

Research Article





# Spiritism, mental health, and public health: spiritist therapeutics under discussion

#### **Abstract**

Spiritism, a scientific, philosophical, and religious movement originated by Kardec in the 19th century, offers a set of activities aimed at assisting in health: Spiritist Therapeutics. Despite its socio-cultural significance, this therapeutic approach is seldom addressed in the health sciences. This study corresponds to a qualitative critical analysis following a literature review of Spiritism, psychic sciences, and public health. Its purpose is to characterize Spiritist Therapeutics, seek an understanding of its relationship with mental health, and contemplate public health as a research field for this topic. Spiritist Therapeutics consists of theoretical and practical educational and supportive activities based on the Christian doctrine as seen through the Spiritist perspective. Study activities can provide psychic support through their teachings, and social gatherings enable community support. Among the practical activities that aid mental health, fluidotherapy (fluidized water and "passe") stands out due to the greater number of associated research studies. In summary, Spiritist Therapeutics aims to achieve inner reform in individuals through intellectual and moral improvement, with positive consequences for mental health. However, the health sciences demonstrate resistance to researching such therapeutics due to traditional lines of thought, such as materialism and the biomedical paradigm. Therefore, public health, with its transdisciplinary and democratic characteristics, may represent a fair and unbiased scientific field to deepen the understanding of Spiritist Therapeutics and its relationship with mental health.

**Keywords:** spiritism, mental health, public health, spiritist therapy, therapies

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### Introduction

In the current field of health sciences, there is a significant number of publications addressing the topic of spirituality. This trend is due to the fact that "religious and spiritual dimensions are among the most important factors in shaping human experience, beliefs, values, behavior patterns, and illness", in addition to the fact that "a solid research foundation and common sense argue that patients' religious and spiritual beliefs are somehow linked to their mental health and well-being".

Among the lines related to spirituality, one stands out: Spiritism, which corresponds to the theoretical body concerning Allan Kardee's research, culminating in the production of literary works that initiated the Spiritist movement.<sup>4</sup> Spiritism, therefore, is the organization of Spiritist doctrine as a movement of triple constitution: science, philosophy, and religion.<sup>4</sup> Spiritist science is predisposed to study spiritual phenomena, such as mediumship; Spiritist philosophy advocates the analysis and understanding of the self and natural things from a spiritual perspective, and Spiritist religion seeks to promote intellectual and moral evolution using Christianity seen through the Spiritist perspective.<sup>5</sup> In this way, the Spiritist systematic approach to improving individuals, both rationally and morally, fosters a system of psychological care with an assistive and therapeutic inclination,<sup>6,7</sup> recognized and used by part of the Brazilian population.<sup>8</sup>

Spiritist Therapeutics (ST), the term conventionally used for this research, focuses on achieving a 'mental renewal' through rationalized reflections and clarifications on human and spiritual themes, as well as encouraging behavioral changes in line with Christian ethics. Therefore, it is assumed that ST can improve mental health, providing a connection between Spiritism and psychic sciences. However, Spiritism and its activities face resistance in being considered a research agenda, for example, by psychiatry, resulting in a certain

negligence in publications on this topic. It is a fact that "Spiritist organizations have established a network of charitable psychiatric hospitals throughout Brazil". However, "Kardecist Spiritism, despite its demographic and sociological importance, has received little emphasis in studies". It This paradox corroborates such negligence.

It is known that psychiatry has a biomedical orientation<sup>12</sup> and materialistic tendencies<sup>13</sup>, whereas Spiritism belongs to the humanities and religious sciences, highlighting a contrast that could explain the difficult dialogue between these two areas. However, psychology also shows resistance in addressing ST as a topic of investigation, even though it belongs to the same field of knowledge as Spiritism.<sup>14</sup> Therefore, in order to emphasize ST as a research subject, a transdisciplinary perspective may be interesting, characterized by communication between different disciplines, advancing knowledge beyond the boundaries of each constituent part.<sup>15</sup> To this end, public health emerges as a democratic scientific space to potentially study ST and its relationship with mental health and associated sciences, as it provides the necessary aspects of subjectivity, interdisciplinarity, and multidimensionality.<sup>16</sup>

## Material and methods

This literature review on the interrelationships between Spiritism, mental health, and public health, with TE as its agenda, is based on the critical analysis of qualitative research, which employs reflexivity, understood as self-critical awareness throughout the research process. <sup>16</sup> The literature on Spiritism was explored in relation to its therapeutic functions in mental health, and publications from the fields of psychiatry, psychology, and public health were also examined for correlations. The aim is to reflect on and emphasize TE as a topic of scientific research in mental health, seeking to characterize TE, enhance understanding of its relationship with mental health, and contemplate public health as a research field for this agenda.





# **Results and discussion**

In Brazil, Spiritism is guided by the Brazilian Spiritist Federation (FEB), which is responsible for establishing the guidelines and regulations related to the Spiritist movement and Spiritist centers, following the Kardecist doctrine. FEB has a unifying and organizational body known as the National Federative Council, which is responsible for the Work Plan and Guidance for Spiritist Centers, public documents that contain the guidelines for Spiritist activities and meetings. Fig. 19

The activities advocated by FEB and established in its regulations include Public Lectures, Systematic Study of the Spiritist Doctrine, Spiritual Assistance (Study of the Gospel, Fluid Therapy, and Fraternal Assistance), Study of Mediumship, Spiritist Evangelization, Mediumistic Meetings, Service of Assistance and Social Promotion, Dissemination of the Spiritist Doctrine, Administrative Activities, and Activities for the Unification of the Spiritist Movement. With the exception of administrative functions, these activities have an educational aspect, from a Christian and Spiritist perspective, and an assistance aspect, following the principles of human care and charity. Thus, a theoretical and practical system with a therapeutic function is established, conventionally referred to as Spiritist Therapeutics (ST).<sup>6,7</sup>

ST provides an environment for reflection and self-analysis through theoretical learning activities, including Public Lectures (attending open lectures on various topics), Study of the Gospel (meetings on passages from "The Gospel According to Spiritism"), Systematic Study of the Spiritist Doctrine (meetings on concepts and characteristics of Spiritist doctrine), and Study of Mediumship (meetings on concepts and characteristics of mediumship).<sup>19</sup>

In parallel, other ST activities offer a more practical involvement, such as Fraternal Assistance (receiving individual assistance from a facilitator), Fluid Therapy (bioenergetic treatment through fluidized water or laying on of hands - "pass"), Mediumistic Meetings (participating in meetings where contact is established with discarnate entities through mediums to bring benefits to someone, whether incarnate or disincarnate), Prayers (practicing prayer according to Spiritist doctrine), and Charity (engaging in unpaid assistance and social promotion services). Furthermore, those involved in Spiritism are often invited to participate as facilitators - volunteers in the activities of Spiritist centers.<sup>19</sup>

### Spiritist therapy and mental health

The theoretical part of Spiritist Therapy (ST) is characterized by social group meetings, aimed at collective study, as well as the formation of bonds and a support network. Research shows that educational processes are beneficial for mental health, with Spiritism being integrated into this proposal. Furthermore, social support is important as a health tool, 22 and community interaction contributes to good mental health. Onversely, loneliness and isolation can exacerbate stress, depression, 25 and increase the risk of suicide. 6

In the practical aspect of ST, participants actively engage in specific activities, such as Fraternal Assistance, where individuals receive individualized support similar to traditional psychotherapy from a designated facilitator/worker, providing a compassionate listening and comforting dialogue<sup>19</sup> These forms of assistance for individuals experiencing psychological distress have been widely recognized for their effectiveness within psychology.<sup>27</sup> Despite being demanding for the worker providing individual support to someone with potentially serious mental health needs, Fraternal Assistance is mandatory and

offered free of charge in adherence to doctrinal guidelines<sup>9</sup> and regulatory authority requirements (Figure 1).<sup>19</sup>

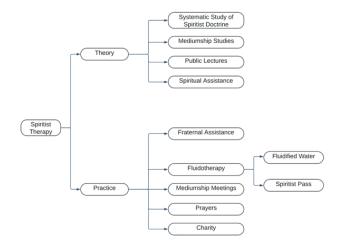


Figure I Spiritist Therapy: theory and practice as postulated by FEB 2006 apud Sales et al. $^{66}$ 

Fluidotherapy, a bioenergetic treatment performed through magnetized water or passes, has been validated in previous research for improving mental health parameters, such as anxiety, depression, and muscular tension, <sup>28</sup> as well as promoting a sense of well-being, <sup>29,30</sup> and enhancing the quality of life for patients with joint injuries. <sup>31</sup> It's worth noting that in Brazil, Reiki and the technique of laying on hands are two integrative therapies included in the National Program of Integrative and Complementary Practices (PNPIC), approved for use within the Unified Health System (SUS), <sup>32</sup> and they share significant similarities with Spiritist fluidotherapy through passes. Furthermore, evidence also suggests benefits for mental health from these integrative therapies. <sup>33,34</sup>

As for Mediumship Meetings, mediumship has been previously recognized as a positive instrument for promoting mental health. 35,36 In previous research, considerable improvement in well-being parameters was demonstrated in the test group of individuals with cognitive impairments.<sup>37</sup> Mediumship Meetings, when combined with other Spiritist therapeutic approaches, have also achieved symptom remission in depressed patients.38 A study by Lucchetti et al.,39 reviewed the relationship between health and six Spiritist therapies: prayer, laying on hands (passes), magnetized water, volunteer work, spiritual enlightenment (Evangelical therapy), and spirit release (Mediumship Meeting). This research revealed strong evidence of mental health improvement through volunteer work, prayer, and passes, although there was a lack of studies related to magnetized water and spirit release treatment.<sup>39</sup> In a more recent national study conducted in Spiritist centers in the city of São Paulo, spiritist therapies were most frequently associated with spirit release (92.7%), and the most treated health issue was depression (45.1%), followed by cancer (33.3%).40

The practice of prayer is another activity recommended by Spiritism, whether performed at Spiritist centers or at home. In the latter case, it is referred to as "Home Gospel" 19. It is essential to highlight the importance of prayer for Spiritism, as it signifies an active spiritual process, a moment when an individual focuses on receiving positive vibrations, purifying the mind, and harmonizing thoughts and feelings. Recent studies show that prayer is a valuable resource for improving health, including its potential to help with psychiatric disorders such as depression and anxiety, and improving overall

quality of life. 42 However, evidence suggests that the beneficial effects of prayer on mental health depend on the perceived relationship with God, highlighting the value of spirituality (a direct relationship with God) over religiosity (a relationship with God through an institution). 43 There is also evidence supporting the importance of private prayer, underscoring the relevance of the practice of Home Gospel. 44

Spiritist Therapy encourages activities related to social assistance and community promotion, whether within the center or through external actions. For Spiritism, charity is of fundamental importance, as Allan Kardec himself stated that "outside of charity, there is no salvation (for the soul)". Studies show that volunteering for charitable activities is directly related to improved mental health parameters, better individual and community quality of life, 46 and increased well-being in adults through social cohesion. Despite some possible suffering associated with volunteering, the most evident signs point to improved mental health. 48,49

In summary, the purpose of the activities comprising ST, as well as the primary goal of Spiritism, is the moral and intellectual improvement of individuals through the Christian doctrine seen from the Spiritist perspective, a process that Spiritism calls "inner reform". 18 This process of inner reform encompasses self-awareness and an expanded perspective of reality, which can lead to changes in feelings, thoughts, and behaviors, ultimately resulting in improved mental health. 50

Recent research conducted by Sales examined the involvement with Spiritism and its relationship with mental health during the COVID-19 pandemic. It was observed that greater involvement with Spiritism was associated with a lower prevalence of stress, anxiety, depression, and suicidal ideation, and higher involvement with Spiritism before the pandemic was associated with a lower likelihood of severe suicidal ideation during the pandemic.<sup>6,7,51</sup> Spiritism has previously been recognized as a religion with psychological demand,<sup>10</sup> as it attracts individuals from other religions who are experiencing psychological distress.

Knowing that psychology aims for in-depth psychological understanding with a view to clinical improvement, while psychiatry pursues the same goal through psychopharmacology, ST shares a notable similarity in purpose with these two disciplines. ST, like traditional therapies in health sciences, focuses on the psychological realm and aims to improve mental health.<sup>52</sup>

## Spiritist therapy and public health

It is a fact that the current scientific paradigms - materialism, Cartesianism, and positivism - fail to encompass the uniqueness of human spirituality phenomena, as they do not even consider the spirit as a possibility. This condition highlights the need for a broader scientific perspective that embraces post-materialistic concepts and ideas as worthy research topics. <sup>21</sup> It is understood that public health represents a field of science more open to less traditional research models, as it allows dialogue with contemporary scientific paradigms such as quantum, holistic, and spiritual. <sup>6,7,13,51</sup> In this regard, Spiritist Therapy (ST) can find fertile ground for research in public health, particularly focusing on mental health.

Public health is not a medical or paramedical specialty.<sup>53</sup> It is a complex field in healthcare. According to the French philosopher and sociologist Bourdieu (p.27): "Fields are places of power relations that imply immanent tendencies and objective probabilities." The field is also (p.1): "[...] the space of competitive struggle. What is at stake in this struggle is the monopoly of scientific authority defined as

technical capacity and social power; or, if you will, the monopoly of scientific competence". 54 Therefore, public health is a scientific field where various areas of knowledge connect, interact, and compete to deepen understanding, allowing for diverse scientific perspectives and potentially creating a democratic space to study ST.

Public health encompasses knowledge from various schools of thought without compromising their theoretical and methodological natures, allowing an intersection between these theories. This interdisciplinarity, corresponding to the dialogue between different disciplines, can go beyond and transcend the boundaries of the constituent disciplines, generating a transdisciplinary knowledge. <sup>15</sup> The transdisciplinarity of public health can leverage the understanding at the interface between Spiritism and health sciences, especially in the context of mental health, as stated by Campos (p.616): "[...] Speaking of mental health means talking about a broad area of knowledge and actions characterized by its broadly inter and transdisciplinary and intersectoral nature". <sup>53</sup>

The expanded prism of public health promotes a departure from the biomedical model of mental health typical of psychiatry. According to Foucault (p.14): "We cannot readily admit either an abstract parallelism or a massive unity between the phenomena of mental pathology and organic pathology". The sociological perspective integrated into public health considers that mental health needs to be approached from a different perspective than traditional biological medicine because mental health exhibits subjectivities and singularities that position it in proximity to human sciences such as psychology. Foucault further adds (p.14): "[...] it is impossible to transpose from one to the other the schemes of abstractions, the criteria of normality, or the definition of the sick individual". While biomedicine and psychiatry manifest objectivity and pragmatism in addressing physical diseases and mental disorders, for public health, even the concept of disease or disorder is relative. The promote of the sick individual of the public health, even the concept of disease or disorder is relative.

According to Canguilhem, a French philosopher, physician, and epistemology specialist, there is a (p.36): "continuity and indistinguishability between the physiological and pathological state".56 Within mental health, this continuity is even more evident, as there are no clear material boundaries between what is normal and what is not, making the classification of mental disorders based on criteria established in diagnostic manuals, the classification itself depending on the clinical observation of the physician-therapist. Canguilhem also states (p.77): "being healthy and being normal are not entirely equivalent facts, as the pathological is a kind of normal".55 So, in addition to the subjectivity of mental symptoms, the process of care and diagnosis is also subjective, depending on the judgment of the caregiver. Therefore, from this sociological perspective, ST would already have intrinsic value, as it does not focus on classifying or highlighting the pathological but, rather, concentrates on addressing the individual's psychological demands and complexities.

According to Boaventura de Sousa Santos, a legal sociologist and full professor at the University of Coimbra, human and social phenomena need to be studied for the (p.36) "obtaining of intersubjective, descriptive and comprehensive knowledge, rather than objective, explanatory and nomothetic knowledge". 57 Understanding these phenomena is subjective as it considers the subjectivity of mental attitudes and human actions. The same applies to ST. The field of public health presents itself as a space capable of addressing, experimenting, and providing scope for the therapeutic aspects of this doctrine, as it allows studying science, philosophy, and religion as integral parts of non-exclusive health care, in line with the "ecology of knowledge" explained by Santos (p.19): "The ecology of knowledge

aims to create a type of relationship between scientific knowledge and other forms of knowledge. It consists of granting equal opportunities to different forms of knowledge".<sup>57</sup> Here, one can see why exploring the subject not through a reductionist medical specialty but rather through a comprehensive lens like the transdisciplinary field of public health is essential.

It is important to mention the work of Madel Luz, a professor at the State University of Rio de Janeiro and the Federal University of Rio de Janeiro. Luz criticizes modern science, stating that it has a highly secular, empirical, and pragmatic sociocultural profile.<sup>58</sup> Unlike the biomedical model, there are medical rationalities that have a broader, more rational, and collective view of healthcare, opening space for social health practices and focusing on structures beyond the biological.<sup>58</sup> At this point, it can be inferred that ST potentially fits into the concept of a medical rationality in health.

Luz's work was fundamental for the development and regulation of the National Policy of Integrative and Complementary Practices (NPICP), legitimizing numerous treatments that have social and energy connotations based on the principles of medical rationalities.<sup>59</sup> Among these is laying on of hands, which has a clear relationship with ST, in this case, the "passe".<sup>60</sup>

Another relevant factor that promotes the study of Spiritism in scientific research is that it is socially recognized as a religious movement. According to Durkheim, a French sociologist considered the father of sociology, (p.8): "religious representations are collective representations that express collective realities". 61 Religion, for him, is, therefore, "eminently social." It is known that Spiritism is threefold - science, philosophy, and religion 18 – and this religious aspect also fits into the transdisciplinary and democratic perspective of public health. Thus, ST can encompass science in its three aspects: the scientific part dialogues with psychiatry and psychology in their empiricism and experimentation of spiritual phenomena, 62 the philosophical part approaches human sciences through the study of human and spiritual aspects, 63,64 and the religious part interacts with the community, establishing community centers for spiritual-inspired social care. 65

It is understood that the field of public health represents a relevant scientific platform for enabling a democratic and sensitive study of singularities, avoiding cognitive injustices and deleterious amputations. Thus, public health can create space for in-depth and abundant research on ST, prioritizing mental health care regardless of concepts and preconceptions and promoting improved assistance to psychological suffering, so common in contemporary times.<sup>66</sup>

#### Final considerations

From a scientific perspective on mental health care, Traditional Spiritist Therapies (TE) can and should be studied more thoroughly due to the need for alternative healthcare practices to psychopharmacology. Currently, a portion of the Brazilian population seeks Spiritist assistance with the aim of improving emotional wellbeing; however, TE remains a secondary research focus, and Spiritism appears hesitant in its pursuit of scientific legitimacy.

A limited number of studies have shown the benefits of some TE for mental health, with fluid therapy standing out. However, what stands out is the lack of attention given by science to this topic, in contrast to the socio-cultural movement towards seeking non-medical assistance. To change this reality, the field of public health, in its transdisciplinary and comprehensive perspective, can serve as a scientific platform to expand the study of TE. To achieve this, it is necessary to research its social and religious significance, its impact

on health, and its characterization as a potential medical rationality spontaneously generated by culture and non-commercial in nature. It is envisaged that TE, when studied seriously, can integrate and complement mental health care, serving as a potentially valuable resource to expand psychiatric clinical practice.

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#### **Conflicts of interest**

The authors declare that there is no conflict of interest.

#### References

- Gonçalves JPB, Lucchetti G, Menezes PR, et al. Religious and spiritual interventions in mental health care: a systematic review and meta-analysis of randomized controlled clinical trials. *Psychological Medicine*. 2015;45(14):2937–2949.
- Lotufo F, Lotufo Junior Z, Martins JC. Influências da Religião sobre a Saúde Mental. São Paulo: ESETec; 2009. p.43.
- Koenig H. Medicine, religion and health: the meeting of science and spirituality. Porto Alegre: L± 2015.
- 4. Kardec A. What is Spiritism. Araras: Instituto de Difusão Espírita; 2004.
- Balduino L. Psiquiatria e Mediunismo. Rio de Janeiro: Federação Espírita Brasileira; 1995.
- Sales TM, Mota RMS, Macena RHM. Stress and anxiety among people with spiritist engagement: a cross-sectional analysis before and during COVID-19. Res Soc Dev. 2023;12(7):e1412742368.
- Sales TM, Mota RMS, Macena RHM. Stress, anxiety, depression and suicidal ideation among people with spiritist engagement before and during COVID-19: a cross-sectional study in the state of Ceará/Brazil. Rev Carib Cienc Soc. 2023;12(1):150–171.
- Instituto Brasileiro de Geografia e Estatística (IBGE). Senso demográfico de 2020.
- Kardec A. The gospel according to Spiritism. Araras: Instituto de Difusão Espírita; 2009.
- Dalgalarrondo P. Brazilian studies on religion and mental health: history and current perspectives. Archives of Clinical Psychiatry (São Paulo). 2007;34(Supl – 1):25–33.
- Dalgalarrondo P. Religião, psicopatologia e saúde mental. Artmed Editora; 2009.
- Foucault M, Shalders LR. Mental illness and psychology. Tradução de LR Shalders. Rio de Janeiro: Tempo Brasileiro; 1975.
- 13. Capra, Fritjof. The turning point. São Paulo: 2006.
- Matheew-Geevarugheese SE, Corzo O, Figuracion E. Cultural, religious, and spiritual issues in palliative care. *Primary Care: Clinics in Office Practice*. 2019;46(3):399–413.
- Rocha Filho JBD. Transdisciplinaridade: A Natureza Íntima da Educação Científica. 2<sup>nd</sup> edn. Porto Alegre: EDIPUCRS; 2015; p. 130.
- Bosi MLM, Mercado FJ. Qualitative health services research. Ciênc Saúde Coletiva. 2007;10(2):607.
- Arribas CG. Spiritists from all over Brazil, unite! Meanders of spiritist unification in the first half of the 20th century. *Religião & Sociedade*. 2017;37(3):150–172.
- 18. Kardec A. The Spirits' Book. 1st edn. Rio de Janeiro: Celd; 2008.
- Federação Espírita Brasileira (FEB). Orientação ao Centro Espírita.
   2006

- Baccetto L. New perspectives in the studies of spiritualism and spirituality. Religião & Sociedade. 2019;39(2):222–225.
- Isaia AC. Spiritism: Education and Secular State. Rev Bras Hist Relig. 2017;10(28):63–80.
- Wang J, Mann F, Lloyd-Evans B, et al. Associations between loneliness and perceived social support and outcomes of mental health problems: a systematic review. *BMC Psychiatry*. 2018;18(1):156.
- Castillo EG, Ijadi-Maghsoodi R, Shadravan S, et al. Community interventions to promote mental health and social equity. Curr Psychiatry Rep. 2019;21(5):35.
- Tough H, Siegrist J, Fekete C. Social relationships, mental health and wellbeing in physical disability: a systematic review. BMC Public Health. 2017;17(1):414.
- Courtin E, Knapp M. Social isolation, loneliness and health in old age: a scoping review. Health & Soc Care Community. 2017;25(3):799–812.
- Calati R, Ferrari C, Brittner M, et al. Suicidal thoughts and behaviors and social isolation: A narrative review of the literature. *J Affect Disord*. 2019:245:653–667.
- Evangelista PP, Cardoso CL. Online phenomenological-existential psychological counseling as a possibility for psychological care during the COVID-19 pandemic. *Perspectivas em Psicologia*. 2020;24(2):129– 153.
- Carneiro EM, Moraes GV, Terra GA. Effectiveness of spiritist passe (spiritual healing) on the psychophysiological parameters in hospitalized patients. Adv Mind-Body Med. 2016;30(3):4–10.
- Carneiro EM, Barbosa LP, Marson JM, et al. Effectiveness of Spiritist "passe" (Spiritual healing) for anxiety levels, depression, pain, muscle tension, well-being, and physiological parameters in cardiovascular inpatients: A randomized controlled trial. *Complementary Therapies in Medicine*. 2017;30:73–78.
- Carneiro EM, Borges RMC, de Assis HMN, et al. Effect of Complementary Spiritist Therapy on emotional status, muscle tension, and wellbeing of inpatients with HIV/AIDS: A randomized controlled trial-single-blind. *Journal of Complementary and Integrative Medicine*. 2019;16(2).
- Zacaron KAM, Mendes NS, Silva YCE, et al. Effects of laying on of hands with and without a spiritual context on pain and functionality of older women with knee osteoarthritis: study protocol for a randomized controlled trial. *J Integr Med*. 2018;16(2):106–112.
- Ferraz IS, Climaco LCC, Almeida JS, et al. Expansion of integrative and complementary practices in Brazil and the implementation process in the Unified Health System. *Enfermeria Actual de Costa Rica*. 2019;(38).
- Demir DM. The effect of reiki on pain: A meta-analysis. Complementary Therapies in Clinical Practice. 2018;31:384–387.
- Mangione L, Swengros D, Anderson JG. Mental health wellness and biofield therapies: an integrative review. *Issues in Mental Health Nursing*. 2017;38(11):930–944.
- Hott MCM. Spiritual contributions to the promotion of mental health through meditation: interview with medium Orlando Noronha Carneiro. PLURA. Revista de Estudos de Religião. 2019;10(1):183–195.
- Hott MCM, Reinaldo AM. The consoling potential of psychographed letters on the emotional health of the bereaved. *Physis: Revista de Saúde Coletiva*. 2020;30(2).
- 37. Leão FC, Lotufo Neto FU. Use of spiritual practices in institutions for people with mental disabilities. *Arch Clin Psychiatry (São Paulo)*. 2007;34(Supl -1):54–59.
- Lucchetti ALG, Peres MFP, Vallada HP, et al. Spiritual treatment for depression in brazil: an experience from spiritism. *Explore (NY)*. 2015;11(5):377–386.

- Lucchetti G, Lucchetti ALG, Bassi RM, et al. Complementary spiritist therapy: systematic review of scientific evidence. Evid Based Complement Alternat Med. 2011;2011:835945.
- 40. Lucchetti ALG, Lucchetti G, Leão FC, et al. Mental and physical health and spiritual healing: an evaluation of complementary religious therapies provided by spiritist centers in the city of São Paulo, Brazil. *Cult Med Psychiatry*. 2016;40(3):404–421.
- Anderson JW, Nunnelley PA. Private prayer associations with depression, anxiety and other health conditions: An analytical review of clinical studies. *Postgraduate Medicine*. 2016;128(7):635–641.
- 42. Panzini RG, Mosqueiro BP, Zimpel RR, et al. Quality-of-life and spirituality. *Int Rev Psychiatry*. 2017;29(3):263–282.
- Bradshaw M, Kent BV. Prayer, attachment to God, and changes in psychological well-being in later life. J Aging Health. 2018;30(5):667– 691
- 44. Rainville G. The interrelation of prayer and worship service attendance in moderating the negative impact of life event stressors on mental wellbeing. *J Relig Health*. 2018;57(6):2153–2166.
- Douglas H, Georgiou A, Westbrook J. Social participation as an indicator of successful aging: an overview of concepts and their associations with health. Aust Health Rev. 2017;41(4):455–462.
- Brett L, Georgiou A, Jorgensen M, et al. Ageing well: evaluation of social participation and quality of life tools to enhance community aged care (study protocol). *BMC Geriatr*. 2019;19(1):78.
- 47. Cramm JM, van Dijk HM, Nieboer AP. The importance of neighborhood social cohesion and social capital for the well being of older adults in the community. *The Gerontologist*. 2013;53(1):142–152.
- 48. Cassidy M, Thompson R, El-Nagib R, et al. Motivations and experiences of volunteers and patients in mental health befriending: a thematic analysis. *BMC Psychiatry*. 2019;19(1):116.
- 49. Willems R, Drossaert C, Vuijk P, et al. Impact of crisis line volunteering on mental wellbeing and the associated factors: a systematic review. *Int J Environ Res Public Health*. 2020;17(5):1641.
- Ângelis J de, Franco DP. *Triunfo Pessoal*. 1st edn. Salvador: Alvorada; 2010.
- Sales TM. Magnitude and factors associated with spiritual involvement, common mental disorders, and suicidal ideation: a cross-sectional study in Ceará. Doctoral thesis (Public Health)-School of Medicine, Federal University of Ceará, Fortaleza, 2023, 272 p.
- Captari LE, Hook JN, Hoyt W, et al. Integrating clients' religion and spirituality within psychotherapy: A comprehensive meta

  —analysis. J Clin Psychol. 2018;74(11):1938–1951.
- 53. Campos GWDE S, et al. *Tratado de Saúde Coletiva*. 1st edn. Rio de Janeiro: FIOCRUZ; 2009. Vol. 1.
- 54. Bourdieu P. *O Campo Científico*. In: Ortiz R, editor. Bordieu Sociologia. São Paulo: Ática; 1983. p. 122-155.
- 55. Canguilhem G. *O normal e o patológico*. 6<sup>th</sup> edn. Rio de Janeiro: Forense Universitária; 2009. 154 p.
- 56. Svenaeus F. Diagnosing mental disorders and saving the normal: American Psychiatric Association, 2013. Diagnostic and statistical manual of mental disorders. American Psychiatric Publishing: Washington, DC. 2013. 991 p.
- 57. Santos BS. Critique of indolent reason: against the waste of experience. Desclée de Brouwer; 2003.
- Luz M. Natural, rational, social: medical reason and modern rationality.
   Rio de Janeiro: Fiocruz: Edições Livres; 2019. 184 p.
- 59. Ministério da Saúde. Portaria Nº 702. Brasília. 2018.

- 60. Erbereli LGR. Fluid therapy as health rationality: A study on the knowledge production of the spiritist group «casa da sopa» in the context of care for individuals in homeless situations. Master's Thesis (Public Health) - School of Medicine. Federal University of Ceará, Fortaleza. 2013. 256 p.
- Durkheim E. The elementary forms of religious life. 2<sup>nd</sup> edn. São Paulo: Paulus; 2001.
- 62. Chibeni SS, Moreira-Almeida A. Remarks on the scientific exploration of "anomalous" psychiatric phenomena. *Arch Clin Psychiatry*. 2007;34(1):8–16.
- 63. Delanne G. Spiritism in the face of science. Limeira: Knowledge Publisher; 2009.
- 64. Denis L. *The problem of being, destiny and pain: testimonies, facts and laws.* 26th edn. Rio de Janeiro: FEB;2005.
- 65. Dilmaghani M. Importance of religion or spirituality and mental health in Canada. *J Relig Health*. 2018;57(1):120–135.
- 66. Sales TM, Mota RMS, Macena RHM. Kardec's spiritism, mental health and the production of scientific knowledge. Seven Editora; 2023.