and meditation together instantaneously. If a thought comes to mind like 'I'm stupid', I change it to 'I'm a child of God' made in His image.

In closing I can truly say spirituality has kept me out of the hospital for two years. I use the practices of Zen and the love of Our Lord and savior Jesus Christ to improve and maintain my recovery.

Marcia Lynch – essay contest



Untitled

Jerri Foster



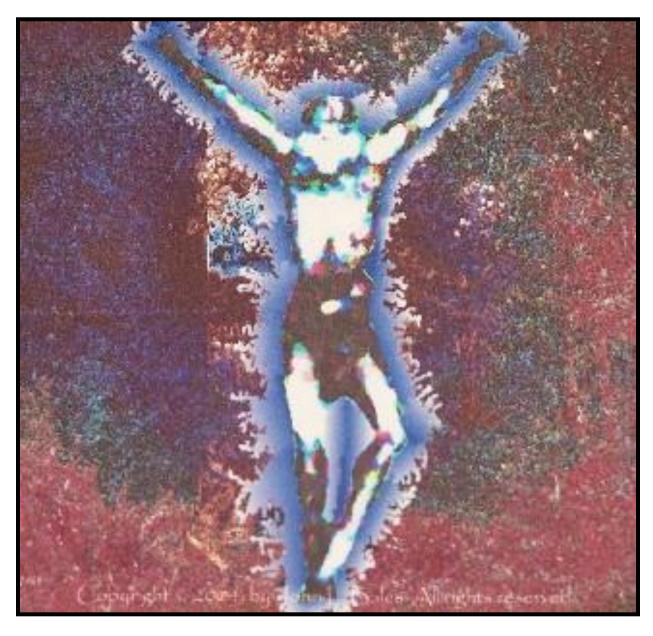
Keeping Our Pathway to Recovery Open

Imprinted on my mind that the Lord has hope and a future sustained my life while I started my recovery journey. There are key people that looked beyond my depression and saw something in me. They pushed me to open up and share my hopes and dreams.

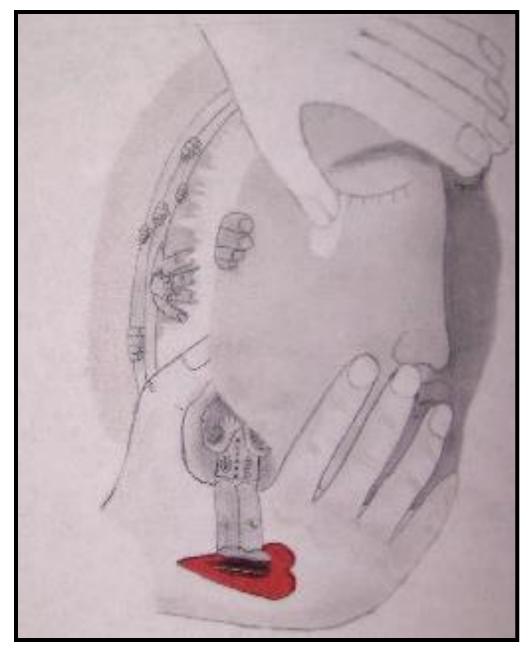
I am now beginning to see the light at the end of my tunnel knowing that I am not alone in this journey of recovery, but that I do have hope and a future. There are different avenues that hope comes through - spiritual beliefs, mental health classes/activities, and a support system that includes my family, pastors, (friends), and mental health professionals.

My recovery journey has opened pathways for self-discoveries and opportunities to be of help to those around me. I am realizing recovery involves the development of new meaning and purpose in my life as I grow beyond the catastrophic effects of mental illness.

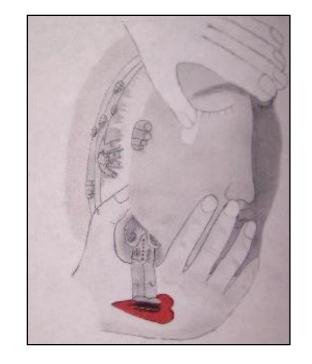
Nancy Burt Craddock - Essay Contest



Untitled



Let There Be Light



Let There Be Light:

The bottom hand is Jesus' hand taking away "the mask we hide behind" and shedding light into the darkness. Behind people's masks, there is a little child we don't want to show the world for fear (they) we are not good enough which is represented by the dirty-ness. The top hand is white and pure – however, he is wiping away the tear and is showing he is not afraid to be involved in our recovery.



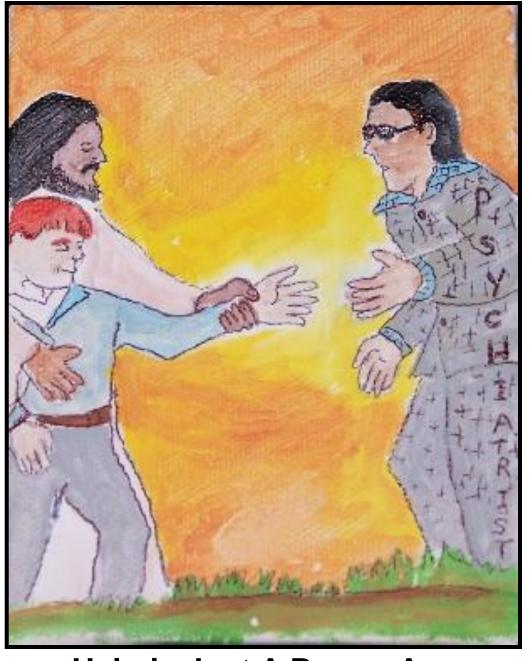
Untitled

I started to go to Wednesday night bible study. I started reading the bible more often. What I learned is all I wanted was I was hungry for God's love for me....

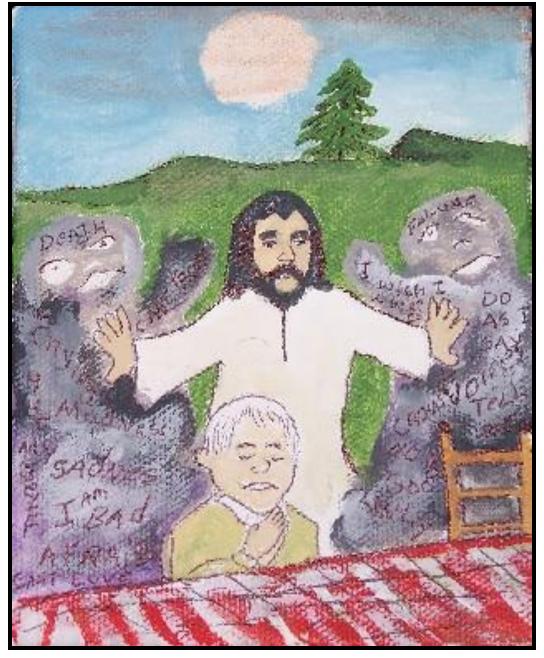
I remember learning bible verses. What I remember the most is that I wanted to learn more about God and what he could to help me feel better instead of depressed. I started reading the bible everyday. I prayed every night before I went to sleep. I had a renewed interest in life. God touched my life in a way that no psychiatrist ever could...

Ever since I have been going to church, I have been feeling God's love around me. I'm not as depressed as I used to be. I pray every night before I go to sleep. I feel more confident. I like myself. I believe in my heart that now that Jesus Christ, God, and I are one, my schizoaffective disorder and depression, will be easier to handle.

Dixie Moon - Essay Contest



Help is Just A Prayer Away



Untitled

A kindly social worker in the hospital, just before I left, told me I really needed to go to a 12 step program...Thank God, I went. I do not remember who was there. I do not remember even how big the crowd was, or exactly what was said. But, what I will never forget was the sense of homecoming and peace that washed over me in that meeting. And I was so very homesick, at the time. God was kind. I needed a 12 step meeting to come to Him. He helped me recognize I needed these meetings. And He took my problems into account. That is, He did NOT appear to me with a clap of thunder, with bolts of lightning, and command me in a stern voice to keep coming back to my 12 step meetings.

Barbara Bohm - essay contest



Untitled

Tina Whitton



Church of Unity: A quaint primitive of a country church.

Betty Lou Bables

Spirituality has given me a sense of direction. Even in the dark intensity of despair and confusion, it offers a focal point of hope. It offers a sense of purpose to the understandings and mysteries of life. A sense of belonging and being part of the whole instead of a fragmented and isolated part thereof.

Life can often be filled with misery and hurt, but there can also be beauty and joy. Most of all there is hope. Hope that can power the motivation and yearning of a lost soul. A hope strong enough to break the barriers and help to overcome the limitations of mental illness. A hope not bound by physical laws, but omniscient, eternal, and infinite.

Jeffrey Holland – Essay Contest



Faithfulness



Faithfulness

There should be faithfulness of taking medicine and prayer; Prayer is the best medicine. Without taking my medicine I would be spiritually bankrupt. I need to pray continually.

I know over those years I had God and many Guardian Angels looking over me.... I feel the hospital staff, my psychologists, my psychiatrist, social workers, etc. have all been guided by God and higher powers. I know my strength over the years has come from God. The many times I've thought about taking my life, God gave me the strength to go on....

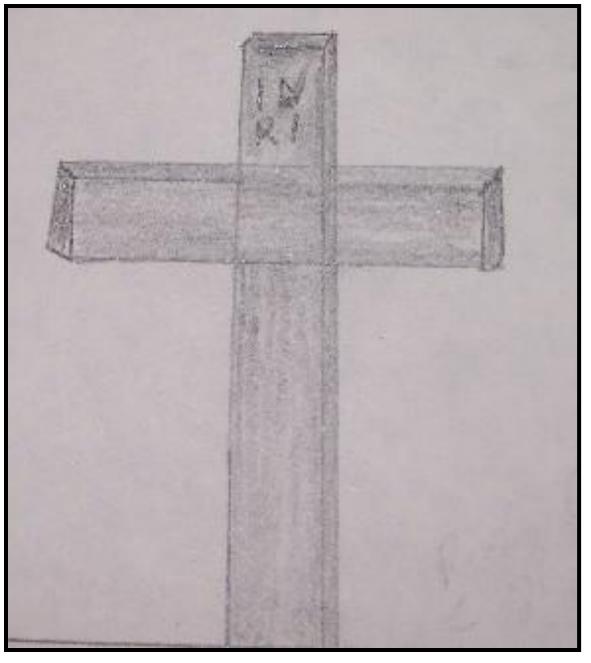
One of my friends I've met in the last few years gave me a rosary. I pray with it and I light candles like my mother used to do. This gives me strength to deal with my illness. I've also started to go to church in the last few years.

Chris Miller – Essay Contest



Free Your Spirit: Graphic design of peace dove and hands of different races.

Ella Devosha



Christ's Cross

I see Love throughout creation. This is the Love that lifts me up, and carries me through good days and bad days. When I hear the laughter of my children and the words spoken to me by friends, it reminds me that GOD is here, and GOD is Love. As we are said to be made in GODS image, we are also body, Spirit and mind. All creation rests in the Mind of GOD, as the ideal of it, and known by it...

I believe I am one with GOD. This thought alone, and knowing all of GOD's attributes, bring healing into my life, and will continue to do so.

Gene R. deVaux – Essay Contest



Thankfulness, Power & Strength



Thankfulness, Power & Strength
It represents the power of God which is the sun,
star and flower which is beauty which we should be
thankful for which is thankfulness showing the
strength of God which we should apply to
ourselves.

I started going to the Mennonite Churches and this changed my life around once and for all. Through the peace and dedication of helping others that the "Thirdway" offers, I have been able to reach an inner peace that I had been searching for since I was a young child. I have written many peace poems and newsletters and even sent some to the President and Congress in the hopes that someday we might end all war and strife in the world and have a world of peace and harmony.

Toni Faustman – essay contest



Forever Promises in Mind, Body and Spirit



Description: One woman; one man with hearts representing hope. The mind and spirit are enlightened by the eternal flame representing continual success for recovery through mental health; ongoing medical research and the mental health professionals that never give up; essentially they are the "eternal flame" that lights up our lives and gives us hope in our mind, body and spirituality.



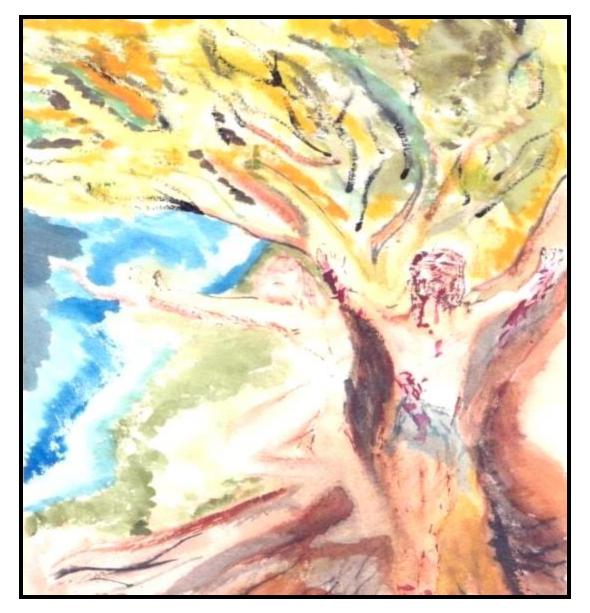
My Mind is Here



Peace of Mind



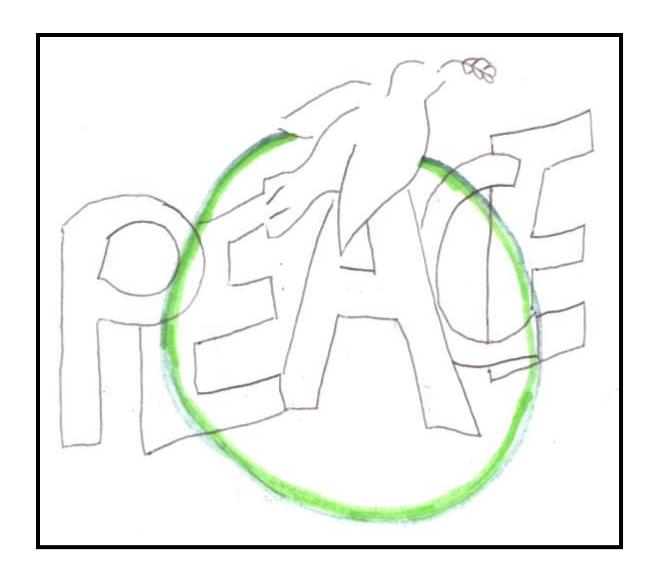
"Grow with your Mind"
A Tree of Life and a River ever Changing



Return to the Tree



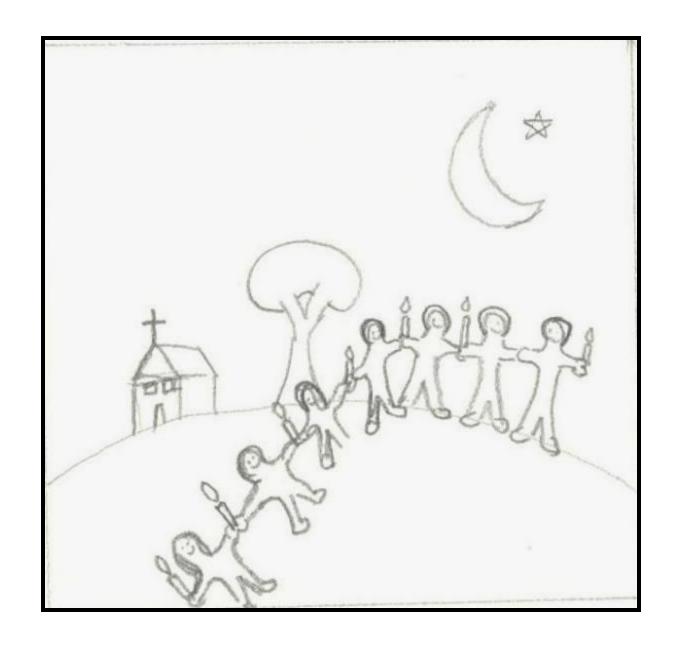
Return to the Tree A surreal experience of being separated from the tree of life and then finding unity through the creator



Peace of Mind and Spirituality



Peace of Mind and Spirituality I believe spirituality, good meds, fitness, diet, and supports lead to peace of mind, patience, long suffering, good selfesteem, faith, hope, and love



Community Spirit

Questions for Reflection

- Based on the above essays and artwork, please answer the following questions:
 - 1. What types of spiritual beliefs, practices, and symbols are portrayed?
 - 2. How are different understandings of the sacred represented?
 - 3. How is nature represented?

Questions for Reflection (Cont'd)

- 4. How is hope portrayed? Why is having hope important?
- 5. What are ways that people gain strength from their spirituality?
- 6. What are some examples of positive thinking stemming from spirituality?
- 7. What impact does spirituality have on how people view themselves?

Questions for Reflection (Cont'd)

- 7. What attitudes are portrayed regarding standard mental health treatments and to what extent do people perceive these as compatible with their spirituality?
- 8. In what ways are relationships and community connections represented?
- 9. Overall, what are the ways in which spirituality is linked to recovery?

Using Art/Essays/Symbols

- Sometimes people find it easier to express spiritual beliefs and ideas through symbolism and art forms. Reasons include:
 - Artwork and symbolism can convey rich and deep meaning not easily expressed in everyday words
 - 2) Artistic modes of communication may be a special strength for some people
 - 3) Some people may feel 'safer' expressing themselves through symbols

Using Art/Essays/Symbols (Cont'd)

 The use of visual art, essays, poetry, and symbols can be valuable for addressing spirituality in practice with mental health service users. Asking consumers to describe the meaning of their artwork/essay/symbol can be a great way to begin conversation on the topic.

Considering Cultural Context

 A primary goal of this project has been to discover and share expressions of 'spirituality and recovery' of consumers of mental health services in the eastern Kansas region. The forms of spirituality represented in this presentation reflect the cultural milieu of those who entered the contest. A future project could compare essays and artwork of consumers located in different geographical regions.

Recommended Readings on Spirituality and Recovery

- Deegan, P. (2006) Recovery journal: Spiritual lessons in recovery. Retrieved from website http://www.patdeegan.com/blog/archives/000011.php on 07/08/2009)
- Fallot, R. D. (2001). Spirituality and religion in psychiatric rehabilitation and recovery from mental illness. *International review of psychiatry*. 13: 110-116.
- Fallot, R. D. (2007). Spirituality and religion in recovery: Some current issues. Psychiatric Rehabilitation Journal, 30(4), 261-270.
- Leibrich, J. (2002) Making space: spirituality and mental health. Mental Health, Religion and Culture. 5(2): 143-162.
- Starnino, V. R. (2008). Best practices for helping clients with a serious mental illness utilize spirituality as a recovery tool. In C. G. Petr (Ed.), *Multidimensional evidence-based practice: synthesizing knowledge, research, and values* (pp. 179-203). London: Rouledge.
- Sullivan, P. (2009). Spirituality: A road to mental health or mental illness. Journal of Religion and Spirituality in Social Work: Social Thought. 28(1), 84-98

Additional Resources

 For numerous other references and resources related to spirituality in social work and mental health practice, see

Dr. Canda's homepage and the

Spiritual Diversity and Social Work Resource Center via

www.socwel.ku.edu/canda

