CHAPTER 6
DISCUSSION AND CONCLUSION

6.1 Introduction

This final chapter gives an integrated discussion about the research findings. The findings pertain to several issues such as the causal factors, definition of psychological distress and intervention strategies addressing psychological distress. The researcher will revisit the aims, assumptions, opinions of other researchers, and research methods that were handled in previous chapters in order to compare with findings. Conclusions and recommendations will be given following the research findings.

6.2 Integrated Discussion

6.2.1 Church as an important social institution

The researcher agrees with the assumption of Levin (1986) that the Pentecostal church appears to be a significant component of the community, especially as it constitutes of members who are part of the community. According to Taylor and Chatters (1988) within the specific context of the church community, the church operates as a substitute family, fulfilling several important social and emotional needs. It provides its members with a sense of belonging; members share religious and spiritual values. It serves as a life skills centre that empowers the community by disseminating information through workshops, projects, conferences and preaching services that are usually organised by church leadership. The Pentecostal church is also concerned with the well being of its members, whether social, physical and spiritual. According to Ps. O. people join the church because they are burdened with problems whether spiritual, psychological or physical (20-24).
The Pentecostal pastors seem to have an important leadership role in the development and maintenance of many roles the church occupies. They act as guardians for the church, managing and protecting the church members. They also serve as mentors, guiding members through their pursuit of spiritual meaning and biblical principles.

We can therefore conclude that the expressed goals and purposes of the church (embodied in the concept of pastoral care) are to provide fellowship, spiritual sustenance and to ensure the mental and physical well being of members in need. This service to the fellow human beings through the pastors is convergent with the communitarian ethic, which is also a goal of the community psychologists’ approach.

6.2.2 Pentecostal pastors strategies for addressing psychological distress

The results reveal Pentecostal pastors’ intervention strategies that they devised in their concern of social stressors and its distressing effect on church members. According to Belcher and Hall (2001) healing practice is one area where the relationship between psychology and religious systems interacts. The Pentecostal pastors’ healing practice is mostly directed at alleviating the etiological factors of psychological distress rather than its effects. However like most professional psychologists their healing practice involves assessment of the problem including inquiring about the background history.

Similar to the Rogerain theory, they create a supportive environment through acceptance, warmth and empathy. They all agree that a trusting relationship and empathetic listening skills are necessary when dealing with psychological distress. Pentecostal pastors’ problem assessment and healing process overlap with each other.
The goal of this intervention is to challenge the cognitive functioning and to facilitate the problem solving through awareness and acknowledgement of problems and to advice about remedial options. The consequence of the intervention is that the affected person can be able to face inner disintegration and chaos and establish a more complete and stable functioning.

Deliverance is the second intervention which Pentecostal pastors use. Deliverance is a specific Pentecostal term to refer to an intervention that deals with human problems that have spiritual roots. All participants see deliverance as inclusive of prayer and exorcism of demonic spirits. According to Bull, et al. (1998) the practice of deliverance is compatible with the medieval church practice of exorcism of demons or spirits to achieve healing. It can therefore be said that while the world is changing and advancing their healing practices, the Pentecostal church still address psychological distress as a spiritual problem which comes as a result of demon possession and requires exorcism or deliverance to heal.

6.2.3 Pentecostal pastors referral patterns

Pentecostal pastors mentioned that they sometimes opt for referral with social problems that are beyond their understanding or cannot handle. They often collaborate with experts that are state-funded such as social workers and police. However they seldom refer to psychologists.

A combination of reasons similar to the ones stated by Taylor et al. (2000) and Constantine et al. (2000) has been cited to explain why they seldom refer people to professional psychologists.

First of all professional psychological services are seen as very expensive for most of their members. Secondly these western orientated mental health services are not recognised by the majority of congregants. Thirdly, psychological service facilities are not readily available in the township.
Moreover Pentecostal pastors seem to accuse psychologists of ignoring the spiritual side and only concentrating on the physical and psychological.

### 6.2.4 Intervening variables of pastoral services

The research revealed valuable information about the state of Pentecostal pastors in townships. It was found that pastors encounter problems and hardships in their heavy commitment and moral responsibility to help the church community.

Firstly, the demand for assistance is extensive while there is lack of resources to effectively intervene. Material resources such as money and church buildings are scarce. Their income is inconsistent and dependent on the church members’ bountifulness.

Secondly, while they function as frontline mental health workers in their churches, they often do so with inadequate training. They claim that their pastoral training in theology institutions was insufficient to equip them with skills to effectively deal with diverse stressors and their effects.

Furthermore they lack social support, it is only with the formation of the minister’s fraternal that pastors can receive emotional support through networking and collaborating with other pastors.

### 6.2.5 Psychological distress: Pentecostal worldview vs. psychological approaches

The Pentecostal pastors have the same opinion with other researchers that the process of transformation that our country is undergoing after the apartheid era has come with major redefinitions of social, political, and cultural foundations. These changes seem to contribute to the occurrence of psychological distress (Barbar, 1994, Jerusalem, 1993; Pillay & Lockhat, 2001). Psychological distress is seen as a systemic variable. Because it
affects the whole nation, including the government, community, church, leaders and individuals.

According to Mouton (1992) and Duffy & Wong (1996) community is a system with interdependent components. As Kiernan (1995) asserted, the results show that religion exists in a definite social context, where there is mutual influence between the social and religious spheres, the one bolsters the other and change in one will have repercussions for the other.

The study reveals that Pentecostal pastors are responding to congregants and community members who are exposed to a wide range of stressors that can precipitate psychological distress. They define psychological distress as a disturbance that occurs due to stressors, and affect the behaviour, mood, cognitive functioning and spiritual well being. This disturbance further impairs the social and occupational functioning. The Pentecostal pastors’ definition of psychological distress seems to link with other definitions of psychological distress given by authors such as Lerutla (2000), Burnette and Mui (1997), Price and Lynn (1986) and many more referred to in chapter two.

Pentecostal pastors description is further correlated with the medical model diagnostic statistical manual of mental disorders DSM IV criteria. According to this manual, psychological disturbances often affect behaviour, mood, thinking and communication.

The pastors’ definition share common features with several of the DSM IV diagnoses yet they do not see psychological distress as an illness requiring medical treatment. According to the pastors’ description, psychological distress could be considered under the diagnosis of mood disorders since it has a strong mood component.

Results also show that Pentecostal pastors seem to associate psychological distress with adjustment reaction to social stressors. This description is therefore partially associated with the DSM IV criteria for adjustment
disorders, because it involves patterns of psychological or behavioural disturbance that occur in response to identifiable stressors leading to significant impairment in social or occupational functioning (Kaplan and Saddock, 1998).

However, only a partial relationship can be made between the pastors’ psychological distress description and the highly specified and systematic DSM IV model.

Furthermore, similar to interpersonal approach, Pentecostal pastors describe psychological distress as a maladaptive behaviour observed particularly in relationships.

When they are compared, the pastors seem to share common views with the psychodynamic approach, which states that psychological distress is due to unresolved past conflicts. This opinion is evident particularly when pastors inquire about historical background during their encounter with a distressed person.

When comparing results with the cognitive approach, it appears that they both attribute psychological distress to dysfunctional thinking, which may lead to inappropriate ways of interpreting experience.

From examining the significant partial similarities between Pentecostal pastors’ views and psychological approaches, evidence suggest that they share common ideas since they both offer some kind of explanation for human behaviour. Moreover, they both aspire to improve human conditions.

This comparison however, does not ignore the fact that Pentecostal and psychological worldviews are still very different. Pastors’ incorporates spiritual and transcendent belief as an important component of their worldview. Their strong association of the physical and spiritual reality further demonstrates the pastors’ worldview, resulting in psychological
distress at times referred to demon possession, which require exorcism to be cured.

Further more, psychological discourse is scientific and based on empirical support (Kloos & Moore, 2000). Psychologists do not seem to consider the spiritual reality as existing part of their theoretical explanations and practice. Moreover, in the past, psychology as a scientific discipline viewed the philosophy and practice of religion with scepticism. Religious settings and psychology were seen as different to an extent that they were assumed incompatible for inquiry (Gorsuch, 1988).

However judging from the discussion, it seems that we are faced with the reality that pastors play a major role in the lives of many black people in the effort to address social issues in the community. Especially when we consider the current limited psychological care services available to the black community.

6.3 Critical analysis of the study

Given the aim of the study of understanding psychological distress from the worldviews of Pentecostal pastors. Grounded theory approach seemed suitable for this exploratory study since it is qualitative and inductive in nature and provides a thorough theoretical explanation.

The interview question employed was broad and open with the attempt to give the participants the opportunity to express their understanding comprehensively as aligning with the exploratory nature of the study. This approach led to a rich description of psychological distress. It further gave more information about other things that were not directly related to the main question of the research. For instance, pastors took the liberty of sharing about their difficulties in the pastoral role, and their referral patterns.
However, the researcher found it very challenging to formulate the research question, since she had to come up with concepts that were unambiguous and easily accessible to research participants particularly since they are assumed to have a different language and world view. Words such as psychopathology, psychological illness and psychological problem were proposed and considered. But the concept of psychological distress seemed appropriate because it is understandable and accessible even to lay-people.

At times during interviews it appeared as though the concept ‘distress’ seemed to lead some participants to thinking of stress. Nevertheless, the results as a whole reveals that the participants managed to appropriately relate to the concepts in the research question. From experience of formulating the research question it be deduced that formulating research questions for participants of different world views and language can be a challenging experience.

Furthermore, the results have given a meaningful picture of Pentecostal pastors’ understanding of psychological distress. The research participants do not represent the range of existing religious communities and thus results do not generalise to all pastors. Therefore, these findings cannot convey the full picture of the views of pastors from black townships.

6.4 Practical implications and Recommendations

It is clear from the research study that the participation of Pentecostal pastors is absolutely critical to the success of the community mental health endeavour to bring mental services to the community. This is especially so because, of the barriers of the present professional psychological services, such as lack of psychological services in the townships, very few black psychologists, language and cultural barriers and societal norms that lead to psychological services being perceived as irrelevant or inappropriate (Pillay & Lockhat, 2001).
The research findings have provided information on the subjective reality of Pentecostal community, which is imperative for psychologists in gaining understanding, which can hopefully lead to adjustment of our perceptions, especially when planning service provision to the church population in future.

Pentecostal pastors are certainly key figures in the emancipation of the black community in the critical period of transition and uncertainty in the South African nation. Moreover, the Pentecostal church and its involved pastor are instrumental in the assessment and management of psychological distress in individual church members.

Pastors confessed lack of concrete knowledge of recognizing or dealing with psychological problems. They feel that they are often put in the position of making heroic efforts with inadequate training and few resources. Accordingly, this is an area in which psychologists and Pentecostal pastors might collaborate with one another in addressing the mental health needs of congregants and community members.

In addition, it is recommended that the mental health professionals should look into developing training programmes, which would focus on self-awareness of personal and role limitations, self-care coping skills, diagnostic and referral skills and crisis counselling strategies. According to Weaver (1995) a short, time-limited counselling model would appear to be most appropriate.

Voss (1996) states that collaboration between Pentecostal pastors and mental health professionals is imperative for the provision of improved mental health services. Pentecostal pastors can take part in insuring that mental health programs in the community remain socio-culturally relevant and meet the needs of the their congregants since they are the specialists in their context (Kloos & Moore, 2000).
According to Taylor *et al.* (2000), a bi-directional collaboration would be most suitable where psychologists can consider conducting in-service training programs for pastors, and conversely pastors could provide in-service training to psychologists on how religious beliefs and practices influence the experience of personal or family problems.

They further state that a partnership model of program development between mental health service providers and religious institutions has proven to be very successful in the black American churches.

Therefore, given the Pentecostal pastor’s pivotal role as gatekeepers within their congregation, they can in future serve as active referral agents for their congregants. The pastors can further assume the role of public health educators by serving as liaisons between psychologists and congregants.

By virtue of their Pentecostal authority and their central role in the church and community, the Pentecostal pastors are considered ideal people to convey the information to affect behavioural change in the black township community.

With the future collaborative relationship, it would be convenient for pastors to sanction the use of their church venues as mental health promotion sites.

To take a giant leap further, pastors can in future become directly involved in mental health policymaking.

Taylor *et al.* (2000) and Edwards *et al.* (1999) mention a few potential hindrances to the ideal collaboration between psychologists and Pentecostal pastors. Firstly, there are potential conflicts in perspectives and values held by psychologists and religious institutions, even though they share many common goals regarding the provision of support and services to individuals and communities. There is also a potential for conflict over issues of territory infringement and what the appropriate roles of pastors versus psychologists.
There can be many exciting possibilities for the collaborative initiative between Pentecostal pastors and psychologists. However it is imperative for further research to be conducted to test these ideas.

6.4.1 **Recommended guidelines for psychologists’ future collaboration with pastors**

Considering the common ground of trying to offer explanations for human behaviour and improve human conditions between psychologists and Pentecostal pastors. It was recommended that both pastors and psychologists partner in their determination to understand human behaviour. Chaddock and McMinn (1999) are of the opinion that shared values and trusting relationship are prerequisites to collaboration.

The next question to be asked is how can bridges be built between psychologists and pastors who are interested in forming collaborative relationships?

The researcher has compiled a number of guidelines to help those psychologists interested in working with pastors. Firstly, it is suggested that aligning with the community psychology principles, psychologists should respect diversity of the Pentecostal community, recognising that Pentecostal pastors possess a long tradition of providing mental health services to the diverse community of South Africa. According to Dalton, Elias and Wandersman (2001) failure to respect other’s diversity would hinder efforts to create effective collaboration.

Secondly, psychologist should take seriously the recommendation to include religious leaders in their inquiry and practice. Judging from the results it may be concluded that locating research interventions and projects in religious settings will enrich the study and practice of psychology. Particularly given the pastors’ lack of skills and resources to deal with psychological distress
occurring in the black community and psychologists’ inefficiency in reaching the black community. Kloos, Horneffer and Moore (1995) add that collaboration between psychologists and pastors depends on furthering knowledge of shared values and possibilities for mutually beneficial outcomes.

Thirdly, psychologists can inform themselves further about existing research literature on pastors’ issues, particularly that seem to link with psychology.

McRay, McMinn, Wrightman, Burnett and Ho (2001) suggest that psychologists committed to collaborating with pastors need to learn the theological concepts and language that allow them to share informed dialogue.

Finally, part of respecting the Pentecostal pastors as specialists in their own field includes willingness of psychologists to venture out from practice setting and remaining open to innovative possibilities in the future (Edwards et al., 1999).

6.5 Directions for future research

The black churches served and still serve a crucial role in the mental health needs of its members, the literature review demonstrate that there is limited information on this topic especially in the South African context. With the goal of exploratory research to formulate more precise questions that future research can answer (Neuman, 1997). This research has certainly laid a foundation by providing useful information regarding the Pentecostal pastor’s understanding of psychological distress, their intervention strategies, the hardships in their helping role and much more.

Additional research is of necessity particularly to understand further, the Pentecostal and even other religious denominations pastors’ definition of psychological distress, quality of current mental health services that operate
within the church including the deliverance practice, knowledge of psychological services and the availability of psychological services within the community.

Further research would provide some indication of the resources and capacities inherent in Pentecostal churches and their possible orientation toward partnerships with psychologists. Furthermore research studies are of advantage since they build a collaborative relationship between participants and researchers. According to Kloos and Moore (2000) consideration of religion in research can foster the development of community psychology in several distinct ways: Firstly by advancing theory beyond current boundaries, secondly it can improve research and it can enhance the ability to research people who are not served by current psychological interventions.

6.6 Researcher’s Note

The quality and usefulness of research data depends on the context in which it is collected and especially on the collaborative relationship between the researcher and research participant (Dalton et al., 2001).

The qualitative method allowed the researcher access to richer understanding and fuller interaction with the participants mainly because of the rapport that was formed during the interviews. Bond (1990) guided the researcher by arguing that the researcher must work towards a respectful, mutually beneficial relationship.

Furthermore participants confirmed accuracy of findings summaries that was sent to them. They expressed full appreciation for getting the opportunity to verify their interviews. The participants interpreted research process as respectful and even concerned for their role in the community. This study certainly led the researcher into a new special relationship with Pentecostal
pastors. I fully value the experience as enriching and extending to my knowledge.

6.7 Conclusions

It is evident that the participants are very involved in the effort of giving support through managing the social phenomenon of psychological distress in their congregations. The churches still provide resources and opportunities that are inaccessible to black people from the mainstream institutions.

It can thus be concluded that despite the limitations of Pentecostal pastors in treating psychological distress they are ideal people who can take part with other mental health professionals in the planning, promoting and delivering preventive mental health care in the black community.

With the first step of involving the pastors in the research, and giving them a voice, it is hoped that a special relationship is formed. It is hoped that this relationship will help facilitate the many future researches and programmes that will be implemented in this religious community.