Internal Family System with Victims of Religious Trauma: Efficacy in treating trauma symptoms and impact on the desire to engage with spirituality

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ABSTRACT

Religious trauma is a pervasive psychological damage and often a contributing factor to many of the problems that bring people to therapy, including depression, anxiety, and relationship difficulties (Stone, 2013). This qualitative study explores the efficacy of Internal Family Systems (IFS) therapy in treating religious trauma and associated symptoms, as well as its impact on the desire to engage with spirituality in victims of religious trauma. I hypothesize that IFS is efficacious in treating symptoms associated with religious trauma, and it will positively impact the desire to engage with spirituality.

INTRODUCTION

- Religious trauma is a pervasive psychological damage resulting from religious messages, beliefs, and experiences. Religious trauma shares many symptoms with posttraumatic stress disorder (PTSD), including avoidance of stimuli that are reminiscent of the trauma and intense distress when exposed to such stimuli.
- People who have experienced religious trauma often cannot tolerate the distress of participating in any kind of organized religion and may studiously avoid religious environments, people, and reading material (Stone, 2013).
- Religious trauma also demonstrated a predictive relationship with depression (Johnston, 2021).

METHODS

Participants

- Adult participants (between the age of 22 – 60) will be recruited via newspaper, online advertisement, and community outreach.
- Participants will be selected if they meet three criteria (a) had traumatic/stressful experience with a religion; (b) meets the diagnostic criteria for either PTSD, PTSD functional impairment (PTSDFI), Disturbance of Self-Organization (DSO), or C-PTSD due to the experience of religious trauma based on International Trauma Questionnaire (ITQ)
- Sample size: 80 participants (20 will receive IFS treatment; 20 will receive non-IFS treatment)

Procedures

- Both the control and IFS treatment group participate in 8 sessions of their assigned therapeutic intervention
- Data for this study will be collected in person in written form twice. Before the initial session (T1) and after completion of 8 sessions (T2)

MEASURES

Traumatic Stress and Impairment

- Traumatic stress and impairment due to religious trauma will be measured by International Trauma Questionnaire (ITQ). Responses from this inventory will be summed to create a final score for participant's traumatic stress and impairment
- The ITQ assesses for PTSD (Re-experiencing in the here and now score, Avoidance score, Sense of current threat score) PTSDFI, and DSO (include affective dysregulation, negative self-concept, disturbances in relationships). The items are rated on a 4-point Likert Scale with higher score representing higher quality

Desire to engage with spirituality

- Desire of engagement with their spirituality will be assessed on a scale from 1-10 with higher score representing higher level of desire

RESULTS

Research Question 1: Is Internal Family System Therapy efficacious in treating PTSD, C-PTSD symptoms in people who experienced religious trauma?

ANOVA test will be used to analyze and compare the data collected from ITQ before the initial session (T1) and after completion of 8 sessions (T2) in both control group and IFS group. I expect that participants in IFS therapy will show a significant decrease in PTSD and C-PTSD symptoms as measured by ITQ as compare those who are in the control group.

Research Question 2: Does the use of IFS impact desire to engage in their spirituality compared with a control group utilizing other trauma-informed treatment modality?

Chi-square test will be used to compare the level of desire to engage in spirituality of those who participated in IFS vs. the control group who participated in alternative therapy. I expect that the participants in IFS therapy will express an increase in their level of desire to engage in spirituality as compare to those who are in the control group.

DISCUSSION

Social implications:

- This study will broaden the growing body of research for IFS through exploring new context of the implication of IFS on treating religious trauma. Should the implication of IFS for treating religious trauma be efficacious, such finding will present clinicians direction and support in serving people who experienced religious trauma that decreases clients’ problematic symptoms while increase clients’ desire to access their spiritual resources, that has been proven to have positive impact on one’s mental health.

Clinical implications:

- This study not only presents an array of evidence for IFS but also confirms that IFS can have positive impact on one’s mental health.

Implications for future research:

- One of the unique contributions of this study is to explore whether IFS will impact people’s desire to engage with spirituality after experience religious trauma. If the results of this study align with what we hypothesized, future research could focus on exploring the role of spirituality and access to spiritual resources on mental health outcomes in people who experienced religious trauma.