A PHENOMENOLOGICAL STUDY OF THE ATTITUDE OF CHURCH-ATTENDING CARIBBEAN-CANADIAN CHRISTIANS TOWARD COUNSELING

by

Melbourne Webster Turgott

Liberty University

A Dissertation Presented in Partial Fulfillment

of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences
Liberty University
2021
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ABSTRACT

The purpose of this phenomenological study was to understand and describe the attitude of church-attending Caribbean-Canadian Christians toward counseling. The two central research questions were, What is the lived experience of Caribbean-Canadian church-attending Christians with counseling? What meaning do Caribbean-Canadian church-attending Christians ascribe to their experience with counseling? The theories guiding this study included expectancy-value and social learning theories. Expectancy-value theory amplifies the belief Caribbean-Canadian Christians have a favorable attitude toward counseling if it aligns with their Christian beliefs. Social learning theory supports the idea that Caribbean-Canadian Christians are shaped by their communal and individual experiencing the world. Data were collected by semi-structured interviews via Microsoft Teams to conform to COVID-19 health restrictions. After the data was collected, it was analyzed using a hermeneutical phenomenological approach, and the results were summarized into themes. The three themes that emerged from this study were Caribbean-Canadian church-attending Christians hold their Christian beliefs as very important and use them to value the worth of an activity. Church-attending Caribbean-Canadian Christians value belonging to a community espousing their Christian beliefs and whose members shared cultural background. Caribbean-Canadian church-attending Christians expressed a positive attitude toward counseling when it conformed to their Christian beliefs and delivered within the context of the meaning of community to them. The research participants also recognized the existence of negative attitudes toward counseling in the wider Caribbean community.

Keywords: Counseling, Caribbean-Canadian, Christian, Attitude
Dedication

This dissertation is dedicated to my wife Pauline who ceaselessly showered me with her love, kindness, and support throughout the entire process.
Acknowledgments

I am eternally grateful to all those who provided support to me throughout my doctoral journey. I would like to thank Pauline Nichols for helping with sourcing material for the literature review. Thanks to the staff at the Jerry Falwell Library for their help and guidance in finding articles for the literature review. A hearty thanks to Dr. Bird for his guidance and for bringing a wealth of knowledge to his supervision. Thank you Dr. Mwendwa for giving me valuable feedback during this process.
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CHAPTER ONE: INTRODUCTION

When an individual holds to a belief or a set of values, those beliefs and values inform how they relate to the world and become the guiding principles by which they respond to life and the world (Eccles & Wigfield, 2002). A Christian worldview is very important to many individuals, and this is the guiding principle by which they relate to life (Jones & Butman, 2011; Tan, 2011). One’s worldview, however, is determined by the cultural and social milieu within which the individual is socialized (Sue et al., 2014). I explored the topic of this research project within the context of the attitudes of church-attending Caribbean-Canadian Christians toward counseling.

Within their social and cultural context, everyone experiences the world from a subjective viewpoint (Creswell & Poth, 2018) This is not to suggest individuals have their origin in a vacuum-sealed off from their social context or culture. The importance rests in understanding the individual’s origin may be rooted in a communal context, however, they make sense of the world through a personal process. Therefore, mediating their world view as well as their value system contributes to what they come to understand, believe, and incorporate into their life (Bandura, 1977; Eccles et al., 1983; Jackson & Naidoo, 2012).

Christians, like many individuals, interact with the world in a social milieu honed and shaped by their individual experiences, as well as the circles of their influence (Bandura, 1977; Creswell & Poth, 2018). In this context, the individual is neither a monolithic expression of their social group or a dichotomized self, which exists in dissimilar realities, namely the intrapsychic and environmental (Bandura, 1977). Instead, they are a sum of a self-packaged by the individual as well as the experiences of their social context. The individual, therefore, while possessing
unique perspectives generated by their inner processes is also a product of their environment (Bandura, 1977; Creswell & Poth, 2018).

Many church-attending Christians, view and interact with the world from a spiritual standpoint shaped subjectively, as well as by the participation in their community. (Taggart et al., 2018). Church-attending Caribbean-Canadian Christians are a unique group of people shaped by their individual, cultural, and religious heritage (Edmonds & Gonzalez, 2010; Glazier, 2012). Their attitude toward counseling may be understood from their historical, religious, and cultural context while paying attention to how the individual develops not only by their social context but by their intrapsychic processes (Bandura, 1977; Edmonds & Gonzalez, 2010; Glazier, 2012). Many Caribbean-Canadian Christians who attend church have their roots in the Caribbean. This social context and the experiences from this context carry over into Canada and become the lens through which they interact with their new home (Hope et al., 2020). At the same time, their new home, Canada, presents them with adjustment tasks they must negotiate in a new context (Hickling & Paisley, 2012; Kirmayer et al., 2011).

In conducting the study, I outline and explore this important population within the Canadian context focusing intently on their attitudes toward counseling. This chapter, therefore, contains the background to the phenomenological exploration of the attitude of church-attending Caribbean-Canadian Christians toward counseling, the problem statement, purpose statement, significance of the study, research questions, definitions of key terms, and last, a summary statement.
Background

A survey of the immigration numbers for immigrants from the Caribbean to Canada reveal the importance of this research topic. Therefore, I grounded this study in the background and the relevance of the chosen topic. I will proceed in this section by presenting the historical context of this study after which, I will provide a brief overview of related literature on the subject within the last ten years.

Relevance

The steady increase in immigrants from the Caribbean to Canada added to and continues to expand Canada’s growing culturally diverse population (Labelle et al., 2019). With this increase in cultural diversity comes the need to offer a wide range of commensurately relevant counseling services. Hickling et al. (2013), Kouider et al. (2015), and Seeman (2011) established that many individuals who emigrate to Canada do so with psychosocial needs. The mediation of these psychosocial needs emerges as consequential to adjustment and adaptation to their host country. These psychosocial needs as well as exposure to trauma in their country of origin can also lead to comorbid factors associated with the transitionary process.

Consequent to psychosocial needs, when immigrants arrive in Canada, they do not cease to carry on the functions of individual and family development. The family must be understood, therefore, as going through constant flux predicated by a changing world, which demands new skills and responses to various developmental tasks necessary for healthy and balanced functioning (Carter & McGoldrick, 2017). The individual and family exist in different contexts such as historical, spiritual, and cultural. Carter and McGoldrick (2017) amplified the changing nature of the family, coalescing their deliberations around the idea, “individuals and families
transform, and need to transform their relationships as they evolve, to adapt to changing circumstances over the life course.” (p. 7, E Version).

While many families and individuals recognize the need to relate to changing circumstances, the attempt at altering or relating to external events mediates a process based on maintaining homeostasis or predictable patterns of relating to the world. One way in which this kind of transaction evolves occurs through the juxtaposing of a system of beliefs and functions governing their lives alongside everyday transactions (Balswick, 2014). Yarhouse and Sells (2017) and Carter and McGoldrick (2017) noted how religion and spirituality play a significant role in helping families negotiate pain, loss, change, and many other existential experiences. The literature on Caribbean religious heritage, for example, Hope et al. (2020), Jackson and Naidoo (2012), and Reddie (2018) documented the importance of Christian practices to immigrants from the Caribbean. It becomes necessary, therefore, to understand how, with the developmental changes coming from emigrating, this population addresses their psycho-social needs.

Another important factor to consider concerns understanding how many Caribbean-Canadian Christians practice their Christianity within a blend of beliefs and values they interpret in a unique context as it relates to health and healing (Edge, 2013; King-Okoye et al. 2019; Moorley et al. 2015). Because Caribbeans express spirituality in ways that give rise to a plurality in the practice of faith, it is important to understand the various themes and cultural practices accompanying various approaches to spirituality before considering any counseling relationship as efficacious (Glazier, 2012; Kirmayer et al., 2007; Robinson et al., 2012).

**Historical Context**

As of January 1, 2019, Canada’s population stood at 37,314,442. This is an increase of 528,421 individuals from the year 2018. New immigrants to Canada accounted for 61% of this.
growth. These immigration numbers represent a statistic far exceeding the natural growth (births minus deaths) of the population in Canada during the year 2018, with natural births reported at 103,176. Another important finding of this report was the major driver of population growth in Canada resulted from international migration (Statistics Canada, 2019). The statistics between 2011 and 2016, the latest information available from STATCAN, documented 44,160 immigrants entered Canada from the Caribbean and Bermuda (Statistics Canada, 2019). While Canada conducts a population census every five years, statistics on religious affiliation are only gathered every other census or every ten years. The latest information on religious affiliation available is from 2011. In this census, 3,669,430 immigrants reported identifying as Christian. Of this number, 265,035 reported being from the Caribbean (Labelle et al. 2019). The trend of commitment of Caribbean-Canadians to their religious belief’s dates back to the previous census completed in 2001. In the 2001 census, 41% of Caribbean-Canadians identified as Christian while another 29% reported affiliating with the Catholic church. Yet another 9% reported they followed another religious group. When compared to Canadians of non-immigrant status, Caribbean-Canadians reported a greater association with a Christian faith (Statistics Canada, 2007). As Labelle et al. (2019) observed, religion plays a pivotal role in the lives of Caribbean-Canadians, which stands in contrast to the religious devotion expressed by second-generation Caribbean-Canadians. Immigrants born in the Caribbean espoused religious values they carried with them when relocating to Canada.

**Brief Overview of the Literature**

Discussions in the literature fall under five main headings: a) adjustment needs of immigrants might precipitate the need for counseling, b) historical context of Caribbean spirituality and practice of religion, c) attitude of Caribbean descendants toward counseling, d)
lay beliefs about health and well-being and mental health and, e) suggested approaches to counseling with Caribbean-Canadians

**Adjustment Needs of Immigrants**

Immigration presents both preimmigration and post immigration tasks that require attention if immigrants are to experience a healthy adjustment to their new home and culture. For example, Hickling and Paisley, (2012) and Kirmayer et al. (2011) pointed to the experience of immigrants who enter Canada with psychological needs that originated from adverse experiences in their home country. The researchers also highlighted the possibility of the exacerbation of psychological symptoms due to the demands of the immigration process as well as the adjustment tasks accompanying the process of acculturation. Kirmayer et al. (2011) explained preimmigration tasks as a set of social, economic, and developmental factors precipitating emigration, which also potentially worsen as they try to navigate and adjust to a new set of cultural, social, and economic circumstances in the host country.

**Historical Context of Spirituality and Religion**

Historically, people from the Caribbean community embed the experience of spirituality based on their cultural experience (Catron, 2010; Edmonds & Gonzalez, 2010; Glazier 2012; Satchell, 2004). Previous researchers revealed the social context, nurtured in the secular world, included the religious history of the Caribbean community as well (Reddie, 2018). For example, a qualitative study by Agyekum and Newbold (2016) aimed to establish an understanding of how minority immigrants to Canada adjust to the new culture by attempting to fit in and to develop a sense of belonging in the city of Hamilton. The participants expressed their experience in the context of their faith orientation. Among the factors influencing these immigrants’ sense of place, they identified religion as not only providing a sense of home but also as an outlet for
socialization. Religion also served as the medium through which they mediated many aspects of life and as such influenced choices in social services needs as well as housing and employment. Many immigrants used their religious identity to assist with adjusting to their host country. Furthermore, researchers found religion used as the vehicle driving the satisfaction of, and mediating the need for, a sense of family in which they experienced socialization, caring, and fulfilled other needs (Agyekum & Newbold, 2016). They emphasized how human relationships were the means through which they achieved wellness. The salubrious experiences facilitated by belonging to a religious group held significant therapeutic value. Belonging to a religious community addressed three important areas, which included emotional, cognitive, and physical (Agyekum & Newbold, 2016).

**Attitude Toward Counseling**

Research on this aspect of Caribbean immigrants yielded a mixture of both positive and negative attitudes toward counseling. In one study, for example, Jackson-Williams (2013) did not find Jamaican study subjects expressed a more negative attitude toward counseling when compared to their African American counterparts. It is worth noting that even though the researcher compared participants from different cultural orientations, similarities existed among the research groups, notwithstanding the dissimilarities. Contrastingly, Greenidge and Daire (2010) conducted a study using college students from the English-speaking Caribbean, revealing a link between those less emotionally open and participants conveying a negative attitude toward seeking professional help for psychological needs.

**Lay Beliefs About Health and Well-being**

Many lay beliefs exist among Caribbean residents regarding health and wellness. These run the gamut from beliefs in witchcraft as the origin of emotional disturbances (Moorley et al.,
to reliance on cures centered around faith and trust in God to manifest His powers of
healing (King-Okoye et al., 2019). Relying on other sources of healing can therefore become
counterintuitive to one’s faith in divine intervention (Edge, 2013). Dixon (2019) explained the
symbiotic relationships between culture, spiritual practices, along with health and wellbeing
among people of the Caribbean. This connection, Dixon (2019) noted, differed from the organic
conceptualization of health in the Canadian health system. Building on this concept of the
symbiotic relationship between health and wellbeing, Ali et al. (2011) found Caribbean
spirituality exhibited between the mainstream and other forms of spiritual practices, influence the
lives of Caribbean residents in meaningful ways. Mantovani et al. (2016) also noted how
spirituality played a major role in defining and conceptualizing mental health.

**Suggested Approaches to Counseling**

Abrons et al. (2019) and Forbes and Hutchinson (2020) found approaches to relating to
people from the Caribbean rooted in an understanding of both the cultural and spiritual dynamics
the people present. The researchers encouraged contextualizing approaches to demonstrate an
understanding of the heritage shaping the people and their views of the world receive careful
attention. Sutherland (2011) suggested effective psychotherapy intervention with people from the
Caribbean take into consideration the historical context of the people and tailor therapeutic
interventions based on the acquired information. Sutherland (2011) also advocated for an
approach grounded in the awareness that Western approaches to psychology often fail to meet
the cultural plurality this group adds to the Western world.

**Problem Statement**

With the increasing number of immigrants from the Caribbean to Canada, comes an
increasing number of people needing to adjust to a new culturally, religiously, and physically
different country. Although they may derive a benefit from counseling services, a need for more knowledge about this population’s attitudes and opinions regarding therapy is germane to effectively reaching them with appropriate counseling services.

**Purpose Statement**

The purpose of this phenomenological study was to describe the attitude of church-attending Caribbean-Canadian Christians toward counseling.

**Significance of the Study**

The attitude of Caribbean-Canadian Christians toward counseling is a determining factor in the decision to seek help when needed. Therefore, it is important to study this phenomenon. Effective service to this subsector of immigrants requires an understanding of the attitude of church-attending Caribbean-Canadian Christians toward counseling as a precursor to adjustment to life in Canada as well as for their health and well-being. Many Caribbean Christians who attend church hold views of religion and spirituality they interpret in a unique context concerning health and healing. Pursuant to this, the context rooted in historical, cultural themes, and practices requires delineation and understanding before an efficacious counseling relationship can develop. The statistical report from STATSCAN adds impetus to the need to be able to reach the Caribbean-Canadian population with appropriate social services. In conducting the study, I highlight the increasing number of immigrants from the Caribbean to Canada as well as the unique place religion and spirituality play in their interaction with the world.

**Research Questions**

Three important questions formulated the basis of the exploration of the research topic. I used a qualitative designed phenomenological approach to explore the following questions:
RQ1. What is the lived experience of Caribbean-Canadian Christians who have experienced counseling?

RQ2. What meanings and beliefs do Caribbean-Canadian Christians ascribe to counseling?

RQ3. How do Caribbean-Canadian Christians describe the relevance of counseling to them when faced with needs that might necessitate them seeking help?

Definition of Key Terms

Important terms and concepts salient to an understanding of the context and contours of this study included counseling, Caribbean and Caribbean-Canadian, Christian, and Attitude.

**Attitude** is a person’s mental stance toward a thing reflected in their action or reactions. Attitude incorporates a person’s beliefs and conclusions about the thing under consideration especially as it relates to its value and worthiness (Dictionary.com, 2020; Tan, 2011).

**Counseling** is the broad term, which refers to any professional helping relationship in which the goal is to assist clients in improving their articulation and understanding of their experiences, relieve psychological symptoms, developing safety and functioning in an individual or relational system, addressing relational challenges, acquiring resources, and enhancing their functioning (Jones & Butman, 2011). Most counseling subscribes to certain therapeutic principles rooted in specific modalities or approaches (Tan, 2011). Some other terms associated with a definitive delineation of counseling for this study included psychotherapy, therapy, mental health therapy, family therapy (placing emphasis on relational systems and how the system functions as a whole), and counseling intervention.

**Caribbean** - Defining the Caribbean presents a challenging and complex exercise not only because of the non-contiguous nature of the region but also because of the many cultural,
contextual, and lexical explanations people often attributed to the region. Nevertheless, geographically, the Caribbean is a group of islands that extend from north of South America to south of Florida (Abrons, 2019). For this study, however, I defined the Caribbean as those countries comprising the Caribbean Community (CARICOM). In 1972, a group established the region by treaty to create inclusivity and cooperation among member states for growth, development, and understanding. The following countries compose CARICOM, Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Haiti, Jamaica, Monserrat, St. Lucia, St. Kitts and Nevis, St. Vincent and the Grenadines, Surinam, and Trinidad and Tobago (www.caricom.org).

**Caribbean-Canadian** refers to anyone born in the Caribbean and emigrated to Canada at the age of 18 years or older.

**Christian** applies to anyone who professes belief in Christ and is a member of a congregation whose practices stem from the Judeo-Christian tradition (Freedman, 2000). The Christian values rest in congregants who attend services regularly, meaning at least 2-4 times per month based on a weekly schedule of worship. On an important note, I conducted the study during the COVID 19 crisis, which interrupted regular or in-person church attendance. Thus, participants had a history of regular attendance even though they could not attend regularly due to lockdown restrictions.

**Caribbean-Canadian Christian** is any individual born in the Caribbean where they practiced their Christian faith, brought the practice to Canada, and continued to attend church.

**Summary**

The growing Caribbean-Canadian Christian population is an important group requiring research directed towards developing a better understanding of their subjective experience with counseling. While many church-attending Caribbean-Canadian Christians nurture a worldview
based on historical, cultural, and religious factors, emigrating to Canada introduces fresh
challenges of adjustments, developments, and functions, which left unaddressed can disrupt the
normal course of a person’s life. A review of the literature on the adjustment tasks of immigrants
to Canada revealed how both pre- and post-migration experiences affected how the individual
functions and adjusted to life in their new country and culture. Coupled with this, beliefs and
practices about mental illness and its cure as well as attitudes toward counseling among this
population necessitate delineation to assist in creating a platform capable of supporting and
building upon an understanding regarding Caribbean-Canadian's experiences.

Although some of the population may find counseling beneficial, a lack of knowledge
concerning their stance toward working with helping professionals, which rendered the need for
further investigation. The significance of this study rests in the need for social service providers
who meet the needs of this population. However, accomplishing this goal depends on improving
and documenting an advanced understanding of their attitudes toward counseling. The
significance of this study must also be considered against the backdrop of the statistics which
reveal the increasing immigration numbers of the population to Canada. I posed three important
research questions I determined as foundational to the exploration of the attitude of church-
attending Caribbean-Canadian Christians toward counseling. Answers to these questions can
bring a clear understanding of the research topic.
CHAPTER TWO: LITERATURE REVIEW

There are two important sections to this chapter. The first section outlines two theories I found relevant to conceptualizing the research topic in a theoretical framework and lend validity to an understanding of how people view and interact with their world. Two theoretical frameworks that capture the subjective nature of experience and reflect the experiences of Caribbean-Canadian Christians in relation to the research topic were expectancy-value theory (Eccles et al., 1987) and social learning theory (Bandura, 1977). In the second section of this chapter, a literature review, I frame the research topic and provide a foundation for an in-depth description of the lived experiences of the research participants. Using pertinent literature, I also situate the research participants in meaningful contexts and attempt to provide a broad historical, cultural, and social understanding of their relationship to their world relative to the research topic.

Theoretical Frameworks

Consistent with the phenomenological approach to this dissertation, people view and experience the world from a subjective standpoint (Creswell & Poth, 2018). I explored the attitudes of church-attending Caribbean-Canadian Christians toward counseling through a theoretical lens representing a conglomeration of expectancy-value theory (Eccles et al., 1987) and Bandura’s (1977) social learning theory. I chose the two theories as they amplify the social constructivist context of this research project as well as highlight the subjective value of the proposed participants rather than an orientation proffering the universality of experiences relative to a phenomenon (Creswell & Poth, 2018). These two theories interact with the idea that environment, as well as the intrapsychic processes of the individual, are foundational to the belief and behaviors that result from the interactions between experience and sensory encounters.
with the world (Bandura, 1977; Eccles et al., 1987). Creswell and Poth (2018) supported using social learning theories as validation of this worldview, which embraces the idea that each person experiences the world from a subjective and expectancy-value vantage point.

**Expectancy-Value Theory**

I amplified the focus and relevance of this research study through a modern version of the expectancy-value theory (EVT) as espoused by Eccles et al. (1987). The tenets of this theory proffer an explanation that church-attending Caribbean-Canadian Christians participate in faith expressions because they embrace them as being consistent with their values and experience. Their motivation to engage in counseling hinges on how much counseling (as an experience and a process) lines up with their Christian values and worldview. It is important to situate this theory in context by exploring its early beginnings, general tenets, and social context of motivation.

**Early Beginnings**

The expectancy-value theory of achievement motivation traces back to the work of Fishbein (1936-2009), a social psychologist who dedicated a great amount of research to understanding and writing about the association between attitude and behavior (Ajzen, 2010). Central to Fishbein’s emphasis was the conception that beliefs inform attitude (Ajzen, 2010). Atkinson then continued working in this field in the fifties and sixties. Atkinson attempted to answer the question about what drives motivation in human beings in relation to a given task (Schreiber, 2016). Atkinson posited a new way of understanding behavior, which was rooted in the idea that participation in an event determines the level of motivation to succeed, the expectation participation leads to success, and the perceived value of success to the individual (Smith, 1992). In the 1980s, Eccles applied the principles of the theory to understanding
motivation in students in academics (Wigfield & Eccles, 2000). The researchers' work began to expand with the effort of a colleague Wigfield (Wigfield & Eccles, 2000). By this time, the theory emerged from a general description of the expectancy-value model to the expectancy-value theory of achievement motivation (Wigfield & Eccles, 2000).

**General Tenets**

Though devoted primarily to understanding how children attain educational achievements, different authors such as Gorges (2016) and Guo and colleagues (2015) applied it to comprehend the motivation of adults in the context of the decisions they make and how they commensurate with their beliefs and values. Summarizing the theory poses the rather trite question, ‘What is in it for me?’ Though not simplistic in the formulation of its tenets and principles, ‘What’s in it for me’ is a simplistic question that encapsulates a deeper understanding of the accelerants of motivation. To begin with, Eccles and colleagues (1977) Expectancy-value Model (EVT) focuses on the interconnection between beliefs, values, and goals, along with how these influence action. Beliefs are guiding principles by which values are formed, and goals established that materialize into action. EVT presents the idea human beings do not act sporadically or make decisions about salient issues independent of their beliefs and values (Eccles & Wigfield, 2002). Choice forms the basis for the elimination of other possible options relevant to a particular issue when they exist. In this case, expectancies and values come together to form a partnership that determines the direction of one’s action relative to a particular task (Eccles & Wigfield, 2002).
The Role of Social Context

One’s cultural context or milieu is the cradle in which beliefs, expectations, attitudes, and behaviors form relative to an understanding of a given task (Eccles & Wigfield, 2002). Out of these expectations, attitudes, and behaviors, the individual develops schemata, which contextualizes their personal and social identity. The need to act and make decisions within the context of these schemata drives the individual (Eccles & Wigfield, 2002). Nurturing the ideal self results from the schemata. This framework produces an expectancy of achieving success at any given task. Making choices mirrors an individual’s schemata (Eccles & Wigfield, 2002).

Participation in a task translates into a kind of measure, which seeks to confirm aspects of one’s schemata. Participation can also be an indicator of intrinsic values especially expressing these values as a product of the interest in each task (Eccles & Wigfield, 2000; Eccles & Wigfield, 2002). The belief that the outcome will bring personal enjoyment to the participant, predicates participating in a task. A task can also have utility value to the participants. If the task is a means to the desired end, determines its utility value. A pertinent question vis-a-vis the participation or nonparticipation in task questions, ‘Does this task meet my future goals and plans?’ Internalized goals often drive the individual’s participation in a particular task or activity (Eccles & Wigfield, 2000; Eccles & Wigfield, 2002). The theorists proffered the exercise of choice relative to a task and the subsequent commitment to follow through, directly links with the beliefs and values appropriate to the task. Consequently, the individual who values a task feels intrinsically motivated to participate in it.

Social Learning Theory

Social learning theory is the work of Bandura (1977), which I summarized in a brief history, presenting the conceptual framework, tenets, and concepts. A relevant theory to the
proposed topic of this research study illuminates the role the social context of church-attending Caribbean-Canadian Christians plays in shaping their understanding of and interaction with the world.

**Brief History**

Bandura, a social psychologist who was born in Alberta, Canada in 1925. His academic career began at the University of British Columbia where he graduated in 1949 with a degree in psychology. He then went on to the University of Iowa where he continued studying in the field of clinical psychology until 1952 (Allan, 2017). After a brief time working with families with children dealing with mental challenges, Bandura went on to Stanford University in 1953 where he worked and conducted his research. Bandura’s landmark work was the study of the development and maintenance of aggression in children, the results of which expanded into the development of his social learning theory (SLT) (Allan, 2017).

**Conceptual Framework**

The early notion of behavior lied in the belief inferring motivation results from understanding commensurate motives implicit in behavior. This early understanding of human behaviour sets forth an explanation that behaviours are a result of unconscious processes that can only be understood from the expressed behaviour (Bandura, 1977). In parallel expressions, early understanding of human behavior encapsulates motivation as an accelerant of behavior. The accelerant properties of motivation, however, are only discernible by the expression of the behavior. There is a deficit with this theoretical discourse because rather than being a definitive indicator of behavior, infers motivation from behavior such that it only becomes a guess (Bandura, 1977).
On the other hand, SLT explains human behavior as a conscious process in which cognition, behavior, and environment merge into the presentation of a self in a complete and unique whole (Bandura, 1977). Social learning theory sees human behavior as a conglomeration of symbiotic outcomes arising out of the interaction of cognition, behavior, and their resident environment. Self-determination brings these three aspects of human experience together in wilful participation of both the content and boundaries of life. As Bandura (1977) posited, Social Learning Theory attempts to define behaviour through a series of symbiotic interactions which coop the cognitive, behavioral, and environmental context of the individual in the output of actions that are influenced by the determination of the individual. Such interplay of these three factors lays the foundation in understanding why the individual reacts to their world the way they do. Pursuant to this, people possess innate drives that influence behaviour not just as a product of external influence but also as a product of their intrapsychic process in which experiences are subjectively interpreted in the context of guiding principles for decision-making (Bandura, 1977).

**Tenets and Concepts**

Behaviour is not purely the outcome of external stimuli. While a person’s surroundings provide a context to behavior, the response to environmental factors also depends on the individual’s cognition, anticipation, and intentional drives. Though external factors play a role in influencing behavior, and though these external factors are constantly changing, behavior can over time develop a level of stability that remains even when environmental factors change. (Bandura, 1977). As Bandura (1977) went on to note, “Early behaviorists focused on causation while social learning theory rejects necessary linearity for a more complex interplay between significant factors both external and internal” (p. 9). There is therefore an inseparable union of
experience and psychological influences which come together to predicate behavior. Again, Bandura (1977) proffered that “complex behaviors do not emerge as unitary patterns but are formed through the integration of many constituent activities of differing origins.” (p. 17).

Bandura (1977) went on to explain that an activity can be conceived as a complexly occurring cognitive, anticipatory, intentional, and self-evaluated event in a milieu of occurring social experiences. Consequently, learning is the product of the consequences of the response to an experience. As Bandura (1977) noted, consequences serve an informative, motivational, as well as a reinforcing function.

**Informative Function.** The informative function of consequences begins with a learning stimulus followed by a responsive interaction with the stimulus, which results in a conscious cognitive appraisal of the response outcome. A sorting of responses to match appropriate settings then occurs. Next, the sorted responses become reference points for future behaviors. This culminates with the coalescing of cognitions around desirable consequences or the discrediting of undesirable consequences (Bandura, 1977).

**Motivational Function.** Consequences also serve a motivational function as the prospective outcome or consequences of behavioral response is the motivational drive creating expectations, “that certain actions will bring valued benefits, that others will have no appreciable effects” (Bandura, 1977, p. 18). The motivation to engage in a behavior hinge on the anticipation of the behavior leading to a future desired outcome. The desirability of the outcome becomes the fulcrum for the organization and pursuit of actions. (Bandura, 1977). Bandura (1977) also posited how an event assessed to be of adverse outcome is a propellant for engaging in behavior having a desirable outcome. Therefore, it is not the event that is desirable but the outcome from relating to it appropriately. As Bandura (1977) noted, “the capacity to bring remote
consequences to bear on current behavior by anticipatory thought encourages foresightful behavior.” (p. 18).

**Reinforcing Function.** Consequences serve a reinforcing function increasing a person’s participation in behavior when it comports with the value of the outcome to them. The reinforcing function of consequences is not an autonomous mechanism of unconsciously initiated human function but a participative process cognitively mediated. Reinforcers are in this context extrapolated as motivators to engage in rewarding behaviors. Rewards, therefore, help to regulate rather than reinforce behavior (Bandura, 1977). Badura (1977) also theorized the reinforcement effect of behaviors already in the repertoire of the individual, lies in regulating such behaviors rather than creating the behaviors themselves.

**Summary**

Expectancy Value Theory emphasized the assessment of the worth of a task based on its alignment with the values of the participant. Social Learning theorist articulated an understanding that a combination of environmental and personal experiences in the world influences behavior. These two theories align with the experience of Caribbean-Canadian Christians as a group of people who value their spiritual and religious heritage. They also interact with the world based on this history. These theorists also articulated the unique social context, which helped to shape the people of the Caribbean communally as well as individually.

**Literature Review**

This section contains a conceptualization of the research topic in the social, cultural, and historical context of the research population. The attitude of the participants toward counselling are explored within the context of their adjustment needs, the historical context of Caribbean religious and spiritual heritage, lay beliefs about health and well being, attitudes toward
counseling, and suggested approaches to counselling and finally, gaps in the existing literature that give relevance to this proposed study.

**Adjustment Needs of Immigrants to Canada**

As I noted in chapter one of this study, immigrants from the Caribbean represent a growing demographic in Canada (Statistics Canada, 2017). Immigration from one culture to another, however, brings with it many tasks and challenges requiring negotiation before the individual acculturates to their new life (Baidoobonso et al., 2012). When an immigrant enters Canada, they usually go through a period of adjustment before they fully assimilate. Beyond this task, however, these immigrants also go through various disruptions in their usual course of life before entering Canada, which some consider as precipitating events with adverse psychological outcomes (Levers, 2012). The consequences of these outcomes carry over to the acculturation process such that adjustment tasks can be viewed from the standpoint of both pre- and post-migration outcomes. Adjusting to life in Canada brings pre-migration and post-migration tasks, negotiating cultural and identity tasks, dealing with racial discrimination, and adjusting to socio-economic changes.

**Pre and Post Migration Tasks**

Jurcic et al. (2019), Swinkles et al. (2011), and Kirmayer et al. (2011) asserted that the acculturation and adjustment of immigrants to living in Canada is a process of premigration as well as post-migration outcomes. In some cases, the decision to emigrate to Canada results from the desire to escape instability related to war in one’s country of origin. Exposure to war includes experiencing deleterious psychological outcomes, such as trauma (Levers, 2012). Post-migration processes in these immigrants involve exposure to trauma and other harmful psychological consequences, especially in a war-torn country. While many of these immigrants would go on to
experience post-traumatic growth, some will enter their host country with varying mental health needs associated with the traumatization (Briere & Scott, 2015). Once in their new country, they add a new layer of adjustments needs, pertinent to those with outstanding traumatic issues, as well as those who experienced post-traumatic growth. These adjustment needs, or tasks, include exacerbation of pre-existing symptoms as well as the occurrence of mental health responses associated with adjusting to a new cultural context (Jurcic et al., 2019).

The process of immigration also brings with it two important factors germane to assessing the mental health needs and conditions of immigrants to Canada. First, immigrants may enter Canada with certain psychological experiences and other needs. Second, the outcome of their psychological experiences can exacerbate during the experience of emigrating as well as attempting to meet the demands of the adjustment tasks to a new country. Both these factors are important in assessing the need for counseling, as well as the attitude the immigrants might have toward seeking out counseling services (Hickling & Paisley, 2012; Kirmayer et al., 2011). As these researchers articulated, there are certain important tasks confronting immigrants from the Caribbean to North America. “In some cases, migrants may have difficulties in adapting to changes in language, values, customs, climate, food, availability of social support, and other factors.” (p. 225). Arising from this, Hickling and Paisley (2012) go on to assert how the process of migration can add to increasing psychological issues for many immigrants, which warrants attention. Hickling and Paisley (2012) saw this as revealing a deficit in the availability of competent mental health practitioners who offer culturally appropriate interventions. With the Caribbean registering one of the highest per-capita rates of migration to North America, it follows that the rate of mental illness in the Caribbean will also mirror the migrant population
from the region. Hickling et al. (2013) underscored the importance of attending to this population to enhance the understanding of the outcomes of migration.

Pursuant to the above, Kirmayer et al. (2011) identified tasks associated with social transition including changes in relationships and building of new social connections in the host country. Emigrating most often leads to changes in socio-economic status for immigrants. These changes usually bring with them negative outcomes, which test the individual’s ability to care for their well-being. Movement from one cultural setting to another also requires adjusting. Kirmayer and companions (2011) went on to identify adverse outcomes associated with these three tasks when challenged with the process of migration. Chief among these outcomes are mental states, which may run the gamut from stress to more debilitating psychological outcomes such as depression, which decreases their will to advance their lives to a more adjusted phase. These outcomes Kirmayer et al. (2012) referred to as, “enduring obstacles to advancement in their new home because of structural barriers and inequalities aggravated by exclusionary policies, racism, and discrimination.” (p. E961).

Further developing the descriptions of the effect of pre- and post-migration tasks on the mental health of immigrants, Kirmayer et al. (2011) stated that premigration status for adults can establish patterns of economic, social, and developmental subsistence, as well as their opposing disruptions in these areas of functioning. During migration, immigrants may experience disruptions and, or exacerbation of their premigration status in addition to adverse experiences. Postmigration can mark a prolongation of adverse social, economic, and developmental experiences. It can also present immigrants with new tasks associated with acculturation (Kirmayer et al., 2011). For children, premigration might find them functioning at their appropriate levels of development or experiencing disruptions in their maturation, family, and
social networks. Migration might deepen their uncertainties about the future and further hamper their normal course of growth. Their postmigration status might elevate stress carried over from their premigration and migration experiences. They might also present difficulties associated with acculturation (Kirmayer et al., 2011; Montazer & Wheaton, 2017).

Jurcic et al. (2019) explained how ethnic density, the availability of and association with individuals who share in one’s ethnic culture, potentially moderates challenges with adjustment, thereby protecting against distress associated with moving into a new culture. This factor, however, did not help with negotiating posttraumatic stress or adding to life satisfaction. Furthermore, Jurcic et al. (2019) reported how protection against distress was only evident with immigrants in mainstream French acculturation and not in English Canadian acculturation.

**Negotiating Culture and Identity**

Emigrating is a time of confrontation of a new culture, which calls for the reconciling of competing orientations. This encounter brings with it its own set of challenges requiring reconstruction of cultural adaptation and worldviews. This is a process that can continue for 5 to 6 years (Dixon, 2019). The process of acculturation also involves definitive changes of previous ways of life to a new way of living. George and colleagues (2015) completed a wide-ranging review of two decades worth of research on the relationship between mental health and the immigration process and reported the relatively mundane aspects of changes in food or the practical needs of accessing social services and obtaining employment influenced the acculturation process. This relevant point of the discussion applies to changes in food, challenges in accessing social services, employment challenges, etc. (George et al., 2015). The researchers based this on a review of two decades of research on the relationship between mental health and immigration processes. Hickling et al. (2013) demonstrated the saliency of cultural adjustment
needs for immigrants in a study delineating psychiatric pathology in the Caribbean, which suggested schizophrenia in immigrants from the Caribbean to the United Kingdom (U.K.) presented at higher rates than natives of the U.K. In one of the identified studies, Hickling et al. (2013) discovered the presence of schizophrenia in returning residents to Jamaica was higher than those of the locals. Arising out of this study was the understanding of an environmental link associated with the diagnosis of schizophrenia rather than a genetic predisposition as posited in earlier research done in the U.K. Germaine to this development was the renewed attention given to how changes in the social status of immigrants into a new culture can influence their psychological well-being. As Hickling et al. (2013) noted, “this review of research indicates that there are important stresses and challenges in the home environments of Caribbean people as well as in the host environments for those who migrate to developed countries.” (p. 870).

Salehi (2010) assessed the health needs of immigrant youth between the ages of 13 and 24 in Canada. The researcher completed a study through the analysis of existing literature from peer-reviewed sources such as PubMed, PsychINFO, and other related publications. Salehi (2010) found many points of intersection between the culture of the immigrant and that of the dominant culture, as well as other cultures present in the host country. The meeting of different cultures, Salehi (2010) noted, presented the need to negotiate new realities of life along with negotiating an understanding of self within the framework of the new culture. The task at hand was to reconcile one’s learned way of life with that of the new culture and come to a level place of functionality. Similarly, Archibald (2011) undertook a qualitative study to determine what it meant for the participants to be Afro-Caribbean in the context of health and wellness and how they received culturally sensitive healthcare. A limitation of the study was the involvement of only four participants between the ages of 35 and 45. Archibald (2011) found three important
themes pertinent to a more nuanced understanding of the population for study in this dissertation. Participants described an approach to adjusting to life in America as a process of the articulate marrying of two cultures, that of the Americas and the Caribbean. To the participants, a push and pull between cultures perpetuated itself as a constant flux of experiences (Archibald, 2011). Another theme emerging from Archibald (2011) was the description of the participants as not feeling entitled to any special treatment because the decision to emigrate was of their own volition. Despite their feelings of non-entitlement, the participants described feeling disrespected by the health system and the general society.

Speaking specifically to the experience of Caribbean immigrants, Coleman (2009) noted, “members of the Caribbean community in Toronto also have to navigate their identities as both Caribbean and Canadian.” (p. 2). This involved situational responses, which varied based on who was interacting and if they made appropriate adjustments. For example, as Coleman (2009) discovered, many Caribbean immigrants resort to standard English when relating to Canadian natives but use their dialect from their country of origin when relating to people of similar origin. This Coleman (2009) referred to as the creation of a hybridized way of adjusting to the new culture.

Often, the purpose behind emigration for many Caribbean residents was to find a better life in a host country, which people interpreted as being more friendly to such endeavors. This aspiration, however, does not negate the need to engage in demanding and taxing acculturation tasks that negatively affect their health and wellbeing (Coleman, 2009; Debrosse et al. (2020). Debrosse et al. (2020) went on to explain how negotiating identity for many adolescent immigrants was important in attaining their aspiration goals. In their study, 16% of the participants were of Caribbean origin. MacDonnell et al. (2012) focused their study on
immigrant women in the Greater Toronto Area and how they dealt with the challenges of adjustment. “Analysis of findings indicates that multiple and complex settlement factors shape these women’s mental health and well-being.” (p. 4). The demands of adjusting to a new culture included the women needing to navigate challenges with language and communication along with discrimination based on race and ethnicity. Confronting these challenges helped them developed resiliency (MacDonnell et al., 2012).

**Racial Discrimination**

Migration brings with it a sudden awareness of otherness in terms of race. In the Canadian society, this was a reality for many immigrants from the Caribbean coming from countries where there is racial homogeneity into a society where heterogeneity in race and culture suddenly began a narrative concerning their identity (Taylor & Richards, 2019). Cullins et al. (2019) found racism and experiences of discrimination played a deleterious role in the onset of depression among black youth from the Caribbean. On the other hand, religion and spirituality became protective factors. Cullins et al. (2019) went on to suggest Caribbean immigrant youth confronted major acculturation tasks such as adjusting to language barriers in their host country while dealing with other social changes, which originated during the immigration process. Cullins et al. (2019) cited changes in family structure precipitated by separation as one of the more significant social challenges for immigrant youth from the Caribbean. The combination of adjustment barriers and familial deficits could potentially contribute to developing mental illnesses associated with various mood disorders (Cullins et al., 2019).

Belhadj-Kouider et al. (2015) identified a series of emotional and behavioral problems associated with migrant children to the Americas by synthesizing the results from n= 973 studies
which the researchers reduced after screening for duplications, title, abstracts, and full-text research to n= 38. Notable among the findings from Belhadj-Kouider et al. (2015) is the inference that children from Black ethnic groups were more prone to show susceptibility to mental disorders when compared to other native children. An exception to this finding indicated native Blacks were just as likely to show vulnerability to mental disorders as migrant children of Black ethnicity. Belhadj-Kouider et al. (2015) further explained how the findings were indicative of the difficulties associated with acculturation for migrant populations in North America. Other factors of acculturation such as its resulting stress exemplified adverse mental health outcomes for migrant children. This, according to Belhadj-Kouider et al. (2015), further exacerbated the inability of the parents to effectively negotiate the acculturation process themselves. Evans and Sheu (2019) offered another way in which discrimination based on race affected immigrants. They undertook a study, which demonstrated that Caribbean Black people in America were more likely to need mental health services due to their experiences with discrimination. Evans and Sheu (2019) contrasted their findings with what they claim as other studies, which showed the perception of discrimination among Caribbean Black people reduced their likelihood of seeking out mental health services.

Seeman (2011) conducted a study using the database from PubMed and JSTOR dated between 1966 and 2001. Their search compiled information on psychosis in immigrants from the Caribbean. While Seeman (2011) concluded a plethora of issues affect the mental health of immigrants from the Caribbean, there was a lack of evidence to support the conclusions that the process of immigration leads to an elevation of psychosis in immigrants from the Caribbean. Seeman (2011) suggested psychosis, which may be present in individual immigrants, may manifest itself in the host country and become protracted. Seeman’s (2011) conclusion on the
lengthening of mental health symptoms in some immigrants from the Caribbean was based on an interplay between several factors associated with the change process. The coming-together of factors related to social challenges involved in adjusting to a new society, pre-emigration exposure to traumatic experiences, and their perception of social challenges especially as it related to discrimination created the environment for extending the duration of whatever mental health challenges the immigrants faced (Seeman, 2011).

**Socio-economic Changes**

One of the more common economic challenges immigrants to Canada must deal with is the disparity in compensation for similar levels of education and qualification when compared to native Canadians. Montazer and Wheaton (2017) assessed how the economic conditions in the origin country for immigrants to Canada contributed to the status of the mental well-being of immigrants after arriving in Canada. One of the important findings from Montazer and Wheaton (2017) was that adjustment to Canada was not challenging in this area. This stands in contrast to the general findings of the challenges of adjusting to life in Canada for many immigrants. An important finding emerged from their assessment that does not conform to the established understanding of adjustment to Canada being challenging for immigrants. In their first finding, Montazer and Wheaton (2017) proffered that while the mental health of immigrants from countries with adverse economic conditions shows deterioration over time, this seems to only occur over five years. After five years, they improved and adapted to normal levels of functioning. Levels of improvement for all immigrant groups irrespective of the economic conditions of their countries of origin were better than that of native Canadians. Banerjee and Verma (2012) also found two important outcomes of immigration. The first documented economic and educational improvements for immigrants to Canada including from the Caribbean
was a protracted process that spans a significant period. Second, the well-being of these immigrants reflects the difficulties they face getting potential employers to accept their prior experience and credentials (Banerjee & Verma, 2012).

**Historical Context of Caribbean Spirituality and Practice of Religion**

To establish a fuller context and understanding of the heritage and way of living of immigrants from the Caribbean to Canada, it is also important to survey their religious beliefs and history to lay a foundational launch pad to add further context to this research. Taggart et al. (2018) found that among many people of Caribbean descent, norms and values are a result of religious socialization. In this section of the literature review, I unfolded how this is a pervasive factor in the way of life for people from the Caribbean. Summarizing this section of the literature review, I discussed the heterogeneity of the origin of the people of the Caribbean and their religious heritage.

**Heterogeneity of Origin**

Caribbean people are a heterogenous group whose backgrounds also reflect a diverse heritage of African, European, Asian, French, Dutch, and American influences. Their predominant religion is Christianity (Gopaul-Nichol, 1993). WHO (2010) conferred how religion is germane to many life decisions of Haitians and like many Caribbean countries, they practice religion using the eclectic history of the region with influence from their colonial experiences as well as their African heritage. Catron (2010), Satchell (2004), Edmonds and Gonzalez (2010), and Glazier (2012) captured the essence of Caribbean religiosity when they discussed how it is a mosaic of plurality largely influenced by the colonial intervention of Europe in the region, along with the vestiges of the African continent which reshaped the Caribbean from the land of native Indians to the recipient of a great number of African slaves. The indentured laborers from Asia
also added their contribution to the Caribbean religious experience, which should not discount the importance of their actions.

Reddie (2018) explored how Black people represented a kind of subjectivity shaped by the personal amalgamation of ancestral associations with Africans and the new experience resulting from living in the Americas. Another layer of subjectivity thereafter emerged out of the negotiated transaction between Protestantism and the religions of Africa. As Reddie (2018) noted, “This form of multiple subjectivities speaks to the notion that we are more than the sum of any set of primal identities.” (p. 76). The author explained how while many members of the Caribbean community might share common ancestral roots and identify with a similar way of life, their cultural identities and experiences mediate a unique social construct with geographical, socio-economic, and familial factors. While the milieu of their experiences might present as a melting pot of cultural heritage, their pattern of living and ways of viewing the world remain subjective. The pattern carries over to the practice of their Christian beliefs. As Reddie (2018) noted, the People of the Caribbean have an existence, which emerged from multiple ancestral sources, as well as from a plurality of social and religious roots. Jackson and Naidoo (2012) captured a similar idea, suggesting while a shared communal history and culture contributed to Caribbean identity, the understanding does not reflect a uniform display of social experiencing and meaning making among individual groups within the culture but viewed as dynamic and fluid. Nevertheless, as Hope et al. (2020) explained, the accentuation of spirituality continues as a key marker in the understanding of Caribbean people and how they view the world.

**Religious Heritage**

Patton and Forde (2012) noted Caribbean religious experiences derived from the Atlantic slave trade, emphasizes the influence of the religion of slaves from Africa on the colonial slave
masters. Reddie (2018) explained African-Caribbean religiosity is a multi-derived experience with roots in Africa and Europe. Beliefs rooted in the practice of driving out evil spirits through all kinds of approaches such as an open Bible on a bed in an empty room, or putting a Bible opened to the Psalms at the head of a newborn baby as ways of warding off evil spirits. These beliefs seem grounded in a sense of elevating the power of God and scripture to heal both curses and afflictions (Reddie, 2018).

The fear of evil spirits, as explained by Hickling and Paisley (2012) and Reddie (2018), is a phenomenon that runs deep in many religious practices in the Caribbean. The beliefs made their way into mainstream evangelical Christianity. In many ways, these beliefs helped shape the contextual picture of how the practice of Christianity is both a mainstream evangelical experience as well as a cultic movement dating back to the mother land, Africa. The absence of a settled pattern in the practice of religiosity runs the gamut from personal perspectives and understanding of the world to a more conventional communal exercise of spirituality. They manifested this by reading scripture, praying, singing (hymns and other spiritual songs), and preaching (Hickling & Paisley, 2012; Reddie, 2018). The practice of religion in the Caribbean at times manifests as a tension between the spirits, the evil, and the holy, where the believer becomes the central stage on which they display agitations and tensions in intense battles for supremacy over the mind. At times, the line between the spirits as well as the demarcation between Christianity and African derived religion have merged into an ether of complex practices and beliefs often indistinguishable because of the existence of both the subjective as well as the collective approaches guiding how to live out one’s faith (Reddie, 2018).

Acknowledging the spirits of the ancestors is also an aspect of spirituality derived from both African spirituality and the Christian religion. Some aspects of African spirituality remain
couched in the belief of a supreme being who is not resigned to the daily aspects of life and living but mediated His presence through other notaries who served as the embodied connection between this supreme being and ordinary human beings (Erskine, 2014). As Erskine (2014) shared, the concept of intermediaries through whom the supreme deity operated became the avenue through which Christianity honed its appeal to the African slaves. The slaves readily associated with Jesus in His role as the intermediary between humans and God. Erskine (2014) also noted how many of the slaves from the Caribbean, the first need was to satisfy their yearning for their community and way of life back in Africa. They first started worshipping as a way of reconnecting with the spirits of their ancestors. This stood in contrast with the religion of the Europeans, which the slaves viewed with suspicion because it justified slavery and the inhumane treatment they received. Over time, however, a unique brand of spirituality developed and served as the basis of coping with life in a strange world, under less than human conditions. This brand of religion was an amalgam of African spirituality and the Christianity of the Europeans (Erskine, 2014). As Boaz (2017) and Stewart (2005) explained, the meeting of African-derived spirituality centered around the spirits of the ancestors and the monotheistic European brand of Christianity was not an amicable one. As with the power structure in the new world at that time, the religious hegemony meant the slave master had the power to define what was compatible with the social order of the day. Boaz (2017) also described how the legacy of the negative characterization of African-derived spiritual practices had its origin in the attempts by the colonial masters to suppress its practice. This was widely evident in the Anglophone Caribbean with the proscription of obeah (the practice of a variegated form of spiritism).

Chatters et al. (2009) and Taylor and Chatters (2011) in their assessment of the religious involvement of Caribbean descendants stated Caribbean descendants, like African Americans in
the American society, reported high levels of religious involvement in comparison to their White counterparts. “The high levels of religious involvement among Caribbean blacks in this study, in part, reflects the general religious socialization experiences of this group.” (p. 1158). While this conclusion resulted from the US based study, it is in line with the description of Caribbean religious experience by many authors such as Erskine (2014), Hope et al., (2020) and Reddie (2018).

Although Caribbean Canadians share a history and religious heritage and are members of the same community, their styles, and ways of interacting with the world broaden unless it becomes limited to this view. An understanding of the individual embraces the concept of the whole is a result of the sum of the individual parts. This conception represents an engine driving the understanding of the religious orientation of many Caribbean-Canadian Christians (Schwer-Canning, 2011). It is this same backdrop however, that demonstrates how tapping into one’s spiritual resources is a way of life for many Caribbean residents and descendants of the Caribbean in relating to many life challenges (Berwald et al., 2016; Taylor et al., 2011). As Dixon (2019) outlined, a growing number of immigrant women from the Caribbean who presently reside in Canada account for some of the deepest expressions of religious faith. And as Taylor and Chatters (2010) noted in their study, more women than men reported the importance of spirituality to them.

The entrenched nature of the religious heritage exemplifies the effect religious involvement has on the quality of life of many Caribbean immigrants. They associate their quality of life with religious involvement on many levels. For example, social connections are important in fostering a sense of well-being. They actualize this through their involvement with a religious community (Counted et al., 2018). Rose et al. (2017) added to this idea by positing how
organized religion played a role in the mediation of salubrious outcomes to mental health needs and challenges. Emotional support and coping are markers of the role organized religion plays in helping to manage mental health challenges such as depression. As Pargament (1997) proffered, coping is the product of a frame of reference through which people negotiate and mediate life events. Religion and spirituality create a frame of reference from which they meet life’s challenges. Arthur (2018) noted both from a community and personal perspective, many individuals from the Caribbean organize their worldview around their religious heritage and it becomes the lens through which they develop perspectives and responses to the world around them. Akin to this, for example, Caribbean residents organize responses to mental illness and other challenges around the role religion and spirituality play in their lives. Arthur (2018) underscored the significance of the role of religion.

**Beliefs About Health and Well-being and Mental Health**

There are many beliefs among Caribbean residents, which broadly reflect their stance on health, well-being, and mental health. These beliefs can be grouped according to their connection to religious heritage and traditional beliefs (Dixon, 2019).

**Beliefs Connected to Religious Heritage**

The religious heritage espoused by many Caribbean-Canadian immigrants reflects their beliefs about health and wellbeing. Although their study pointed to lower incidence rates when compared with those of African Americans and Non-Hispanics, Gibbs et al. (2013) found Caribbean Blacks like other ethnic groups are subject to mental health issues. This is a position shared by Barton (2012), Doyle and colleagues (2012), and Siegel-Levine et al. (2013). Abdel et al. (2012) proffered English-speaking Caribbeans should also recognize the presence of mental health challenges among its population. The authors point to a lack of resources both financial
and human as barriers to confronting and adequately dealing with mental health issues in this region of the Caribbean. Mismanagement of resources by various governments contributes to the prevalence of mental illness. These pronouncements, also recognized by Rodriguez (2014) identified deficits in the management and treatment of mental health in the Caribbean region.

Dixon (2019) highlighted the intertwined nature of the relationship existing between the cultural, spiritual, and physical well-being of people of Caribbean descent. Caribbean residents as it appears, do not live their lives in competing dimensions but do so in ways that bring various elements of their existence together in a unified manner. Caribbean residents, therefore, take a more holistic approach to health in comparison to Canadians who largely emphasize the biological methodology. The conceptualization of health, therefore, encompasses the relational symbiosis between these aspects of their lives and contrasts to the main biological conceptualization of health in the Canadian culture. In a cross-sectional study conducted in Jamaica by Ali et al. (2011) to gauge the awareness of epilepsy in a specific community, the researchers discovered while the overall response to persons living with epilepsy was positively rated territory, 12% of the respondents to the study questionnaires believed epilepsy had a demonic origin. Some of the study participants also revealed their church had expressed similar beliefs related to epilepsy. They also confirmed they witnessed attempts by their church to rid individuals of their epilepsy through spiritual means. This finding by Ali et al. (2011) is commensurate with the description of the Caribbean as being a religiously diverse region with practices grounded in both mainstream Christianity as well as other forms of spiritual practices. In summation of the religious diversity of Caribbean descendants, Mantovani et al. (2016) outlined the concept and understanding of mental health challenges as greatly influenced by the religious and spiritual heritage of the region. As a result of this phenomenon, Caribbeans
associated mental illness with the intervention of the spirit realm in the life of an individual. In addition, many think demons possess the power to inflict curses, which manifest as symptoms of mental illness (Mantovani et al., 2016).

Whitley (2016) undertook a qualitative study in Canada, designed to help understand the meaning, barriers, and aids to recovery using a group, n = 47, which included participants from Caribbean and Eurocentric backgrounds. The researchers grouped responses to the research questions thematically and then drew comparisons between their responses. Replies to the three research questions bore similarities except for the areas of religion and spirituality (Whitley, 2016). Whitley (2016) found, “God and religiosity were frequently mentioned as important facilitators in the Caribbean-Canadian group but was rarely mentioned by the Euro-Canadian group” (p. 345). Among the aspects of religion and spirituality reported by the Caribbean-Canadian participants, prayer and church attendance held the most importance. The researcher included support from a previous study by Whitley et al. (2006), demonstrating outcomes related to religion and spirituality were concurrent with previous findings. They concluded, “Caribbean immigrants with mental illness often deploy religiosity as a social and functional resource.” (p. 345). The role of religion and spirituality as a source of healing for Caribbean natives has its roots in early experiences when the church played a pivotal role as the first responder regarding the health and wellbeing of its members and families (Whitley et al., 2006). For example, Palmer et al. (2012) explained how long before counseling services emerged as an organized profession in Jamaica, the church offered spiritual support as a means of psychosocial help. They also advocated for future research in culturally appropriate counseling practices to meet the mental health needs of Jamaicans. Pertinent to the advocation of further research was the need to establish an understanding of a certain cultural phenomenon, which explained how for example,
Jamaicans living abroad sometimes developed a ‘I am strong’ attitude as a means of managing psychosocial issues related to their migration, therefore rendering any attempts of help-seeking moot (Palmer et al., 2012).

Codjoe et al. (2013) using the Q method of investigation, developed a Q set around the meaning of wellness among a group of Black Africans and Caribbean participants at risk of developing psychosis. Codjoe et al. (2013) discovered themes emphasizing the saliency of spirituality to the study participants. Of notable interest was the belief among the Black Caribbean participants that mental illness was a kind of spiritual test of endurance, the passing of which would restore control over one’s life. Codjoe et al. (2013) also noted, “Participants considered wellness to be when their spirit is well, located in the soul and when they are free from witchcraft, spirits or supernatural forces.” (p. 152). It should be noted while some of the study participants represented target populations for this study, Codjoe and colleagues (2013) were located in London, England.

Causal attributions, or the explanation of the origin of mental illness, as pointed out by Arthur and Whitley (2014) aptly applies to how mental illness and other ailments Caribbeans associated with psychosocial disturbances. How causal attributions manifest themselves in the Caribbean, Jamaica specifically, was the focus of a study by Arthur and Whitley (2014). Arthur and Whitley (2014) asserted the causality attributions of mental illness serve as a window into understanding the help-seeking behavior of Caribbean residents. Put precisely, Arthur and Whitley (2014) posited, “Causal attributions of mental illness are important in understanding perceptions and experiences of mental illness. Beliefs about causation may be important factors in treatment-seeking and mental health service provision and utilization” (p. 115-116). To arrive at the findings of this study, they utilized a stratified sample of participants from various
demographic groups across Jamaica. Using a qualitative method of inquiry that emphasized the focus group, Arthur, and Whitley (2014) documented the participants' descriptions of their lived experiences with the research emphasis. Resulting from the twenty focus groups convened in various communities across the island and composed of varying demographic representatives, five themes the researchers ranked according to recognized superiority. They included substance-related, organic, psychical, social, and spiritual. The spiritual theme emerging from this study revealed the belief among some of the participants that demonic forces and ‘obeah’ caused mental illness. They accepted the explanation of mental illness as a casting of spells on the individual in which madness occurred from the consultation of an obeah man with the ability to summon evil forces to harm others (Arthur & Whitley, 2014).

In a study designed to delineate the effect of spirituality on health behaviors Marshall and Archibald (2015) demonstrated the maximal place of spirituality in the decisions of the Caribbean participants. The researchers argued from the standpoint of the church as providing for the need for social connection and associated activities that go with this provision. Embedded in the religious experience of many Caribbean people, however, is the belief in divine authority that leads to the turning over of personal autonomy to church leaders. This, in turn, could delay personal decisions about health and well-being while fostering mistrust in the health system (Marshall & Archibald, 2015). Allen et al. (2010) pointed to the saliency of the role spiritual leaders in the African American community play in mediating better mental health outcomes for their parishioners. Many African American church attendees held a positive view of their experience belonging to a faith community that espoused values and approaches sensitive to their history, culture, and worldview. Furthermore, Allen et al. (2010) found the Black church was the main point of social support for many African Americans and this led to the ideal position of the
church as the first point of contact in intervening in the mental health needs of its members. This same finding supported by Chatters et al. (2011) identified church attendance as a protective intervention against suicidal ideations based on the level of emotional support derived from belonging to a community for many Blacks from the Caribbean.

Mantovani et al. (2017) reported in their research with participants from the Caribbean who reside in South London, England, consultation with their spiritual leader held a primal place in the response to psychological distress. The WHO (2010) also noted, “… religious practices in Haiti help people cope with mental and emotional problems and provide a parallel system of healing.” (p. 8). Health practitioners often sought an alliance with religious leaders in their mental health approaches with clients, a decision that reflected the reality of the diverse sources consulted to assist in dealing with health-related issues. The attributive explanations employed by Haitians helped them understand illness based on the belief people could summon evil spirits to hurt other individuals (WHO, 2010).

As Jackson and Naidoo (2012) explained, there are different conceptions of health and well-being associated with people of Caribbean descent and evident in the various beliefs associated with explaining pain and illness. For example, in a qualitative study done in Ontario, Canada geared at understanding how participants of Caribbean origin approach treatment for psychosis, Ferrari et al. (2015) found religion as influential in how they perceived mental health. One participant recounted her mother telling her she needed to pray more about her psychosis despite her insistence she needed to go to the hospital for medical care. The participant’s brother also excoriated her for discontinuing church attendance, which he saw as explanatory of her mental health challenges. Another feature emerging from the study by Ferrari et al. (2015) was
the belief the onset of mental health challenges preceded the committal of wrong deeds and was something they could snap out of. Ferrari et al. (2015) noted:

African-origin and Caribbean-origin participants described how when they experienced early signs of psychosis, they tried to control them, and they felt guilty if they were not able to. Their sense of guilt also connected with the cultural interpretation of mental illness as sin, God’s punishment, and a taboo illness heavily stigmatized—themes more present in the Caribbean-origin focus group and interviews. (p. 7)

Another qualitative study by Moorley et al. (2016) that employed a phenomenological approach found one of the emerging themes was influenced by a belief in witchcraft as the attributive cause of strokes. Akin to this belief, obeah in the Caribbean is where someone with a vendetta against an individual can consult evil spirits to inflict harm. Moorley et al. (2016) also revealed that hope for healing among the participants centered on their belief in God and this belief did not always mirror the organic explanation of stroke. Hence, they placed more emphasis on the reliance on spiritual resources for healing rather than subscribing to medical procedures. The response of the participants was often asymmetrical to an understanding of the organic explanation of stroke. Moorley et al. (2016) also noted, “When individuals hold such beliefs it challenges preventive efforts of health promotion and education. Secondly, these beliefs may result in lack of treatment-seeking behaviors or lack of adherence to medication” (p. 409).

Analogous to the findings of Moorley et al. (2015) King-Okoye et al. (2019) explored the beliefs among Afro-Caribbean men in Trinidad that impacted their response to prostate cancer. Even though lack of knowledge and awareness were drivers of the research participants responds to their medical problem, King-Okoye et al. (2019) discovered a belief in their illness as a spiritual medium through which God communicates with them as well as demonstrates His
healing powers was an important theme of the findings of this study among the participants. Even when they engaged in medical consultation, they believed God would heal through this means (King-Okoye et al., 2019).

In another study, Kang-Dufour, et al. (2013) discovered that views about health and well-being were also held within faith profession. The researchers pointed to the place of trust faith-based organizations held in the Eastern Caribbean. They communicated views about sexuality and how to prevent the spread of HIV in the context of their conservative values, which espoused abstinence before marriage and faithfulness to one’s partner after marriage. The participants from the faith-based organizations in Antigua and Barbuda, Barbados, St. Kitts, and Nevis, and St. Vincent and the Grenadines found their worldview concerning sexuality influenced their religious commitment and while upholding the dignity of each human being by various community outreach endeavors, tended to have a disposition and response to HIV that reflected their religious persuasion (Kang-Dufour et al., 2013).

Edge (2013) proffered, “culturally-based conceptualizations” (p. 42) of mental illness play a role in the understanding and diagnosis of mental illness. For example, Black British Caribbean women were less likely to associate depressive feelings with a diagnosis of depression. As such, the employment of spiritual resources to deal with depressive feelings was a common go-to coping mechanism for the women. Within the framework of spiritual resources was the reliance on support within one’s social group of which the church played a major role. Edge (2013) however, also posited a counterargument to the use of spiritual resources to deal with mental illness as an interpretation on the part of many needing help outside of one’s reliance on God as a failure or weakness. As such “spiritual practice might serve as a barrier to help-seeking.” (p. 43).
Jackson and Naidoo (2012) conducted a qualitative study in which they appraised how Black women of Caribbean descent in Canada manage depression and define womanhood in the context of being strong. The study participants disclosed they would find ways to mask their depression as a way of presenting a persona that is strong, as a display of weakness had no resourceful outcome. It is this lack of social support, which fuels the need to be strong. Jackson and Naidoo (2012) found one way in which these study participants presented themselves strong was through diversion. They would engage in activities that diverted their attention from their depression. Spirituality also played an important role in how the study participants managed their depression. Jackson and Naidoo (2012) suggested, “faith and religion may also play a significant role in this sub-process, as some women described discovering and tapping into the strength of God as a powerful tool to help manage their depression.” (p. 232). The study also found that while these women looked within for strength to manage their depression, they were also willing to seek mental health therapy (Jackson & Naidoo, 2012).

Hickling and Paisley (2012) identified Black migrants from the Caribbean as susceptible to several mental health issues, which frequent diagnoses of schizophrenia were prominent among those in North America. Hickling and Paisley (2012) further posited how peculiar understandings and language of mental illness or illness, in general, was a product of the Caribbean culture that varies from people groups to people groups though understandings and meanings have shared ideas. This speaks to the idea Caribbean people must not appear as a community, which adheres to homogenous ways of being and responding to the world but also as a people with individualized ways of responding to the world (Hickling & Paisley, 2012).

Piza-Peluso and Blay (2004) in their systematic review of studies on the community perceptions about mental disorders in Latin America and the Caribbean found perceptions about
the mentally ill were generally positive among educated respondents who had a higher socio-economic status. Piza-Peluso and Blay pointed out, however, their findings might be based on instruments used in the original studies and favored more socially desired responses from the participants in the studies. Nevertheless, among the disorders considered as mental illnesses by the study participants were schizophrenia, depression, alcoholism, and psychosis. As Piza-Peluso and Blay (2004) noted, elements of spirituality did not show up in the studies reviewed as influencing perceptions of mental illness. Again, this they surmised was a result of the kinds of instruments used in the original studies. They reached this conclusion based on their assessment of the cultural significance of religion and religious practices in Latin America and the Caribbean. Another important point that is salient in the assessment of the outcome of this systematic review by Piza-Peluso and Blay (2004), is that most of the studies reviewed were done in Latin America, with only one done in Dominica, in the Caribbean.

In a qualitative study done in Britain by Koffman et al. (2008), participants of Caribbean descent reported viewing their pain from cancer through the prism of their religious convictions when compared to the native British participants. Some of these participants described the pain as an experience that built character and tested one’s steadfastness and commitment to God. In this context, they drew similarities to the experiences of Job in scripture (Koffman et al., 2008).

At least one study demonstrated a link between socio-economic factors and view of health albeit this study was limited to perceptions about HIV. Kerr et al. (2018) demonstrated the social status of the neighborhood of African and Caribbean youth in Windsor, Ontario, Canada explained the level of stigma associated with HIV. The higher the socio-economic status of the community, the less stigma and vice versa. Kerr et al. (2018) also pointed out when factoring in
other variables into the delineation of their data, religion played a role in the maintenance of negative stigmas.

**Beliefs Connected to Traditions**

An important finding from Seeman (2011) also identified by McKenzie et al. (2011), was the unique characteristic of many Caribbean residents to “self-treat.” (p. 463). Because of the attributional causes of mental illness such as witchcraft and associated spirits couples with feelings of shame, many Caribbean residents resort to treating themselves, which at times lead to the protraction of their illness. Self-treatment roots in the practice of traditional healing. For example, Coleman (2009) and McKenzie et al. (2011) identified traditional Caribbean healing as having a presence among the immigrant population in Canada. Like many cultures, Caribbean immigrants have their own sets of beliefs around health and represent major drivers in how they relate to health and well-being in Canada. There are three main grouping areas for traditional Caribbean healing and health beliefs. These are folk medicine, spiritual healing, food, and nutrition (Coleman, 2009; McKenzie et al., 2011). The three approaches to health and healing reflect the eclectic heritage of the Caribbean region and therefore draws from the major continents, namely Africa and Europe, which factored into the colonization history of the Caribbean (Coleman, 2009; McKenzie et al., 2011). Folk healing beliefs surround the consumption of indigenous plants and sometimes animal by-products as have healing properties. Spiritual healing focuses on the single use of or the combination of a set of beliefs that involve Christian practices as well as magic. These practices are also a window into the conception of the framework for understanding health and well-being among Caribbean residents as it relates to nutrition (Mackenzie et al., 2011).
Sutherland et al. (2014) cast Caribbean healing traditions in the context of a wholistic view of the person, which recognizes the indivisibility between the physical characteristics and psychological. As such, spirituality is a major underlying principle of how Caribbean people come to understand themselves and their identity (Sutherland et al., 2014). They view healing as a spiritual undertaking that sometimes involves consultation of that thought as endowed with special abilities through spiritual approaches. The belief sharply deviates from the prevailing North American view that often represents mental health challenges as having an organic origin (Sutherland et al., 2014).

**Attitude Toward Counseling**

Bonelli and Koenig (2013) recognized that though there are ongoing debates, research and development of scientific evidence, there remains a significant level of interaction and outcome in the relationship between religiosity, spirituality, and mental health for many individuals with lived experiences in these two areas. Though study outcomes of the interaction of spirituality, religiosity and mental health varies in their return-mainly positive and negative outcomes- religion continues to play a significant role in shaping the individual and his/her response to the world (Bonelli & Koenig, 2013). There are certain attitudes toward counselling present with Caribbean residents that can be summarized under the headings of dueling research outcomes and attitude versus access.

**Dueling Research Outcomes**

Turner et al. (2019) did not find in their study that increased levels of spirituality were a hindrance to mental health care-seeking behavior among proponents of the spirituality of African American and Caribbean descent. “The statistical analysis showed African Americans and Caribbean Blacks who have stronger religious/spiritual beliefs were more likely to seek mental
health care.” (p. 908). Turner et al. (2019) suggested adherence to spirituality and the belief in God was a major driver motivating mental health clients to seek out the best possible path to the alleviation of their symptoms while at the same time trusting in a higher power for a positive outcome to their experience (Turner et al., 2019).

Jackson-Williams (2013) conducted a study to assess whether stigmatizing Jamaicans was based on the comparison of mental health help-seeking attitudes. This study, predicated on what Jackson-Williams (2013) described as the prevailing opinion of people from the English-speaking Caribbean, had deficits in their understanding of mental illness, as well as negative beliefs about mental illness. The goal of the study compared stigmatizing attitudes of Jamaicans seeking mental health help to the attitudes of other populations. The null hypothesis was $H_0: \mu_1 = \mu_2$ or $H_0: \mu_1 - \mu_2 = 0$. This is useful when comparison groups were between-subjects and independent groups. Using this hypothesis, Jackson-Williams (2013) hoped to find the mean outcome of the quantitative Y variable for one group different from another comparable group. In this case, they compared the mean outcome for Jamaicans in relation to seeking help for mental health issues to the mean outcome for those of other populations. In other words, Jackson-Williams (2013) wanted the ability to show a significant difference in mean scores on Y between the groups. On this basis, they rejected the null hypothesis of the hypothesized difference between $\mu_1$ and $\mu_2$ did not equal 0 (Warner, 2013). Jackson-Williams (2013) hypothesized Jamaicans would have a negative attitude toward consulting mental health services when compared to other populations. They tested the hypothesis using a sample of n=339 adolescents of which 146 were males and 193 were females. The researcher obtained the other sample used in the comparative analysis from a group of African American adolescents, n=81. Jackson-Williams (2013) found Jamaicans did not have more negative attitudes toward seeking
help for mental health needs when compared to the African American group. This study did not conclude however, they had a more positive attitude toward seeking help. Jackson-Williams (2013) found the Jamaican participants in the study held more positive attitudes toward seeking help for mental illness than did their American counterparts.

In another study, Greenidge and Daire (2010) sought to investigate the link between emotional openness and attitudes toward counseling among 500 English-speaking Caribbean college-age study participants. After adjusting for outliers, the final number of participants was = 495 students, 245 of whom resided in the Caribbean and 250 who lived in the United States. “Three instruments were used in the study—a demographic questionnaire, the ‘Attitudes towards Seeking Professional Psychological Help’ (ATSPPH) survey by Fischer and Turner (1970), and the ‘distress disclosure index’ (DDI) by Kahn and Hessling (2001).” (p. 194). After applying an analysis of variance (ANOVA) to the survey returns, Greenidge and Daire (2010) found there was a significant relationship between openness and willingness to seek counseling. This finding suggested the degree to which college students reported emotional openness was the same as the degree to which they would seek professional counseling if needed. This held consistent irrespective of where study participants resided. The participants in the study, however, scored low on emotional openness and therefore deemed to have a negative attitude toward seeking counseling (Greenidge & Daire, 2010).

In their exploration of the use of social work services among Blacks from America and the Caribbean Cheng and Robinson (2013) noted the increased likelihood for those with comorbid diagnoses in which mental health was included and those with mental health challenges alone to employ the services of a social worker. However, this study conducted in the
United States split the percentage of participants 71%-29% between those from the U.S. and those from the Caribbean.

Mihan et al. (2016) surveyed 543 African, Caribbean, and Black youth ages 16-25 in Windsor, Ontario to understand the stigmas around HIV. Of those surveyed, 27% of the respondents were Christians from the Caribbean. After controlling for outliers in the data set, the final number of participants was n = 510. After using a “Pearson product-moment correlations to assess bivariate associations” (p. 759), Mihan et al. (2016), found that stigmas surrounding HIV were higher among those who had higher rates of religious services attendance than those who had lower rates of attendance. It was theorized that higher attendance rates were associated with prolonged exposure to doctrines on which higher rates of stigma were predicated. Mihan and colleagues (2016) also found those participants with a higher rate of knowledge about HIV and who had more contact with health services, returned lower rates of stigmas surrounding HIV.

In another study related to the use of health services in African and Caribbean immigrants living with HIV, Masindi et al. (2018) used an administrative health database in Ontario to identify participants meeting the study criterion. Removing identifiers from their database ensures legal and ethical conformity to research guidelines. Masinda et al. (2018) then “compared rates of ambulatory visits (total and HIV-specific), emergency department visits and hospital admissions between African and Caribbean immigrants with HIV and non-immigrants with HIV using multivariable Pearson regression analysis.” (p. 538). Unlike Mihan et al. (2016) Masinda et al. (2018) found higher rates of ambulatory visits to health facilities among the 1525 participants in their study who were from the Caribbean and Africa and living with HIV. This finding stood out more when viewed from findings in the study suggesting that for all cases, African and Caribbean immigrants had lower rates of visits to health facilities. The reviewed
literature did not delineate the disparity in findings. Masinda and colleagues (2018) also noted divergence when they compared their findings to outcomes from other researchers. However, the findings of Massinda et al. (2018) are useful in gauging the overall response of Caribbean immigrants to seeking help for health-related issues.

Fernandez De La Cruz et al. (2016) completed a survey study exploring help-seeking attitudes among different ethnic groups in relation to treating obsessive-compulsive disorder (OCD) with n= 293 of which 46 of the participants were from the Caribbean. While this study conducted in England demonstrated the Black Caribbean participants scored lower in illness perception than White British participants in the study, it was important to document if these findings from Fernandez De La Cruz et al. (2016) held with Caribbean-Canadian participants. As it related to attitudes toward seeking help, Fernandez De La Cruz et al. (2016) reported Black Caribbean participants ranked second to those of African descent in agreeing they would not seek help for OCD. Given the quantitative nature of this study, the researchers did not provide explanations for not seeking help except for the indication they arrived at their decision for religious reasons. While the respondents to the survey largely agreed to worsening of the situation, would cause them to seek help from a medical doctor, respondents from the ethnic groups also indicated an inclination to seeking help from their religious community (Fernandez De La Cruz et al., 2016).

*Attitude Versus Access*

One of the things driving postpartum depression in many immigrant women from Western Canada was the lack of knowledge concerning accessing mental health services (O’Mahony & Donnelly, 2010). Thomson et al. (2015) found existing barriers to Canadian immigrants attempting to access health care. One notable barrier identified in their review of
available literature on the subject was, “stigma of mental illness and resultant reluctance to seek
outside help; gender roles; and belief in alternate practices.” (p. 1897). Khanlou et al. (2017) also
noted the challenges with locating, delineating the level of care and accessing health care
services for new immigrants to Canada. Edge (2011) working with a focus group of Caribbean
women to explore beliefs around seeking help for mental challenges during the perinatal period
of childbirth concluded among the reported responses to lower levels of a medical consultation
with this population, the participants heralded approaches that emphasized community-based
programs in group settings. They believed this would reduce the stigma in their community that
points to mental illness as a loss of personal agency (Edge, 2011).

Suggested Approaches to Counseling

A survey of the literature revealed counseling interventions with Caribbean-Canadians
was very important and spiritual and cultural standards of practice require an appraisal (Cullins
et al., 2019; Forbes & Hutchinson, 2020; Plumb, 2011).

Spiritual Appraisals

Koenig (2012) made a connection between religion, spirituality, and health and the value
of recognizing this in therapy. He stated a close relationship exists between health, religion, and
spirituality in many cultures. Religion and spirituality provide both protective and preventative
measures to dealing with much mental health and other health-related challenges. Koenig cited
coping, positivity, feelings of well-being, hope, meaning to life, and optimism as examples of
such measures. Conversely, Koenig also reported religion and spirituality were associated with
adverse outcomes in health. For this argument, depression, anxiety, and suicide were among the
examples furnished. Koenig (2012) proffered that “Religious doctrines influence decisions about
health and health behaviors.” (p. 8). Delineating religion and spirituality with clients are
therefore seen as a very important aspects of evidenced-based practice in mental health therapy. Xu (2016) and Plumb (2011) who also supported this view from a Canadian perspective, stated that taking into consideration the spiritual dimensions of their client’s life is germane to healthy therapeutic outcomes for clinicians and clients.

From their research, Cullins et al. (2019) suggested four ways clinicians can appraise the role of spirituality in the life of the Caribbean and other Black youth and use their findings to develop effective treatment plans. They include forging healthy partnership relationships, delineation of the role of spirituality in their life, identification of community faith-based resources, and the application of evidenced-based approaches that highlight spirituality.

**Cultural Appraisals**

Forbes and Hutchinson (2020) suggested areas of competencies they found relevant to the effective practice of counseling in the English-speaking Caribbean. Their findings were arrived at through a survey of 37 mental health practitioners utilizing the Delphi methodology, which sought to arrive at a consensus between an expert panel and the respondents to the survey. This study identified 48 competency areas deemed important to effective counseling in the English-speaking Caribbean. They grouped 48 areas of competency into four different competency components, namely knowledge, awareness, attitude, and skills (Forbes & Hutchinson, 2020).

The knowledge component included important areas such as ethics, understanding of legal implications of practice, understanding the cultural and spiritual nuances present in the region, and being able to communicate in the context of the language and dialect. The awareness and attitude component according to Forbes and Hutchinson (2020) required the clinician to introspectively become conscious of their own identity and biases as well as understanding family structure and other social concerns. The skills component drew together a conglomeration
of knowledge-based skills, competency in counseling skills, and personal attributions salubrious to positive therapeutic outcomes.

Abrons et al. (2019) highlighted the importance of cultural and historical sensitivity when relating to people from the Caribbean. This sensitivity they appraised as the understanding of the history of the people of that region as well as their culture. Though the goal of Abrons and colleagues (2019) in this study was to highlight the need for cultural sensitivity in forging pharmaceutical partnerships with the region, their findings are relevant to understanding the Caribbean region, the culture, and how the population views and responds to health-related issues. For example, they found:

Religion and superstition are intertwined within many aspects of Caribbean life. Strong beliefs related to religious coping such as prayer during hardships and seeking God’s guidance and strength are held by many and are especially common among women and married individuals who actively participate in religion. (p.675).

Sutherland (2011) advocated for an approach to the practice of psychology that recognizes and ratifies the historical experience of the people of the Caribbean residing in the Americas and contextualizing these approaches to satisfy the parameters of effective therapeutic outcomes. Sutherland (2011) argued, “Western psychology has routinely failed to adopt cultural pluralistic approaches in the study of different cultural groups.” (p. 1176). It is also important to identify how spirituality contributes to the formation of the value system of the Caribbean people.

Dos-Santos and Dallos (2012) and Shaw (2018) suggested the accentuation of socio-cultural realities of Caribbean Blacks and a proper understanding of mental health challenges within this framework as key to providing mental health services to this population. This is an ethical obligation governing the execution of services. Shaw (2018) went on to posit, “Health
beliefs and practices influenced by religion and culture compete with cultural norms in the host country.” (p. 46). Swinkels et al., (2011) set out to compile a set of guidelines to inform primary care for recently arriving immigrants to Canada. The emphasis of these guidelines was on preventative medicine. During the process of the Delphi method used in this study, both practitioners and those who offered settlement services to immigrants recognized mental health challenges as a top priority for intervention.

Hickling et al. (2013) outlined a thematic understanding of the major aspects of psychiatry in the Caribbean by basing their analysis on 43 published works in the PubMed database relevant to transcultural psychiatric research in the Caribbean. Arising out of this research, Hickling et al. (2013) identified three major themes that formed the platform for their analysis. These were, how the legacy of colonialism contributes to the shaping of the psyche of the people, the development of a unique set of psychiatric treatment protocols and public policies that are antithetical to the legacies of colonialism, and the development of etiological diagnostic parameters that explain the psychiatric pathology among the people of the Caribbean as well as those living in the diaspora.

Hickling et al. (2013) and Palmer et al. (2012) explained the Caribbean experience with colonialism as leading to the development of an understanding of the people that were not only dehumanizing but also exploitative in its perpetuation. This led to descriptive themes of the life and behavior of the people they determined as inferior to the more refined Eurocentric ideals. Hickling et al. (2013) identified an adverse effect on the well-being and psyche of the Caribbean people. The shaping of a narrative antithetical to the colonial descriptions of pathology remains entrenched in the idea of stressing deinstitutionalization and the development of community-based approaches.
Gaps in the Literature

While the statistics are clear about the increase in the immigrant population from the Caribbean to Canada (Statistics Canada, 2017) they also underscore the appraisal of Christian heritage makes for good practice in mental health treatment (Counted et al., 2018; Cullins et al., 2019). There remain challenges however, in making the transition from this recognition to the application in practice. The only practical ascent to evidence-based practice in counseling given to this fact is the broad recommendations for the integration of spirituality into mental health treatment. While authors such as Gurman et al. (2015), Jones and Butman (2011), and Tan (2011), all recognized the saliency of spiritually based practice in counseling and its potential to add significant value to salubrious outcomes, there remain challenges in finding an outline of principles and procedures in meeting the needs of this specific population in the surveyed literature.

An avalanche of information about immigrants and the place and role of spirituality in their lives exists and offered as aspects of studies completed in other areas. For example, in a study on how Black Canadian women of Caribbean descent manage depression and negotiate womanhood, Jackson and Naidoo (2013) described the role of religion as a source of coping with these personal challenges. The meaningfulness of religion is therefore situated as a resource to help cope with problems in their lives. This represents the major pattern of the availability of information on the attitude of Caribbean-Canadians toward counseling. I was unable to locate studies wholly dedicated to exploring the attitude of Caribbean-Canadian Christians toward counseling. The passing references and snippets on the place of religion and spirituality in the lives of this group give rise to the need for a more cohesive and nuanced approach to the discussion of the subject in a way that captures the attitude of this group toward counseling. For
example, a paramount understanding about the help-seeking behaviors of Caribbean-Canadian Christians need to be elicited from them in a concentrated and deliberate approach which seeks to describe their lived experience in their context. Since most of the literature explored provided little to no focus on Caribbean-Canadian immigrants I sought to include them in this project. The gap in the literature indicated the need to study immigrants from the Caribbean who hold a Christian worldview and add to the increasing multi-ethnic makeup of Canada.

**Summary**

This chapter outlined the theoretical framework guiding this research project. The two main theories that reflect the social constructivist nature of this study were expectancy-value theory (Eccles et al., 1987) and Social Learning Theory (Bandura, 1977). Expectancy-value theory outlines the belief of people motivated to participate in a task when it aligns with their belief and value system (Eccles et al., 1987). Similarly, Social Learning Theory supports viewing behavior as the intertwine product of cognition, behavior, and the environment (Bandura, 1977). The researcher’s worldview embraces the subjective nature of reality and as such, I hold the view that everyone will experience the world in their unique way based on their background and social milieu (Creswell & Poth, 2018).

In reviewing pertinent literature, I highlighted the various adjustment tasks new immigrants to Canada must negotiate to reconcile their cultural origin with that of their new home, Canada (Baidoobonso et al., 2012). The literature review also underscored the heterogenous cultural and spiritual heritage of the Caribbean and shows how spirituality is a unique blend of African and European influence (Reddie, 2018). Caribbean spirituality, however, expresses both a unique and cooperative brand. There is also a close association between Caribbean spirituality and various beliefs about the etiology of diseases. Counseling Caribbean
Immigrants require a thorough spiritual and cultural appraisal of this population (Cullins et al., 2019; Hickling et al., 2013).
CHAPTER THREE: METHODOLOGY

The main goal of this chapter was to outline the methodology used to answer the research questions. The research methodology explored the attitude of church-attending Caribbean-Canadian Christians toward counseling was qualitative and rooted in the phenomenological approach. More specifically, in this section of the proposal, I provide an outline of the study design, research participants, setting, research questions, data collection procedures, data analysis approaches, and the researcher, which outlined the relationship between the researcher and the undertaken study.

Study Design

The study design I used to explore the research topic and questions was qualitative phenomenology. I outline the design in the following way: definition of qualitative research, different qualitative approaches, interpretive paradigms of qualitative research, philosophical assumptions of qualitative research, and phenomenological qualitative research.

Qualitative Research Defined

Qualitative research is an empirically based process that explores research participants’ subjective experiences of a specific phenomenon and organizes generated responses into themes from which summary statements generalize the outcomes of experiences specific to the context of the subjects (Creswell & Poth, 2018; Heppner et al., 2015). Qualitative research is non-numeric. Its main expressions and unfolding process rely on words and descriptions to define contextual or lived experiences (Jackson et al., 2007). The usual progression of a qualitative research project starts with the identification of an analyzable social phenomenon. Next, the researcher gathers data from the participants by creating a medium through which they describe their subjective encounters with the phenomenon. Gathering data reveals the content of the
experience as well as captures the process of revelation. That is, what the participants revealed and how they shared it provides valuable insight into a participant’s experience (Jackson et al., 2007). Each participant has unique experiences driven by their context and circumstances. To understand these experiences, the researcher must elicit rich descriptions of these experiences (Creswell & Poth, 2018; Heppner et al., 2015).

**Qualitative Approaches**

There are five main qualitative approaches described by Creswell and Poth (2018). The brief delineation contextualizes my choice to use a phenomenological approach to conduct this study. These are narrative, case studies, phenomenology, grounded theory study, and ethnographic research. In a narrative study, the researcher documents the experiences of participants from a personal perspective by recalling the history of an experience in a sequential way. The researcher typically enunciates their personal experiences within their social, cultural, familial, and linguistic context (Creswell & Poth, 2018). Case studies focus on a case relative to an experience in their setting. The case may be an individual or a collective group such as an organization. Grounded theory qualitative researchers focus on the identification of a theory that undergirds the common experience of a process. It deals with the explanation of something grounded in common practice and attempts to describe a practice or process that is common to many participants (Creswell & Poth, 2018). In ethnographic studies, the researcher seeks to document shared experiences of a group within their environment. The researcher focuses on a group with a common culture and shared patterns in beliefs, language, and values (Creswell & Poth, 2018). As noted above, this study is qualitative and employed the phenomenological approach. I will discuss this approach later in this chapter. The other qualitative approaches discussed above do not allow for the emergence of the lived experience of the research
participants described in this study. Also, the other approaches do not include the delineation of the lived experiences in such a way that leads to a generalized expression of the attitude of church-attending Caribbean-Canadian Christians toward the phenomenon of counseling.

Interpretive Paradigms

Researchers conduct qualitative studies in the context of interpretive paradigms or frameworks. The main interpretive paradigms are post-positivism, transformative, postmodern, pragmatism, feminist theories, critical and critical race, queer, and disability theories. These paradigms are dealt with in detail in Creswell and Poth (2018). I conducted my research using a social constructivist theoretical framework to inform an interpretive paradigm.

Social constructivism stresses the subjective experiencing and the subsequent derivative meanings of the world based on individualized opinions (Creswell & Poth, 2018). Assessing the resulting understanding of a phenomenon determines whether reports from the participants are a product of the subjective interpretation of an event or experience. The multiplicity of views elicited from participants serve as an acknowledgment of the subjective nature of experiences (Creswell & Poth, 2018). Conceptualizing the subjective understanding of the world results from the context they described. I recognized views and meanings of events or phenomena in the world shaped subjective encounters. These encounters take place within social and historical contexts (Creswell & Poth, 2018). For example, I explored the topic for this research project, the attitude of church-attending Caribbean-Canadian Christians toward counseling, within the historical, cultural, and spiritual heritages of Caribbeans. The social context of Caribbeans and their descendants embraced colonial impressions as well as the ancestral heritage of their African progenitors. The experiences of Caribbean people intersected based on influences that originated in both Europe and Africa. For example, the religious context of
Caribbeans emerged as a unique expression of faith influenced by both African ancestral worship styles as well as the colonial masters. At the same time, however, they built upon their heritage in a way that permitted opportunities for the expressions of unique styles and approaches, which varied from individual to individual, religious profession to religious profession, and from region to region. (Glazier, 2012; Gopaul-Nichol, 1993; Jackson & Naidoo, 2012; Reddie, 2018).

**Philosophical Assumptions**

Arising out of the social constructivist paradigm, I anchored my qualitative research in four main philosophical assumptions. These assumptions provide answers to ontological, epistemological, axiological, and methodological questions (Creswell & Poth, 2018).

**Ontology**

Qualitative researchers reject the notion of the universality of experience, as it pertains to the characterization of a phenomenon. Instead, what constitutes reality relative to a phenomenon is based on the subjective experiences of the participants in the phenomenon. (Creswell & Poth, 2018; Cuthbertson et al., 2020). Therefore, a single phenomenon can elicit as many descriptions as the number of participants experiencing the phenomenon (Cuthbertson et al., 2020). Each person interacts with the world subjectively and, arising out of these subjective interactions are subjective experiences with their own set of meanings and interpretations relative to one’s experience. To understand the reality of a phenomenon, therefore, the researcher must enter the world of the individual and elicit personal descriptions and meanings (Creswell & Poth, 2018). For example, I previously noted how Taggart et al. (2018) described Caribbean norms and values as derivatives of the religious heritage of the region. However, Reddie (2018) suggested the subjective nature of the religious experience of the people, results in the heterogeneous expressions of faith. Transposing Creswell and Poth (2018), the religious phenomenon of the
Caribbean though experienced by many descendants of the Caribbean evokes a multiplicity of descriptions about its meaning.

**Epistemology**

Epistemology deals with the authentication of knowledge or, what constitutes knowledge. Knowledge does not exist as an objective reality but as a construct tied to the subjective experiencing a phenomenon (Creswell & Poth, 2018; Cuthbertson et al., 2020). Knowledge, therefore, reflects what the research subject reports relative to a shared occurrence. As a result of this reporting, the researcher accepts and validates the participant’s account while understanding their perspective of the event as separate from that of the participant. The course of this research project, therefore, allowed for the emergence of the participants’ descriptions to become the authority and determinant of what the phenomenon represented (Creswell & Poth, 2018). The basic approach locates them in the world of the participant where they mined the knowledge relative to the phenomenon (Cuthbertson et al., 2020).

**Axiology**

Because values are central to qualitative inquiries, the process requires the researcher’s recognition of their values as they interface with those of the participants (Creswell & Poth, 2018). As Creswell and Poth (2018) suggested, “in a qualitative study, the inquirers admit the value-laden nature of the study and actively report their values and biases as well as the value-laden nature of information gathered from the field.” (p. 22, e-version) Creswell and Poth (2018) went on to recommend the self-disclosure of the researcher relative to their stance and experience with the phenomenon. As a result, I took care by employing ethical guidelines as I observed compatible procedures as well as during the analysis, which produced the output of the process (Cuthbertson et al., 2020). Hammersley and Traianou (2015) suggested the ethics driving
qualitative research was, “concerned with ‘higher values’, such as self-realization, the common good, or the interests of science, rather than other considerations, such as financial return or social status.” (p. 5).

Methodology

The methodology of this qualitative research emerged in the process, which unfolded within the context of the phenomenon being studied relative to the research participants. The methodology of this qualitative research outlined how I gathered data germane to answering the research questions (Cuthbertson, Robb & Blair, 2020). It began with the delineation of the details of the experience of each participant and then evolved into more generalized themes (Creswell & Poth, 2018). This meant the study moved from the specifics of unique experiences to a more generalized expression of common findings. On this basis, though posited with merit and the declared intention to elicit descriptions of the phenomenon as experienced by the participants, I asked questions in a fluid, not static, manner. They evolved according to the direction the participants took in their description of the phenomenon to elicit the descriptions specific to their experience with the phenomenon (Creswell & Poth, 2018).

Phenomenological Qualitative Research

As noted earlier, qualitative researchers employ different approaches or methodologies, depending on the nature and goal of the research, as they explore the selected topic. I utilized a phenomenological approach/methodology to gather the data for analysis (Heppner et al., 2015). Because the goal of the research study was to understand the subjective experience of the participants in their context, I chose a phenomenological approach. This specific methodology guided me in recognizing the subjective understanding of experiences and meaning making. In other words, the lived experiences of the research participants took center stage and became the
basis from which I concluded contextually (Campbell, 2014). In exploring the evolution of phenomenological processes, I posited a conceptual definition and infused the main tenets.

**Early Beginnings**

Philosopher Edmund Husserl (1859-1938) received the credit for pioneering the theoretical concept of phenomenology. His work became centered as a school of philosophy arising from his logical investigations published between 1900 and 1901. Vagle (2018) determined them as the main driver of Western philosophy. Husserl focused much of his contribution to the field on descriptive/transcendental phenomenology. His philosophical stance stood in contrast to the Cartesian belief, which espoused a duality between the mind/body and the world. Consciousness to Descartes's reposed in the mind, cut off from any conscious interaction with the outside world. “Husserl asserted that the mind was always in relationship with the “object” of its consciousness.” (Vagle, 2018, p. 7). Viewing consciousness, therefore, as the subject complemented by an object of its ruminations. Ruminations result in the meaningfulness of the relationship with the consciously mediated object (Vagle, 2018). Many others followed Husserl in their contributions to the field. Among them was Martin Heidegger (Aspers, 2009). Heidegger concentrated on interpretive phenomenology, also known as hermeneutic phenomenology (Sloan & Bowe, 2014). Alfred Schütz (1899-1959), a Swiss Sociologist, later applied phenomenology to social science (Aspers, 2009).

**Conceptual Definition**

Phenomenology is a scientific approach to research in which the participant determines the meaning of an event. In other words, ascertaining the meaning ascribed to a phenomenon depends on the interpretation of those who experienced it. As Aspers (2009) noted, the meaning of a phenomenon develops from the nature of the interaction the participant describes. This
means any scientific delineation of the phenomenon must rely on the subjective descriptions the participant’s recount. Phenomenologist brackets their assumptions about the world of others, allowing for the unfolding of what the world is, as shared by the participants viewing the phenomenon. Schütz’s version of phenomenology, as applied to social science, accentuates the life world or the natural setting of the individual, which is necessary for understanding how they connect to their world as foundational to their perspectives (Aspers, 2009). Schutz believed the individual developed meaning structures (Sinnzusammenhang) as a process of internal transactions and as logical products of their social setting (Aspers, 2009).

Van Manen (2014) posited phenomenology as an approach to understanding the construction and nature of the meaning of a phenomenon derived from those who lived through it. Or, as Heidegger explained, phenomenon meant, “that which shows itself in itself.” (As cited in van Manen, 2014, p. 27, e-version). Phenomenology allows for access to parts of the hidden world but is discoverable through an exploration of “that which appears.” This means fully understanding a phenomenon or the experience with a phenomenon occurs not from external observations such as a researcher would do in some cases, but from entering the world of the participant through their eyes. This allows the researcher to understand the phenomenon from their vantage point (van Manen, 2014).

Main Tenets

Understanding the explanation of a social phenomenon requires exploring the contextual meaning generated by the research participants. This explanation of a phenomenon is an approach that recognizes truth as socially constructed and varies according to the context and subjective experience of the research participants. An understanding of truth originates within the subjective sphere of the individual and reaches beyond any established objective reality
(Aspers, 2009; Creswell & Poth, 2018). In a sense, a phenomenological approach to qualitative research challenges the assumption that arriving at scientific conclusions requires a positivistic approach, which includes accepting the notion truth exists objectively, outside the individual (Aspers, 2009). Understanding is a key driver of the phenomenological approach to qualitative research. This understanding is an attempt to see the world from the experience and perspective of research participants. What is known about the experience the research question seeks to understand lies with the participants. Unless the researcher connects with them and elicits appropriate responses through questioning, what is real remains hidden, embedded in the subjective (Aspers, 2009; Creswell & Poth, 2018).

**Hermeneutical Phenomenology**

The goal of hermeneutical phenomenology is unearthing the meanings behind a phenomenon beyond a mere subjective description of the occurrence from the participant (Bynum & Varpio, 2018). The three important goals of hermeneutic phenomenology are a) the interpretation of the descriptions of the lived experience disclosed by the research participants, b) the positional disclosure of the researcher’s interaction with the data collection process and analysis, and c) the reflective analysis and reporting of the data (Bynum & Varpio, 2018). The process of data analysis intricately links the experience of the researcher with the phenomenon. This is the root of the reflexive nature of this process, which the researcher generally precipitates based on interest in the phenomenon and personal experiences. Data analysis and interpretation rely on the thoughtfulness of the researcher as they interact with the participant’s description and expressions of the meaning of their experience (Bynum & Varpio, 2018).

The hermeneutical approach that is analogous to qualitative phenomenology is circular in nature. This means there is movement in process, which helps in the understanding of words and
responses as a process of the participant’s context. The researcher proceeds by unearthing explanations of the social phenomenon grounded in the subject’s context (Aspers, 2009). Emerging out of the early work of key developers of phenomenology was a seven-point approach to engaging in research: a) define a research question, b) conduct a preliminary investigation, c) deploy a theory that proffers a scheme of reference, d) identify and study first-order constructs, e) delineate second-order constructs, f) identify unintended effects and g) compare study findings with empirically verified findings in the field (Aspers, 2009).

Over time, van Manen (2014) developed a brand of hermeneutical phenomenology, which emphasized the avoidance of the imposition of the self in a dogmatic way by making the lived experience interpretable and intelligible. While Husserl emphasized descriptions rather than interpretation, phenomenology focuses on both descriptions and interpretation (Van Manen, 2014). Phenomenologists also focus the attention of the researcher on the source of meaning-making. Insights emerge out of an encounter of awe and wonderment about the source of the phenomenon and inevitably lead to musings and questionings, which in themselves become the vehicle that drives the inquiry into the phenomenon as experienced by the one living it (van Manen, 2014).

The process of a hermeneutical phenomenon is not one of following a determined, pre-occurring pattern or order of exploration, but one dictated by the unfolding of the experience. It is a kind of following the money paradigm, in which the journey of the exploration of the meaning of the experience marks what participants reveal about the phenomenon (van Manen, 2014). All this takes place within what van Manen (2014) referred to as reflection and analysis, which occurs in an attitude of epoche, the reduction, and the vocative.
For this study, I employed the hermeneutical phenomenology approach. The goal was to go beyond a mere description of the phenomenon of counseling by Caribbean-Canadian Christians to unearthing the meaning it invoked for the participants (Bynum & Varpio, 2018). Given the meaningfulness of spirituality to the participants, and their historical and cultural context, the hermeneutical approach was relevant in this regard. People from the Caribbean have both personal as well as communal views of the world, shaping them based on their historical and religious heritage. According to this, religion and spirituality play an influential role in how they live their lives. The attitude of church-attending Caribbean Canadian Christians toward counseling drives how they make meaning and sense of their experiences in the world. As Bandura (1979) noted in his Social Learning Theory, human behavior is the product of a conscious process, based on cognition, behavior, and the environment. As these three factors interact, the individual uniquely interprets the world. Using the hermeneutical approach, I sought to understand the world of the research participants and the meaning of the phenomenon of counseling through their eyes.

Participants and Setting

Participants

I accomplished selecting participants for the study using a form of criterion sampling (Creswell & Poth, 2018). The participants I recruited came from local evangelical churches, which had members in their congregation who were Caribbean-Canadians. More specifically, selection for participation was based on choosing participants who were eighteen years and older, born in the Caribbean where they attended church before emigrating to Canada where they continued attending church and had experience with the phenomenon of counseling. I sent out a general invitation asking for volunteers to participate in the research project. Coupled with the
invitations were letters to churches outlining the purpose of the study and the qualifications for participation (please see appendices for a detailed participant recruitment letter of invitation). There were two major Canadian cities with a significant number of Caribbean-Canadians immigrants, Toronto, and Montreal. Along with these were other cities with smaller populations of residents from the Caribbean namely, Edmonton, Calgary, and Vancouver. (Statistics Canada, 2019). A significant number of evangelical churches in well-populated and smaller population cities had members who identified as Caribbean-Canadians.

I selected qualified participants who expressed interest and met the research criteria in relation to experiencing the phenomenon of counseling and willingness to describe them (Creswell & Poth, 2018). After making many calls to churches and sending out several recruitment letters through pastors I hoped to attract interest beyond the 12 participants who met the study requirements. The researcher intended to seek to choose participants based on gender and age as follows: four males and four females, each gender group consisting of two participants ages 18-40 and two above 40 years of age. My main goal was to elicit descriptions of the phenomenon under consideration from participants who can experientially speak to it (Creswell & Poth, 2018). The desire to deepen the understanding of the phenomenon of counseling from their descriptions drove my desire to select participants with broader representation. Choosing participants representative of different demographic markers would also help to add multiple perspectives from various viewpoints of the phenomenon of counseling. This approach to selecting participants did not materialize, so leaving me to use the 12 available participants who fit the study criteria.
Setting

I conducted the study using Microsoft Teams, which allowed for live video and audio interaction with the research participants. Using Microsoft Teams also allowed for the observation of each participant’s appearance as well as their reactions throughout the interview. The participants who were within reach for face-to-face interviews also opted to use Microsoft Teams for their interviews and e-mail for follow-up interactions. The decision to use Microsoft teams for these participants was based on COVID-19 health protocols, which limited physical interactions with participants. In some cases, participants were located across the country, making traveling to them difficult. I combined videoconferencing through the Microsoft Teams platform with e-mail exchanges, to distribute questions, as well as responding to follow-up clarifications and feedback. Interacting with the participants through a medium, which facilitated visual observations also helped build rapport, leading to establishing relationships with them, which in turn facilitated a smoother interview process (Creswell & Poth, 2018).

Research Questions

Along with its significance and historical context, the increasing number of immigrants from the Caribbean to Canada leads to an increase in the number of people needing to adjust to a new country that is culturally, religiously, and physically different from their home country. While these immigrants may benefit from counseling services, little was known about this population’s attitudes and opinions about counseling, which was germane to effectively reaching them with appropriate social services. My goal was to enter the world of the participants and develop a better understanding of the attitudes of church-attending Caribbean-Canadian Christians toward counseling. The following research questions formed the basis for the
exploration of the attitude of church-attending Caribbean-Canadian Christians toward counseling:

RQ1. What is the lived experience of Caribbean-Canadian Christians who have experienced counseling?

RQ2. What meanings and beliefs do Caribbean-Canadian Christians ascribe to counseling?

RQ3. How do Caribbean-Canadian Christians describe the relevance of counseling to them when faced with needs that might necessitate them seeking help?

To answer these research questions, I invited participants to engage in a semi-structured interview. A semi-structured interview is one in which the researcher poses a set of prepared questions to each participant, and follow-up with open-ended inquiries designed to get the participant to describe their encounter and interaction with the phenomenon of counseling by moving the interview into the realm of their individual experiences (Creswell & Poth, 2018). The use of semi-structured interviews allows the researcher to follow the lead of the participants and ask questions that open the opportunity to keep the focus of the research on the participants and their experiences (Creswell & Poth, 2018). I facilitated the exploration of the research questions by posing 10 questions designed to prompt the participants to share freely in describing their experience with emigrating to Canada and the adjustment tasks they encountered during the process (see Appendix A). The research questions I posed also represented two important approaches to the interview process. First, they laid a foundation necessary for evoking useful descriptions from the participants, which also facilitated further explorations into their experience with the phenomenon of counseling. Second, I designed the questions to focus the
interview and keep it within the parameters of the intended objective of answering the research questions (Creswell & Poth, 2018).

**Data Collection Procedure and Analysis**

In the following section, I detail how I collected and analyzed the data. I also describe how I established validity, along with ethical guidelines I followed during the collection and analysis processes.

**Data Collection**

In conducting the study, I used two main methods of collection procedures to accumulate data on the attitudes of church-attending Caribbean-Canadian Christians toward counseling. The methods I used were interviews and member checking.

**Interviews**

I facilitated interviews by building rapport to establish a relationship with the participants and move the interview process forward (Creswell & Poth, 2018). As part of the 60-minute interview process, rapport-building laid a foundation before launching into the descriptions of each participant who experienced the phenomenon of counseling. I also employed a process of revisiting descriptions from the participants as a way of deepening the understanding of themes and meanings (Creswell & Poth, 2018; Sargeant, 2012). The main approach to the interview was the posing of open-ended questions to elicit descriptions of the lived experience of the participants with the phenomenon of counseling (Creswell & Poth, 2018). A very important component of the interview process was my use of reflective listening. It consisted of not only hearing what the research participants shared in response to the questions but also responding to the participant by reflecting and recounting the meaning of what I heard (Miller & Rollnick, 2013).
**Member Checking**

I offered each participant the opportunity to share any reflections or thoughts they had on the interview through e-mail. Member checking adds validity to the findings of research studies. Each research participant received the major themes delineated from their transcript to provide their feedback. The purpose of this was to elicit further insights into the lived experience of each participant with counseling. This exercise required approximately 20-30 minutes of each participant’s time (Creswell & Poth, 2018).

**Data Analysis**

This section contains information on the steps I took during the analysis of the data, how I managed coding, how memoing unfolded, and the reflexivity of the researcher.

**Steps in the Process**

I collected the initial data by taping and transcribing the content shared during the semi-structured interviews with each research participant. The meetings lasted approximately 60 minutes. The interview consisted of open-ended questions that facilitated the telling of the participants’ lived experiences with counseling. With the participant's permission, I recorded the interviews, saved them to my computer, and then transcribed their words into text. From there, I carefully read the transcriptions to ensure the text matched the recording while also deepening my understanding of the responses. Once completed, I applied a system of coding to the transcribed information (Creswell & Poth, 2018). A whole-part-whole method formed the major approach to the data analysis. This consisted of choosing a section from the whole and then analyzing it to see how it carried through the interview data as representative of the significant message of the whole data. The goal was to identify parts of the data that constituted significant meaning as a reflection of the whole. Steps in the process involved a concentrated and focused
reading of the material to begin the conceptualization of the phenomenon as a complete whole
told by the text. The purpose of this was to build familiarity with the material (Vagle, 2018).

A second step as proposed by Vagle (2018) was a line-by-line reading of the data
material, accompanied by note-taking and marginal notations. This process was aided by positing
questions about how the participants might be viewing phrases and responses as the meaning of
the phenomenon. During this process, it was important for me to stay aware of my reactions and
impositions on the participant’s lived experience and keep this in mind as I moved forward. In
other words, personal reflections produced nuanced awareness and acknowledgment of personal
responses (Vagle, 2018). The third step in the data analysis consisted of a repetition of the
second step with the manuscripts from the other participants. The marginal questions served as
follow-up markers for initial meanings that might hint at the meaning of the phenomenon to the
participant (Vagle, 2018).

Step four involved a second line-by-line reading in which I articulated the hinted
meanings in the previous two steps and marked each for follow-up. This step also included
isolating the parts of each transcript I believed constituted the meaning of the phenomenon and
believed required further development by the participant in collaboration with myself, as the
researcher (Vagle, 2018). Step five involved the third line-by-line reading which I undertook for
the articulation of analytic thoughts about each part. I repeated this step for each participant
(Vagle, 2018). In step six, cross-referencing for all the manuscripts from the participants took
place, which captured and identified emerging themes. I then assigned a title to each theme
(Vagle, 2018).
Coding

Coding as proposed by Creswell and Poth (2018) also formed an important part of the data analysis process after I transcribed, and read, and reread the interviews. Coding is the process I used to organize the data into meaningful segments and assign names to the segments. This process of coding enabled me to break down data into identifiable areas that created a platform from which to launch into further explorations of the lived experiences of the participants. Also, statements in the participant’s discourse in response to their description of the lived experience contained textual data or experiential data requiring conceptual arrangement (Sloan & Bowe, 2014). Keeping a coding system that included outlining labels and descriptions also helped to track the coding process and avoid the creation of competing codes for similar categories (Creswell & Poth, 2018).

Next, I combined the identified codes into broader categories or themes. After examining the text that expressed something meaningful, I assigned thematic names to the discourse. Themes represented the phenomenon because they gave initial hints of speaking directly to thoughts containing meanings or attributions of the lived phenomenon from the perspective of the participant (Sloane & Bowe, 2014). Once I identified the themes of the discourse, I outlined descriptions of what and how the participants reported their experiences. From this, I wrote a composite description of the phenomenon (Creswell & Poth, 2018). The goal was to arrive at the essence of the meaning of phenomenal themes or, themes associated with the phenomenon of counseling as the participants disclosed their encounters with the phenomenon and their subjective perspectives of the lived experience. This process also bolstered a system of reviewing and re-reviewing data to consolidate codes into themes (Creswell & Poth, 2018).
Memoing

Throughout the process of data analysis, I used memoing to keep the pace of the development of themes as well as leave a useful audit trail for validating the study (Creswell & Poth, 2018). More precisely, I developed a system of memoing, which facilitated the identification of initial codes and ideas across different participant files (Creswell & Poth, 2018). As I analyzed the data by coding leading to assigning names to the themes to arrive at a composite description of the phenomenon of counseling. I shared the identified themes with the participants to assure my interpretation reflected their lived experiences while also including their voice in the findings (Creswell & Poth, 2018). This process also increased the reliability of the study because it addressed the question of whose experience contributed to the study. It also helped remove my imposition on the outcomes of the study and ensured my experience with the phenomenon remained bracketed throughout the process (Creswell & Poth, 2018).

Trustworthiness

During the research process, I recognized how I brought my own set of values, knowledge, and understanding of the phenomenon of counseling to the research process (Heppner et al., 2015). I tried to ensure the focus of the research corresponded to the research question as well as truthfully sought to reflect the responses of the research participants in a way that honored their experience with the phenomenon. In seeking feedback from research participants about the themes they identified, I sought to ensure the experiences of the participants received precedence and reflected clearly in any reporting. This approach to maintaining trustworthiness arose out of the researcher’s recognition that subjectivity can affect confidence in the findings and interfere with the interpretation of the data sourced from the participants (Jackson II et al., 2007).
Ethics

During the research process, I adhered to all ethical guidelines pertaining to the collection and use of information from the participants. Measures to protect identity included using pseudonyms and removing any biographical and identifying information (Creswell & Poth, 2018). I sought the participants’ input in the findings of the research during the data analysis and interpretation as a way of ensuring transparency and honesty in the reporting of outcomes of the study. I clearly outlined all relevant and useful information to assist participants in granting consent prior to beginning the interview (Creswell & Poth, 2018). I stored the participants’ information and data in a way that protected them from violation of safety, privacy, and security (Creswell & Poth, 2018). The researcher did not identify any harmful outcomes to participants during the research process. No issues arose during the interviewing process that warranted referrals to appropriate social and religious services.

The Researcher and the Research

This section looks at the relationship between the researcher and the research study that I undertook. It covers reflexivity, the researcher’s worldview, and its relationship to the phenomenon studied.

Reflexivity

Despite the attempts at bracketing, I recognized I was unable to divest myself of the research process. In other words, I approached the research project from my epistemological stance. Recognizing my beliefs about what constituted reality and how reality can be known, influenced my interactions. Akin to this, my beliefs convey my cultural and social characteristics. My interactions with the participants could not remain neutral. As a way of
managing this, I constantly reflected on my position throughout the research process as these positions related to the objectivity and outcomes of the study (Creswell & Poth, 2018).

Disclosure of my position concerning the phenomenon under investigation importantly added to my credibility as well as the outcomes of the study and attest to my attempts for transparency. Openness about my connection to the phenomenon under consideration was necessary for guiding how I approached the descriptions of the participants concerning their encounters with the phenomenon of counseling. I remained aware and disclosed any personal experiences and characteristics relating to the outcomes of the study as a way of ensuring I related the perspectives of the participants and took steps to address personal characteristics that might hinder the process.

Consistent with my beliefs about the importance of personal transparency during the research process, the philosophical assumptions that led to my choice of this qualitative, phenomenological research were located within ontological, epistemological, axiological, and methodological descriptions. I embrace an ontological view of reality in which individuals construct their views of reality based on their subjective experience with the world and their social context. Based on experience and individual context, a single phenomenon potentially presents itself in a multiplicity of ways (Creswell & Poth, 2018; Yucel 2018). Consequently, the reality of a phenomenon is research participant-bound and therefore accentuated as knowledge or what can be known about a phenomenon is what the research participants reveal relative to their experience with the phenomenon (Cresswell & Poth, 2018; Yucel, 2018).

Based on their subjective experience and understanding of what constitutes reality and knowledge, both the researcher and the research participant bring together in their interaction a dynamic in which there is a recreation of the notion of ‘multiplicity’ in terms of their values.
This causes them to negotiate and honor their respective values (Creswell & Poth, 2018). To understand reality, what counts as knowledge, and the derived values, the methodological inquiry into a participant’s world requires an inductive approach, in which theorization about the characteristics of a phenomenon emerges after an exploration into the participant’s world (Creswell & Poth, 2018).

**Researcher’s Worldview**

In conducting this study, I processed my worldview and explained the process I followed in the description below. No one interacts with the world from a neutral position. Every human being has a set of values, beliefs, and ideals through which they view and interact with the world, thus forming their worldview (Creswell & Poth, 2018). If a person believes the world came into existence by chance through a series of purposeless events, they may view the world through the lens of Darwinism. If a person believes in the biblical account of the origin of the world and life, they may view the world through the lens of creationism. I have come to view the world and interact based on my Christian worldview, which espouses God as Creator and Jesus as the savior of the world.

Consequently, the worldview I hold includes the belief in an objective reality especially as the Bible defines reality. Understanding of this objective reality is unfolding, however, and, as the Epistle posits, “Now we see things imperfectly, like puzzling reflections in a mirror, but then we will see everything with perfect clarity. All that I know now is partial and incomplete, but then I will know everything completely, just as God now knows me completely.” (I Corinthians 13: 12, NLT). Because of the multiplicity of contexts in which people live, they understand truths subjectively and keep unfolding with the transformation and expansion of our contexts. That is, our contexts are temporal and fluid at best and continuously evolve into more complex
experiences and understanding of the world (Merriam et al., 2007). I believe people make meaning of the world based on their subjective experiences and because these experiences vary from person to person, the result is the creation of a worldview homed in the milieu of context (Creswell & Poth, 2018; Yucel, 2018).

**Relationship to the Phenomenon Studied.** The cradle of my cultural identity links to early experiences growing up on the Caribbean Island of Jamaica. My ancestry reflects dual identities with one half from Africa and the other from Europe. My father’s family has its roots purely in Africa while my mother’s family is a mixture of African and Scottish heritage. This heritage reflects the coming together of two worlds, which in the context of the Caribbean presented as fraught with opposing stories of survival. My upbringing reflected folklore and stories, along with the social and religious legacy resulting from slavery as well as the legacy of the English dominance in the Caribbean in the early years. This positioned me in the center of the phenomenon that is the preposition of this study.

I am, however, uniquely because of my journey and how I made sense of early experiences in the Caribbean. My qualification to presuppose and authenticate Caribbean experiences, while having some amount of communally shared context, cannot represent the final authority on the attitudes of church-attending Caribbean-Canadian Christians toward counseling. While I am Caribbean, Canadian, and Christian, I can only fully describe my experiences with counseling. Furthermore, my attitude toward counseling as a Christian contextualizes my professional training and experience. As an ordained pastor who is also a licensed family therapist, I spent a substantial amount of time studying and practicing in these two areas. Arising out of this, I developed a belief, which espouses a mutual relationship
between being Christian and counseling. That is, I believe the two can come together in mutually beneficial efforts.

The disclosure of my relationship to the phenomenon under investigation is an attempt to declare a personal position so I can suspend my personal beliefs and experiences to focus on the participants and allow them to share their descriptions free of researcher interference and biases. It is an attempt to disclose who I am as a way of ensuring the outcome of the research only reflects the lived experiences of the participants (Creswell & Poth, 2018).

**Summary**

My goal in carrying out this qualitative research was to explore the attitude of 12 church-attending Caribbean-Canadian Christians toward counseling. I employed a qualitative phenomenological approach to explore the research questions with the participants. Using semi-structured interviews with the research participants, I collected data via Microsoft Teams and arranged their responses into major themes through the phenomenological hermeneutical approach to data analysis. I posited summary statements about the participants’ experiences with the phenomenon. To establish the trustworthiness of the study, I maintained a focus on the analysis of the data reflecting the responses to the research question and the experiences of the participants. I instituted ethical guidelines germane to the process and outcomes throughout the process of the study. To increase credibility and transparency in the data analysis process, the participants received the opportunity to sign off on the themes I identified during the data analysis.

I share a similar cultural and religious heritage with the participants but embraced a unique belief in the reciprocal coexistence of spirituality and counseling. Revealing my stance
relative to the research topic assisted in suspending my views and focus solely on the
descriptions of the participants (Creswell & Poth, 2018).
CHAPTER FOUR: RESULTS

The purpose of this phenomenological study was to describe the attitude of church-attending Caribbean-Canadian Christians toward counseling. This chapter contains an overview of the research study, the results, and a brief chapter summary.

Overview

The overview of this chapter describes the study participants and data collection methods.

Study Participants

For this study, I interviewed 12 practicing, Bible-believing, church-attending Caribbean Canadian Christian participants to understand their lived experiences with emigrating to Canada and to explore their attitude toward counseling. These participants originated from Jamaica, Trinidad and Tobago, St. Vincent, and Guyana. They presently reside in Toronto, Calgary, Montreal, Edmonton, and Vancouver. Of the 12 participants, nine identified as female and three male, all ranged between ages 30- and 75-year-old and living in Canada anywhere from 4 to 47 years. Eight of the participants reported they were married with families while four identified as single. One single person had grown children. The research participants came to Canada to begin a new life for reasons including education, reuniting with family, and seeking a better standard of living. All the participants except for two retirees, identified as gainfully employed. The participants were generally on time for their interviews, had pleasant appearances, relaxed, and seemed eager to engage. The participants shared liberally without much prompting. To maintain confidentiality and privacy, I assigned each participant a pseudonym and referenced them throughout this chapter.
Data Collection

I conducted approximately one-hour semi-structured interviews via Microsoft Teams with video and audio recording. To observe COVID-19 health protocols limiting travel, I selected this method as it also honored the preferences of the participants. The technology worked well, and no apparent issues affected the outcomes of the interview process. Three major research questions formed the basis of the interview with each participant.

RQ1. What is the lived experience of church-attending Caribbean-Canadian Christians who have experienced counseling?

RQ2. What meanings and beliefs do church-attending Caribbean-Canadian Christians ascribe to counseling?

RQ3. How do church-attending Caribbean-Canadian Christians describe the relevance of counseling to them when faced with needs that might necessitate them seeking help?

The interviews consisted of open-ended questions to facilitate the telling of the participants’ lived experiences and answer the guiding research questions. I also asked follow-up questions in response to answers needing further exploration.

During the interviews, there were several moments when the lived experiences the research participants shared resonated with me because of having similar experiences. During those moments, I managed my feelings by mentally focusing and reminding myself the interviews were not about me and I needed to stay focused on the participants’ responses. This sometimes meant I would briefly smile and refocus on what the person sharing. There were also moments after the first few interviews when I linked and identified similarities between what the
current participant shared with other statements made during previous interviews. Feeling distracted reinforced my need to refocus on the interview participant.

At the end of each interview, I informed each participant they could provide reflections on the interview via email if they felt they needed to do so. None of the participants chose to offer additional information. I also offered them the opportunity to provide feedback on specific themes they highlighted during the data analysis of each transcript. All 12 participants responded to their emails by acknowledging the themes I identified reflected their interview responses. I recorded and saved the data collected through the interviews on my personal computer and then transcribed the content into text. Following the initial transcription, I carefully reviewed the data simultaneously with the video interviews to ensure the transcribed text matched the recording, as well as to deepen my understanding of the participants’ responses. I then deemed the data was ready for analysis.

Results

Results of this research study were based on responses to the following three research questions:

RQ1. What is the lived experience of church-attending Caribbean-Canadian Christians who have experienced counseling?

RQ2. What meanings and beliefs do church-attending Caribbean-Canadian Christians ascribe to counseling?

RQ3. How do Caribbean-Canadian Christians describe the relevance of counseling to them when faced with needs that might necessitate them seeking help?

There were three major themes and one disparate theme that emerged from the analysis of the participants’ responses to the research questions. These were:
1. The Christian beliefs of Caribbean-Canadian church-attending Christians hold a primal place in their lives and are the standard by which they judge all meaningful activities.

2. Belonging to a community whose members bear similarities in cultural and historical origin, who hold to and practice similar Christian beliefs, is central to Caribbean-Canadian church-attending Christians.

3. Caribbean-Canadian church-attending Christians have a positive attitude toward counseling when it honors the primacy of their Christian beliefs and is delivered in the context of the meaning of community to them.

4. Caribbean-Canadian Christians recognize there are beliefs in the wider Caribbean community that foster a negative attitude toward counseling. Caribbean-Canadian Christians remain deeply connected to their Christian beliefs. Consequently, the beginning point of their adjustment to Canada is connecting to the community to navigate their new country and to foster the practice of their Christian beliefs. As a result, conceptualizing the attitude of church-attending Caribbean-Canadian Christians toward counseling rests within the framework of the meaning of their Christian beliefs and belonging to a community with a shared culture, history, and Christian values. Therefore, the meaning of Christian beliefs, belonging to a community, and counseling do not represent stand-alone themes but ones that form a symbiotic construction in which each maintains the other through an interconnected relationship. This means the attitude of church-attending Caribbean-Canadian Christians toward counseling requires delineation in the context of the meaning of their Christian beliefs and the meaning of belonging to a community. Nevertheless, to better understand the attitude of church-attending Caribbean-Canadian Christians toward counseling, the meaning of Christian beliefs and the meaning of belonging to the community must also receive separate
delineation to show how the two factors come together to contextualize what counseling means to them. In other words, viewing the attitude of church-attending Caribbean-Canadian Christians toward counseling includes considering the consequential result of their Christian beliefs and what belonging to a homogenous community means to them. In this sense, they describe the community as the connections made with others through ethnic identity or shared experiences with someone who followed a similar journey from the Caribbean to Canada.

**The Primacy of Christian Beliefs**

The participants expressed the meaning of Christian beliefs in how they described its primacy and used it as a resource during their adjustment to Canada.

**Descriptions**

There was a unanimous appraisal of the primal place Christian beliefs held in the lives of church-attending Caribbean-Canadian Christians. It is the center around which all other aspects of their lives coalesce. To the participants, their Christian beliefs are more than a worldview. They represent a state of being-something they become as evidenced by how these Christian beliefs remain foundational to the way they interact with the world and govern how they enter relationships with others. The participants appraised every aspect of life to determine its compatibility with their Christian beliefs and then navigated accordingly. As such, they subject everything to this reference point to ascertain its value and worthiness. The Christian beliefs of the participants were therefore boundaries of life within which every experience fit. This became a measure of the worthiness of each element of their lives. The whole life and decisions of the participants reflected their Christian beliefs ensuring their life choices mirrored their belief system. Participants enunciated several different ways they expressed the role of Christian beliefs. For example, Gladys noted:
Oh wow! Honestly, I have to say it is definitely very, very, very, very, very important … so it definitely navigated my life where I had periods that I would push myself to certain limits, but I, I definitely had barriers and grounds where I’m like, I'm not crossing lest, because, I already know that this is the consequences from what I'm taught as a teenager or young girl growing up in the church. So definitely navigated my life throughout.

Tom stated, “So, I know if I divert from the tenets I wanna live by, it's gonna affect me by derailing me from my real goal.” In summing up the primacy of Christian beliefs to the participants, Sue shared:

My Christian beliefs directly impact my world. I think I am who I am because I am a Christian. I cannot, I do not necessarily separate it, the choices I make, what I do. I think how I react is directly related to why I am and whose I am.

What appeared in the descriptions above was how the participants cast the practice of their Christian beliefs as central to their views of the world and their functioning both in their everyday life as well as in how they interact with the world. It is an arrangement in which the world conforms to their Christian beliefs rather than their Christian beliefs conforming to the world. Whatever the event or venture, the research participants keenly ensured their activities mirror the Christian beliefs they hold.

**Christian Beliefs as a Resource**

The descriptions of the primacy of the role Christian beliefs play in the life of church-attending Caribbean-Canadian Christians also determined how they responded to their adjustment tasks. They often employed their reliance on God’s leading and prayer to get them through any challenges they faced. Carol noted:
I, I actually started to build a relationship with God when I came here and I felt like I
needed it. I needed it more at that time, but I don't know if that's why, you know, at that
time I started to have the desire to know more. That relationship with God, so I kind of
started then and I kind of leaned on him a lot. There were times when you know I would
talk to him and so on. If something was bothering me, it's like it became or, He became
more real to me. You know that outfit being just 'cause I went to church all my life, I
became a Christian when I was 14. So, it kind of felt like it was just me.

One notable aspect of adjusting to Canada the participants highlighted included how it got lonely
and difficult at times causing them to feel frustrated and challenged. Turning to God through
prayer or claiming the promises of scripture helped them to endure those difficult days. For these
participants, turning to God and their Christian beliefs, especially in times of challenges,
represented the first line of attempting to resolve their situations.

**The Centrality of Belonging to Community**

The participants reported the church community reinforced their Christian beliefs as well
as provided an outlet for them to participate in the community through shared values. As Joy put
it, “I am very much involved in church, and I love being involved in church life as it keeps me
grounded.” The church community, therefore, served as a place to belong as well as a resource to
navigating the wider community.

**A Place to Belong**

For many church-attending Caribbean-Canadian Christians, the church served as the first
task of adjustment, as well as the first point of contact to continue pursuing their Christian beliefs
and connect with a community that shared their values. As Betty noted, “… I got into church
immediately. I, I realize living here, I cannot come here and not live a Christlike life.” Betty
went on to describe how she connected with a faith community. “I made friends from the church. So, all my friends were people at church. My whole social encounters were with brothers and sisters from the church. I did not have outside friends.” For Betty and the other participants, the identification of a church community with similar values comforted them as it created opportunities for forging friendships and an outlet for involvement in the life of the church and its various activities. As Betty went on to state, “… the church was one of the biggest influences I would say in kind of helping us to settle here and feeling at home and comfortable.” For the participants, the church community constituted a home away from home. The connections made with others within the church community were meaningful and valuable as they provided them with a community, which reflected their concept and understanding of what it means to feel at home in a new country.

A sense of community and the ability to identify with others who share their ethnic or regional origin was very important to the participants. The value of community or its role in helping the immigrants navigate their new life in Canada they defined not so much by contiguous boundaries within which interactions take place but by belonging to a group drawn together by shared ethnicity and experiences. This community emerges not by a conscious process of exclusion of all others but consequentially by the ability of its members to create an atmosphere of belonging based on certain sets of factors, chief among which is the ability of the members to provide for each other connections that espouse their Christian beliefs and address many of their spiritual, social, and emotional needs. As earlier noted, ethnic identity was important in providing a sense of belonging for the participants. While other churches with ethnic identities different than those of the participants provided a more limited sense of belonging. Suzy amplified this point. While she found a local church community on the second
attempt after arriving in Canada. She described the local church in a limited way in terms of its ability to provide a sense of belonging to a community. When I asked Suzy about the differences between the first church and the second church she attended after arriving in Canada, she identified the second church as being different from the first one she attended for the following reasons:

Uhm, I, socially, if that's what we're talking, so that we have a community now that we can relate to. That kind of adjustment in, you know, I guess they became our spiritual family, so to speak. And then what was also important for us is that the kids had other kids that they could play with and relate to, so I think that's the role that the church community played.

For Suzy, while the first church community her family joined provided a place to feel belonged, this was not complete in that the ethnic origin and shared experiences of its members did not reflect that of Suzy and her family. Two different meanings of community emerged for Suzy, a community that may welcome and receptively embrace new members and a community that bears certain similarities to Suzy and her family, which optimized their sense of belonging. This experience by Suzy epitomized the general expressions of the rest of the participants around what it means to belong to a community. Such community may also include family members who lived in Canada longer than the research participants and who played a role in helping them during their adjustment phase. Sue further demonstrated this by stating:

And as you know, Jamaican immigrants make up the majority of people in terms of Black immigrants in Toronto. And so, it was also predominantly Jamaican, and so to be honest, I found my little niche away from home and, but because of the moral principles of the
church, it gave me guidance, it gave me structure, give me a sense of self. It gave me a sense of identity and I just thank God for that.

It is this sense of identity described by Sue that links to feelings of belonging to a church community with identical ideals and Christian beliefs that gave the participants a sense of identity in a new country of people with heterogeneous identities. Therefore, the participants upon arriving in Canada, sought out community, particularly a church community, which offered some amount of homogenous identity in terms of ethnicity, cultural association, and Christian beliefs. Tom explained this homogeneous identity in relation to the church community in this way, “… we share the same faith. We are all speaking the same language so there wasn’t any much of a difference in the transition process.” The thought expressed by Tom was also reminiscent of the overall agreement on the role the church community played in creating a place of common experience and association for the participants. Speaking the same language Tom referenced was a common idea of the participants also. It expressed the notion of feeling at home because of the connection to people whom I can understand and who understand me. This was not an idea relegated to the experiences of the participants in their faith community, but one also associated with their attitude toward counseling, as I will describe later in this chapter.

The Church as a Community Resource

Belonging to a community of people with a similar journey and a similar story who can help its members navigate the wider community and help the members feel a sense of belonging emerged as very meaningful to the participants. The idea of the meaning and importance of community became more pronounced when the participants identified a church fellowship that not only espoused their Christian ideals but was also comprised of members who took similar
paths to Canada as themselves. They valued those who helped them interpret and navigate the wider community.

Whether it is the list of adjustment tasks like job hunting, locating important service outlets, finding stores that sold Caribbean foods or, knowing how to get around the city, the church community was instrumental in helping its members address their needs. The church community played a major role in the adjustment period for the participants by creating an atmosphere where they could form friendships with people who shared a similar culture. This enhanced socialization created a bridge to understanding and navigating the wider society. The church was therefore the major community resource that provided for social needs as well as information necessary for the navigation of the broader society. In responding to a question about utilizing a newcomers’ center in the community, Betty explained:

They had that, but I never, I never went to it. Because, at my church also, my church, what, people in the church give you information. And they would help you get what you need. So, my church played a big role in my life here, because whatever information I need my church, like I needed to learn French, my church had French classes so, I did not have to go to the community ones.

Connecting to a church community for the participants also meant receiving support and having needs fulfilled when deficits became challenging. For the research participants, their social interactions were highly concentrated within their church community. The cultural connections they made at church helped them to interpret the landscape of their new society. Similarities in ethnic association were also important in providing them with information and the identification of important services in the community. Lisa described how the church community
served as a bridge for Caribbean-Canadian church-attending Christians to the wider community especially at the adjustment phase of their move to Canada:

So, we were in temporary residence sharing with someone I'd never known, who wasn't a Christian by any sense of the word. So, that was a situation I had to deal with, and I knew nothing about Canada. I do not speak French. I did not know how to find a residence, to find an apartment. I knew no one who knew anything about it. And secondly, I'm diabetic and I needed insulin supplies and did not know how to get that. So, before I think I had about a month before my supplies are running out. I prayed about it and the Lord impressed me to call my church pastor. So, I called my pastor and he directed me to a sister of the church who he said is the counselor of the Church and is she guided me as to where I would obtain my supplies.

Gladys provided another example of the church playing the role of a bridge to the wider community:

Definitely the church played a big role in sort of telling them where they can go and where they can get help. My sisters were looking to get their driver’s license, so they introduced them to persons that would teach them to drive and driving school and where to find the study book material. So, it was definitely helpful to navigate in the new system of what is available to us here. And my mom was a nurse and she's working all the time. My stepfather, he was a welder, so he was working all the time. So, most of those things that we needed I think were kind of provided by the church. They stepped in to provide those sort of fluff that we needed in the time that we were here and was totally unaware of.
While the participants actively participated in the life of the wider community it was the church community that gave them a sense of belonging and satisfaction from identifying with people with whom they share common beliefs and values and acted as the gateway to connect the research participants to important resources. However, connecting to the wider community preceded participants feeling a sense of belonging and being at home in their church community before they trusted the church members to connect them to the wider community. Dick expressed while the church was the first point of belonging to a community, it did not play a role in helping to navigate the entire community. This church community membership shared ethnicities different from that of the participant.

I can say they were supportive, but I can’t remember ever taking advice or direction from them in the community… My support family, which was my aunt at that time, she knew a lot of people, so to speak, so in every question that I would have or ask she could put me on to someone who was a lawyer, who was, you know, everything that I needed. She kind of pointed me that direction and it just made the transition easier.

Positive Attitude Toward Counseling

The participants had a positive attitude toward counseling, which they revealed in their assessment of the importance of the service. They connected their definition of counseling and contextualized the definition of counseling with the meaning of spirituality and community.

Assessment of Importance

There was consensus among the participants that counseling was an important activity and relevant to healthy functioning. In embracing counseling, they acknowledged its efficacious value. The following expressions from Lisa encapsulated the overall sentiment of the participants regarding the importance of counseling, “Basically, I think it is necessary. Sometimes I don’t
think there's any conflict with my religious belief. I don't think so, because there must be times when people need emotional or psychological support…” The participants did not describe any asynchronous relationship between their Christian beliefs and participating in counseling. They articulated the importance of counseling while noting that instead of it contravening their Christian beliefs it is an added resource to prayer and other spiritual activities. The participants, however, embraced counseling in the context of holistic development of the individual in related activities such as reading of scripture, prayer, listening to a sermon, and counseling work in a synchronous manner to provide an outcome, which addresses the psychosocial needs of the whole person.

**Definition of Counseling**

The definition of counseling articulated by the research participants reflected similarity in the understanding of the general meaning of counseling. The research participants, however, articulated their understanding of counseling within a framework of formality. They designated formal counseling by going to a trained professional to work on issues contextualized within the expressed importance of community. Many defined community to mean family, association with someone of similar ethnicity with whom one has formed a bond and of more significance, the church community. Harry and Carol’s definitions of counseling conveyed the general idea that constituted the definitions of counseling from a formal and informal perspective. Harry defined counseling as:

… speaking with, with somebody who is, who is, somebody who is trained uh, with, with the view to trying to help you figure out issues, work out problems that you might encounter in your life or, uh, or generally just, just being able to equip yourself and gain
some insights from a trained person in terms of equipping yourself to deal with life and help them make your situations better or even make yourself better.

For Carol, counseling represented:

… a form of guidance in the area that you know you might be, uhm, maybe struggling with a certain issue or, you know, having trouble getting understanding or uhm, in some area that you need help in making decision or just help in understanding certain things.

**Christian Beliefs and Church Community Context**

While the participants posited definitions of counseling that encapsulated its working principles, in developing the theme of counseling, they pivoted to descriptions that conformed to their Christian beliefs as well as the meaning of community to them. For these participants, it is not the what of counseling or the lack of belief in its importance but the who and the how of counseling that gave it saliency. The who deals with the predominantly expressed desire they preferred when or if engaged with counseling would be with a Christian counselor or someone fully apprised of their Christian beliefs and willing to honor these beliefs in the process of counseling. The how of counseling focused on the broadening of the definition of counseling to include meaningful exchanges that take place within the family and community. In this broadening of the definition of counseling, the salubrious value of the socialization and spiritual exchanges that take place within the church community received credence. The participants directly linked the definitions of counseling and the descriptions of the exchanges within the church community they appraised as counseling. While the participants had a working knowledge of what counseling represented, and who offers counseling, they went on to contextualize it to the tenets of their Christian beliefs and the value of the church community to
them as a place to feel belonged. The definitions of counseling supplied by the participants were practicalized in a way that mirrored their personal beliefs about their Christian beliefs and the value of the church community to them. Tom demonstrated this in his description of his experience with counseling:

   I do meet with people from time to time who I share with, who I encourage, and try to mold and foster… it does not have to be formal. It could be an informal setting. So, it could be a phone call or, it could be a sit-down. It doesn’t necessarily have to be in an office. You could be out at the park or somewhere else where you just sit and talk and share once there is enough privacy.

Sue also centered her definition of counseling around the spiritual and social contexts of her church community:

   The informal counseling that occurs at church through individuals who speak to you, so they're not formally trained, but informally, I think there was guidance given. Yeah, I mean even the sermons, I mean for me that was some level of counsel you get every Sabbath when you go to church. And when you sit at those lunches and you're speaking to a cross-section of people who have been here, and who have been through things you'll learn from those meetings informally. So, counseling was given, but not in the, I'm gonna say, not in the traditional dogmatic way of there being a counselor. But there is an informal currency of counseling I think that is even more important. And in a church setting that offers this sort of counseling.

The approach taken by Tom and Sue are also reminiscent of the response from Suzy:

   Relationally would be one area, spiritual counseling, yeah, emotional. Uhm? So, in every area of development, actually. And, and you know, I've been I've been involved, not in,
or should I say not formal counseling but you know, in especially in prayer ministry or when you work for the church you you're able to, to counsel others, spiritual counseling and that many times leads into other areas of people’s lives because we're holistic being so it's not just one area, but you know everything is connected.

The participants formulated an important conceptualization of counseling in the context of meaningful spiritual relationships within their church community. Therefore, any valuable engagement within their faith community that improved their life and functioning as well as helped them cope with problems, they deemed as counseling. The participants did not separate counseling from those meaningful encounters within their faith community meant to help them grow and develop as individuals. As such, a sermon addressing important issues of life and functioning was equally important to them as receiving guidance from someone who addressed their psychosocial needs. To the participants counseling, irrespective of the kind-formal or informal, required compatibility with their Christian beliefs and delivered within the values of their church community. They measured the efficacy of counseling by its espousal and validation of their Christian beliefs. So, in making counseling decisions, the participants made decisions based on how it reflected their values and Christian worldview.

Of significant note, participants defined counseling within the context of socialization practices in the church community. For example, the participants highlighted the support they received from the church and the positive outcomes from interacting with people they talk to about things happening in their life. This also stressed the informal nature of counseling the participants found meaningful to them. Christa shared:

… the church community, uhm, just going to church and relaxing sometimes, uh, being able to interact with fellow believers, it gives me a peace. It gives me some kind of
belonging, a sense of belonging. And so, it keeps me, it propels me to go on. I get encouragement from some of the brethren too.”

The attitude of Caribbean-Canadian church-attending Christians toward counseling, therefore, requires conceptualization within the context of the unfolding of their personal experiences, rooted in a religious living out in their faith community. Viewed in its earliest stage where they marked the beginning point of their immigration adjustment by connecting to a church community, which continued to foster their Christian beliefs as well as help them to navigate the wider community upon their arrival in Canada. From this standpoint, the participants open to counseling, both formal and informal, needed it to conform to their Christian beliefs and incorporate elements of their faith and community they valued.

Disparate Findings

In conjunction with the findings, Caribbean-Canadian church-attending Christians hold to primal Christian beliefs, that belonging to a community who espoused similarities in values as central to them, along with having a positive attitude toward counseling when it confirmed their Christian beliefs and community values. Caribbean-Canadian church-attending Christians also recognized the presence of negative attitudes toward counseling in the wider Caribbean community. They identified negative attitudes not as personal beliefs of the participants but beliefs they are made aware of from interacting with others in the Caribbean community. Joy highlighted certain prevailing beliefs such as not trusting God enough or lacking faith as the root of having to seek counseling. Joy recalled:

since a little girl, and even as I got older even now, you know, I, I’m with people sometimes who I know are having some mental health issues. And I know there are
people saying, you know, we need to just pray to God. Once you pray to Him and leave it to God, that’s all you need.

Harry noted how he experienced negative attitudes toward counseling back in the Caribbean,

I guess growing up in the Caribbean, we even socialized to think that well, yeah, hey you supposed to be able to handle it. Uh, so I think there is a natural tendency as, as, as a man too toward the first of all, try to find the solution you know.

Gladys also described her encounter with a negative attitude toward counseling by noting:

Couple years back when you talk about counseling in any of these aspects, it was looked on like taboo, like you know somethings wrong with my marriage, for me to want counseling something’s wrong with my mental health. I can’t have mental health issues I'm in the church,

Summary

This chapter contains three interrelated themes and one disparate theme that emerged from the qualitative research in which I utilized the phenomenological approach in understanding the attitudes of Caribbean-Canadian church-attending Christians toward counseling. The first three themes included a) the primacy of Christian beliefs, b) the centrality of community and c) a positive attitude toward counseling when it honored the Christian beliefs of the participants. The disparate theme highlighted the recognition of negative attitudes toward counseling present in the wider Caribbean community.

Assessing the attitudes of Caribbean-Canadian church-attending Christians toward counseling considers the context, the importance of their Christian beliefs, and belonging to a faith community. For the participants, counseling is meaningful when it espouses their Christian
beliefs and delivered within their faith community. The participants measured the efficacy and importance of counseling by how much it espoused and reflected their Christian beliefs and fits into their values regarding the importance of their church community. A distinct finding deviating from the consensus of the participants highlighted the identification of negative attitudes toward counseling within the general population back in the Caribbean. They defined their negative attitude based on the belief that seeking counseling was antithetical to trusting in God.
CHAPTER FIVE: DISCUSSION

The results of this research study revealed the attitude of 12 Caribbean-Canadian church-attending Christians toward counseling conceptualized in the context of the primacy of their Christian beliefs and the centrality of community to them. The results revealed consequential attitudes concerning how Caribbean Canadian Christians described the importance of their Christian beliefs in directing their interaction with the world and what belonging to a homogenous community based on similarly held values and traditions meant to them. The Christian beliefs of the participants drive their approach to life. This means they value activities and events that allow them to amplify the place of their Christian beliefs in their lives. A homogenous community is one the participants described as making them feel at home because they share similar values and Christian beliefs. From these two factors, the participants expressed a favorable response to counseling when it honored their values and delivered through community members and sources espousing their Christian beliefs. The research findings highlighted the need to engage in a discussion about the importance of working with spirituality and Christian beliefs in counseling. This would include how belonging to a community amplifies cultural and ecological factors in counseling along with the role of the pastor or spiritual leader within the Caribbean-Canadian community. There are also important implications, limitations, and recommendations for future research arising from the outcomes of this study.

Awareness of Spirituality and Christian Beliefs and Etiology of Mental Illness

There are two important factors to consider when working with Caribbean-Canadian Christians. They include how spirituality and Christian beliefs inform their everyday decisions and how broader views about the etiology of mental disorders may be present in some members of the Caribbean-Canadian community.
Awareness of Spirituality and Christian Beliefs

The results of this research revealed some factors about Caribbean-Canadian church-attending Christians that are commensurate to the findings of many researchers who investigated the Caribbean population. For example, Chatters et al. (2011) highlighted the importance of emotional and social support for those who attend services regularly and connect to fellow believers in fostering health and well-being among the recipients of social support. Akin to this, Taggart (2018) noted the religious heritage of Caribbean-Canadians as a foundational factor in shaping norms and values. These established factors should therefore form the foundation in understanding how Caribbean-Canadian church-attending Christians should be understood as well as how to approach them when the need arises for social support within the Canadian society. Caribbean-Canadian church-attending Christians deeply invest in their Christian beliefs and do not detach themselves from this when they interact with the world or attempt to address their social and relational needs. They are deliberate and direct in how they appraise the value of an activity and appraise how it reflects as well as honors their Christian beliefs (Chatters et al., 2009; Taylor & Chatters, 2011). Therefore, understanding how Caribbean-Canadian church-attending Christians tap into their Christian beliefs in making meaning of the world as well as developing personal values is vital to reaching this population with important social services. Such understanding will delineate the primacy of their Christian beliefs as well as connect these Christian beliefs with the Caribbean-Canadian Christian worldview. This also means understanding there is no dichotomy of existence with Caribbean Canadian Christians but rather a state of existence where their Christian beliefs align with who they are (Erskine, 2014; Hope et al., 2020; Reddie, 2018).
As I reveal from the study, spirituality in clients remains a very important topic in the field of counseling and needs more recognition. Therefore, relevant understanding in this area does not only help counselors appraise its value to clients but also offers them relevant approaches (Abrons et al., 2019; Koenig, 2012). The idea is not to understand spirituality in the context of definitions or characteristics but delineate its meaning in the context of the experience of the Caribbean-Canadian Christian. This means viewing spirituality as a phenomenon in which its meaning responds to what the individual reveals as its essence relative to their personal experience and values (Henry, 2018). Experiencing and interacting with individuals within the world from a unique position constitutes the meaning of a phenomenon. The reality, therefore, resides within the individual (Creswell & Poth, 2018). Spirituality in counseling appraises part of what constructs reality for the Caribbean-Canadian Christian. This shifts the expertise from counselor to client through a process whereby the counselor unearths and accedes to the meanings the client posits and uses as a guide for establishing their preferred reality. While personal faith in the counselor can be an asset, this stance should not replace the need to shift the focus from the spiritual experience of the client, thus replacing the counselor as the expert with the client. On the other hand, the counselor who embraces no religious or spiritual traditions does not assume they cannot serve in a professional capacity. The applicable principles for the counselor who embraces faith also apply to those who do not. Captari et al. (2018) and Gonsiorek et al. (2009) supported tailoring treatment to match the values and beliefs of the client. Again, while some counselors report their Christian beliefs as important to them in their professional capacity (Swenson et al., 2009), they should not view their experience with spirituality as a symmetrical image of the spirituality of their clients. In the process of their work with clients, counselors need to adhere to the principles of phenomenology, which assign the
meaning of a phenomenon to the personal experience of the individual having the experience. As I outlined in this research study, phenomenology holds the key to understanding the meaning of Christian beliefs and spirituality to Caribbean Canadian church-attending Christians. This means Caribbean Canadian church-attending Christian’s view reality as any experience, which constitutes opportunities that validate their Christian beliefs, as well allow for expressions of faith in ways that honor the values they derived from their Christian beliefs (Creswell & Poth, 2018; Hope et al., 2020). Caribbean-Canadian church-attending Christians define knowledge by the extent to which a transaction fits within the framework of their Christian beliefs. As I also demonstrated, the basis for assessing a counselors’ effectiveness should focus on their openness to exploring religious themes relative to the client’s expectation and desire. Christian beliefs are not the problem but a necessary framework when conceptualizing and attempting to address the presenting issues (Walker et al., 2011).

Counselors have an ethical obligation to give ascent to the client’s understanding of their world and how it impacts their life; the client is in no way obligated to accept a therapist who does not espouse their worldview. The reality for many clients who embrace Christian beliefs and spirituality is they seek counselors who espouse and respect their values. Counselors need to seek the meaning of spirituality to the client and then create a framework within which this conceptualization informs treatment goals (Captari et al., 2018).

**Etiology of Mental Disorder**

While the attitude of the Caribbean-Canadian church-attending Christians, who participated in this study, revealed a favorable preference for counseling that embraces their Christian beliefs and delivered through their church community. There is a need to focus attention on the beliefs about the etiology of mental disorders present in the wider Caribbean
community. As some of the participants in this study noted, they are conversant with explanations by others in the Caribbean community that attribute mental disorders to the spiritual failing of the individual, or the intervention of evil spirits directed by others. The literature reviewed for this study supported these revelations (Ali et al., 201; Codjoe et al., 2013; Mantovan et al., 2016).

Exploring these beliefs as part of the assessment of spirituality in clients who present for counseling, assists in understanding how they might influence the worldview of the client. The outcomes can inform counselors on how they might incorporate the beliefs into their intervention strategies. Understanding beliefs about the etiology of mental illness is also a window into appraising how those who hold to spiritual causation of mental illness conceptualize health and well-being (Mackenzie et al., 2011). The exploration of beliefs relating to the origin of mental illness is also important for understanding how Caribbean Christians think about the individual as a holistic being as opposed to conceiving the individual as divided into mental, spiritual, and physical (Dixon, 2019; Sutherland et al., 2014).

**Cultural and Ecological Factors**

Beliefs of Caribbean-Canadian Christians are important to them as well as their church community where they actualize their Christian faith. This provides a window into understanding how to deliver social services to them (Cullins et al., 2019; Forbes & Hutchinson, 2020). Caribbean-Canadian church-attending communities have shared values and goals requiring channeling to develop resources that provide for the self-determined goals of the community. Within this understanding of the availability of resources within the community is the place and meaning of spirituality. Since this is a resilient feature of Caribbean-Canadian Church-attending
Christians, tapping into spiritual resources helps with the creation of a platform from which they meet vital needs (Perisho-Eccleston & Perkins, 2018).

Understanding the attitude of Caribbean-Canadian church-attending Christians toward counseling is only the first step to developing competency in working with this population. From this knowledge, positing important questions about the role of their Christian beliefs as well as how the meaning of community fits into their conceptualization of counseling, is a way of creating avenues for deeper exploration into their world. In contrast to Western approaches to mental health and wellness predicated on uniformity of approach, Caribbean-Canadian church attending Christians must be related to from a cultural pluralistic approach. In doing so, the practitioner seeks to situate the individual in their cultural context and understand how this informs how the individual imagines and approaches their world (Sutherland, 2011).

Furthermore, the ecological setting of Caribbean Canadian Christians augurs well for an understanding of community counseling that embraces the importance of assessing clients to understand their cultural background. This includes the context, which shaped their understanding of the world and the community in which they live. The Canadian society should be understood as comprising members that are unique and belonging to a cultural context that is also unique. This view leads to efforts to delineate the characteristics of their community and to unearth resources that are salubrious to their health and well-being (Bilgin, 2017).

**Cultural Factors**

Koc and Safa (2018) defined culture as a set of meanings and symbols derived from shared communal practices that distinguish a group of individuals consequent to their origin, historical, and other common experiences. The researchers found value in understanding and interpreting their conception of the world around them. Incorporating cultural appraisals in
counseling is not a recognized subject merely receiving verbal ascent in the discussion of therapeutic approaches with special populations. Researchers established the need for it to become a deliberate and necessary intervention, given primal attention (Brown, 2011; Tan, 2011). Since culture is the incubator in which its participants receive nurturing support to develop their understanding and interpretation of the world, there must be an understanding of the plurality of meanings and the multiplicity of ways that a person perceives and interacts with their world. The first task of the counselor is to develop an understanding of the individual present in the room by paying attention to how they derive meanings of important values consequent to these meanings. Therefore, there is no uniform way of being, but everyone and group have the social contexts they shape over time (Creswell & Poth, 2018; Koc & Kafa, 2018). This also highlights the need to restructure the axiological and epistemological assumptions of counseling to embrace other non-North American cultures.

Clients will feel understood not by the nodding of the head or the mere repetition of the phrase, I understand, but by sensing that the counselor can mirror and reflect congruence within their contextual framework. They should receive a sense the counselor appraised and embraced their world, and thereby strives to access and connect with them, leading to optimizing the therapeutic outcomes they agree upon. This will potentially strengthen the therapeutic relationship by keeping the focus on the context of the client while working toward treatment reflective of their worldview (Chu et al., 2016; Inman & DeBoer Kreider, 2013). Caribbean-Canadian church-attending Christians emerge from a culture where Christian beliefs and spiritual practices are definitive characteristics of their historical context. These practices run deep in their experiences and are a bedrock on which they build an overall approach to life. For example, Caribbean-Canadian church-attending Christians derive many norms and values from their
religious heritage. Over time, therefore, religious practices in the Caribbean community emerged as the foundation of the cultural milieu in the region (Reddie, 2018; Taggart et al., 2018). This means as counselors attempt to relate to Caribbean-Canadian church-attending Christians, they should pose questions regarding the extent to which their cultural milieu informs how they view the world.

**Ecological Factors**

The unique characteristics of Caribbean-Canadian church-attending Christians present the opportunity for the development and fostering of collaboration between the counselor and the community in the execution of effective service. This is an important approach germane to effective community counseling. It also requires making efforts to address the needs of the members of the community using capacity-building skills designed to improve the social capital of the community and meet the psychosocial needs of its members. This means resourceful members of the community, exemplify the pastor and other ministry leaders in cooperating with counselors to create the agency through which they deliver counseling services (Scott & Wolfe, 2015). Creating an understanding and building resources within the context of community for service delivery evolves as a goal of this partnership. From this scenario, forging informed partnerships requires an understanding of agencies within the Caribbean-Canadian church-attending Christian community that can work together toward common goals that foster the delivery of programs and interventions, which lead to their health and well-being. This type of collaboration demonstrates the development of lasting partnerships that exchange important information, identifies resources, and capacity-building capabilities (Scott & Wolfe, 2015). The researchers suggested because the Caribbean-Canadian community has a unique approach to the world, it must not remain excluded from the larger community. The goal is to accept its
distinctive characteristics and honor the values of its members while forging relationships and partnerships that deliver vital resources for their wellbeing.

The Role of the Pastor or Spiritual Leader within the Community

Researchers highlighted how Caribbean-Canadian church-attending Christian’s trust in their religious leader’s guidance on important counseling needs, as is the case in many African American church congregations (Palmer et al., 2012; Rowland & Isaac-savage, 2014; Whitley et al., 2006; Williams & Cousins, 2021). This suggests pastors and religious leaders can become bridges, connecting their congregants with important social services in their communities especially when the needs go beyond their local capacities. Their leadership is influential and impressionable, carrying weight beyond the pews to influence thinking, attitudes, and actions. They can harness such influence to provide meaningful counsel as well as recommend programs geared at improving the wellbeing of their congregants by using their pulpits to nurture spiritually and educate appropriately (Harmon, 2018; Rowland & Isaac-savage, 2014; Williams & Cousins, 2021). Pastors can also use their trusted position not only to reaffirm cultural and spiritual values but nuance these in the context of belonging to a wider community with various services. Events in Caribbean-Canadian congregations go beyond a gathering for worship, detached from the everyday life of the attendee. The church provides for the spiritual, social, and well-being of its members. A recognition of this position of salience can add to deliberate attempts of delivering information and education in vital areas of need (Campbell & Winchester, 2020; Collins, 2015; Harmon et al., 2018; Rowland & Isaac-savage, 2014).

Pastors and spiritual leaders within the Caribbean-Canadian Church community do have influence and a level of trust from their members. This creates a need for them to recognize their unique position and use it for the advancement of the well-being of their members. It requires
pastors to be conversant with the needs of their members and seek ways of instilling trust in them toward the various useful approaches. While the participants emphasized the counseling they received from their pastor and other spiritual leaders, they also recognized deficits in addressing certain needs among members presents the opportunity for them to be a trusted bridge, connecting members towards relevant resources in the wider community (Rowland & Isaac-savage, 2014; Williams & Cousins, 2021).

**Implications**

The results of this research study present implications for theory, practice, and policy in the field of counseling, especially in relationship to Caribbean-Canadian church-attending Christians.

**Theory**

The results of this research study support the findings of many authors concerning the role Christian beliefs and spirituality play in the life of Caribbean-Canadian church-attending Christians. For example, Erskine (2014), and Hope et al., (2020), Reddie (2018), and Whitley et al., (2006) articulated the central role spirituality and religion play in the life of people of Caribbean descent and how they seek to live their lives as expressions of their Christian beliefs. In conducting this study, I contribute to an established body of knowledge by deepening the understanding of Caribbean-Canadian church-attending Christians. The information adds a more detailed description of how Christian beliefs inform their attitude toward counseling. Finally, using the outcomes of this study, I present a platform on which future researchers can focus concerning the role Christian beliefs and spirituality play in the life of Caribbean-Canadian Christians especially as it affects their lives as they establish themselves while living in the Canadian context.
Practice

Deeming the work with the target population effective requires considering how Christian beliefs influence their lives and inform their decisions. There is a need to pay more attention to how counselors seek to engage Caribbean-Canadian Christians. Those working with this population should include considering how the community taps into various forms of resources. The outcomes of this study also have implications for working with a population that heretofore has not received significant attention from the academic community. There are new opportunities for building understanding and collaboration between parties within Caribbean-Canadian communities and the wider Canadian society. Spiritual leaders within the Caribbean-Canadian communities must understand the trust placed in them by their members and use this as a motivation to educate themselves in the fundamentals of counseling and other areas of practice that will help them work more effectively. There are many reasons to suggest pastors in the Caribbean-Canadian communities seek training on the foundation of counseling as a means of increasing their ability to meet the needs of their members. Chief among these reasons underscores how along with educating themselves in the basics of counseling, pastors and spiritual leaders must also understand the external resources and social services that can supplement the work they do, especially when they confront issues beyond their professional qualifications. This is another point where they can serve as the bridge between their members and the wider community.

Policy

The outcomes of this study are also indicative of the growing multicultural nature of Canadian society. It highlights the need to build understanding between new immigrants and their host country. As the Canadian population continues to increase through immigration, the
need to offer diverse social services to new immigrant populations also increases. This presents the opportunity to understand who receives services and the most beneficial evidence-based approach to employ. This means the concept of cultural diversity or multiculturalism must reflect one that transcends a mere label, based on ethnic appearances, to one that leads to the structuring of social services in a way that reflects a substantive approach. It will also expand the ability to build a respectful and inclusive society, which embraces divergent populations. Government and agency leaders have an opportunity to write policies reflecting their understanding of specific populations and their unique needs, which require varying approaches of redress. Stakeholders with an interest in the health and well-being of Caribbean-Canadian Christians must also engage in robust advocacy with government leaders and social service agencies to ensure cultural inclusivity in the formulation of policies and procedures. Bringing a voice to the decision-making table is one of the best ways to effect second-order change.

**Limitations**

This study represents a first in terms of its direct and concentrated attempt to capture the attitude of Caribbean-Canadian church-attending Christians toward counseling. Viewing it as pioneering exploration acknowledges the minimal prior researchers compiled rather than a conclusive set of facts on the nature of the phenomenon of counseling with this population. Furthermore, the relatively small sample of participants only reflects the responses of participants from Guyana, Jamaica, Trinidad, and St. Vincent, most of whom are originally from Jamaica. Taking into consideration the large group of nations composing the Caribbean Islands, as defined in this study, the pool of participants requires expanding the number of participants to ascertain if the responses of the participants in this study are reflective of the wider Caribbean community.
**Recommendation for Future Research**

There is a need for additional studies to establish a body of findings that offers researchers access to a more robust understanding of the attitude of Caribbean-Canadian church-attending Christians toward counseling. Furthermore, the composition of the participants for this research study requires focused attention. While all participants met the research criteria, for future replication of the findings, there remains a need to increase the number of participants in a way that reflects as many Caribbean countries as possible. There is also a necessity to continue exploring the attitude of Caribbean-Canadian church-attending Christians toward counseling to ascertain if any of the disparate findings present in this population.

**Summary**

This research study has implications for theory, practice, and policy in the field of counseling. Using the findings, I revealed the attitudes of Caribbean-Canadian church-attending Christians toward counseling as being rooted in the primacy of their Christian beliefs. The centrality of the meaning of community to them is an important area of effective counseling worthy of continued discussions. Other topics requiring ongoing consideration include the importance of working with spirituality and Christian beliefs, how belonging to community raises the importance of understanding the role of cultural and ecological factors in effectively reaching clients and, how pastors and spiritual leaders in the Caribbean-Canadian church communities can bridge and connect their members to vital social services not available in their immediate community. Pastors and spiritual leaders should use the trust vested in them by their members to not only educate them on matters pertaining to their spiritual and community needs but also direct them to external resources vital to their adjustment to Canada. This study builds on the findings of previous authors on the role spirituality plays in the life of Caribbean-
Canadian Christians. I present opportunities for education and collaboration between Caribbean-Canadian communities and the wider Canadian society. Using the findings opens opportunities for governments and social agencies to draft policies tailored to the need of the study population. Although limited by the number of Caribbean countries represented in the participant group, the possibility of offering future researchers the ability to replicate the findings by recruiting participants representative of the many countries of the Caribbean.
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APPENDIX A

Interview Questions

1. Please tell me about yourself.

2. Please describe your journey from the Caribbean to Canada.

3. Please describe any adjustment, if at all, you went through after arriving in Canada.

4. Please describe how you managed the adjustments you went through.

5. Please describe any community or other resources you consulted during this adjustment period, if at all.

6. Please describe for me the role that your Christian beliefs play in your life.

7. Please describe the role that your Christian beliefs played in the adjustment period, if at all.

8. Please describe your beliefs about the place of counseling in your life as a Christian.

9. Please describe the relevance of counseling to you when faced with needs that might necessitate you seeking help.

10. Please describe how you used counseling to help with your adjustment to Canada, if at all.
AppENDIX B

IRB Approval Letter

LibERTy University
INSTITUTIONAL REVIEW BOARD

April 8, 2021

Melbourne Turgott
William Bird


Dear Melbourne Turgott, William Bird:

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:101(b):

Category 2.(ii). Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording).
Any disclosure of the human subjects’ responses outside the research would not reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects’ financial standing, employability, educational advancement, or reputation.

Your stamped consent form(s) and final versions of your study documents can be found under the Attachments tab within the Submission Details section of your study on Cayuse IRB. Your stamped consent form(s) should be copied and used to gain the consent of your research participants. If you plan to provide your consent information electronically, the contents of the attached consent document(s) should be made available without alteration.

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at irb@liberty.edu.

Sincerely,

G. Michele Baker, MA, CIP

Administrative Chair of Institutional Research

Research Ethics Office
APPENDIX C

Consent Form

Title of the Project: A Phenomenological Study of the Attitude of Caribbean-Canadian Church-attending Christians Toward Counseling

Principal Investigator: Melbourne W. Turgott, Doctoral Candidate, Liberty University

Invitation to be Part of a Research Study
You are invited to participate in a research project. To participate, you must be 18 years old or older, be of Caribbean descent and born in the Caribbean, where you were a practicing Christian before coming to Canada. You must be willing to describe your experience with relocating from the Caribbean to Canada, including your experience with adjusting to life in Canada and the resources, such as counseling, that were helpful during your adjustment and how you felt about using or not using these resources. Taking part in this research project is voluntary.

Please take time to read this entire form and ask questions as necessary before deciding whether to take part in this research project.

What is the study about and why is it being done?
The purpose of the study is to explore the attitudes of Caribbean-Canadian church-attending Christians toward counseling. It is hoped that this study will provide valuable insights and knowledge about the needs of immigrants from the Caribbean as they adjust to their new life in Canada. It is also hoped that this study will help to create a better understanding of the attitude of Caribbean -Canadian Christians toward counseling in ways that will help to provide them with important social services as they seek to participate in the development of their communities.

What will happen if you take part in this study?
If you agree to be in this study, I will ask you to do the following things:

1. Attend an in-person recorded interview that will last approximately 60 minutes in which you will describe your experience with moving to Canada from the Caribbean and what resources you used to help you adjust to your new life. This interview will be videotaped for the purpose of generating a transcript of your responses. You have the option to participate in this research project via virtual interview considering COVID-19 health stipulations that may apply at the municipal, provincial, or federal level of government.

2. Allow for follow-up checks through e-mails and provide reflections on the interview as the need arises. The time required for this will vary, however, it is not expected to take more than 30 minutes to review the transcript.

3. Be opened to providing feedback to me on specific themes that are highlighted during the analysis of the interview script. This will likely require 30 minutes of your time.
How could you or others benefit from this study?
Participants should not expect to receive a direct benefit from taking part in this study. This study will, however, add to knowledge in the area of relating to immigrant populations and may be useful in improving social service care provided to this population. Benefits to society include improved understanding of the needs of immigrants with a Christian worldview, development of programs to address these needs, and, provision of knowledge and awareness that will add to a healthy population.
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IRB-FY20-21-671
Approved on 4-8-2021

What risks might you experience from being in this study?
The risks involved in participating in this study are minimal which means they are equal to the risks you would encounter in everyday life, and not more than would be expected to occur when talking about stories from your past. It may include recollection of events and experiences that might be difficult or traumatic depending on the nature of your experience emigrating and adjusting to life in Canada. If during your participation, it becomes difficult for you to deal with these possible memories, your participation may be terminated. You will then be referred to an appropriate service to help you deal with this distress. Please be aware that if during participation in this research study, you disclose information that relates to the abuse or neglect of a minor, an elderly person or a person living with a disability, or you threaten harm to yourself or others, the researcher is mandated by law to report these to the appropriate agency or authority.

How will personal information be protected?
The records of this study will be kept private. The identity of each participant will be kept private, and all information and details that might disclose your identity will be removed during the write-up and disclosure of the study findings. Published reports will not include any information that will make it possible to identify a participant. All research records and documents will be kept safely in a locked safe, in a locked room, in a secured office and will only be accessible by the researcher.

- Participant interview responses will be kept confidential through the use of pseudonyms. Any identifying information that would connect you to the pseudonym used will be kept separate from the transcript information.

- Transcripts that are computer generated will continue to be stored on a computer that is passcode-protected and may be used in the future in presentations without referencing or disclosing information that may identify participants. After three years, all electronic records will be deleted, and hard copy data will be shredded. Only the researcher will have access to these recordings and data.

Is study participation voluntary?
Participation in this study is voluntary. Your decision whether to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any questions or withdraw at any time without affecting those relationships.
What should you do if you decide to withdraw from the study?
If you choose to withdraw from the study, please contact the researcher at the email address or phone number as follows: , cell, . Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

Whom do you contact if you have questions or concerns about the study?
The researcher conducting this study is Melbourne Turgott. You may ask any questions you have now. If you have questions later, you are encouraged to contact me at or email me at . You may also contact the researcher’s faculty sponsor, .

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Approved on 4-8-2021

Whom do you contact if you have questions about your rights as a research participant?
If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, you are encouraged to contact the Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA., 24515 or email at irb@liberty.edu

Your Consent
By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

The researcher has my permission to audio-record and video-record me as part of my participation in this study.

______________________________
Printed Participant Name

______________________________
Signature & Date

Liberty University
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Approved on 4-8-2021
APPENDIX D

Recruitment Letter

February 23, 2021

[Recipient]
[Title]
[Company]
[Address 1]
[Address 2]
[Address 3]

Dear Pastor and Congregation

As a graduate student in the School of Behavioral Sciences at Liberty University, I am conducting research as part of the requirements for a Doctor of Education degree in Community Care and Counseling: Marriage and Family. The purpose of my research is to understand how Caribbean-Canadian church-attending Christians describe their attitude toward counseling, and I am writing to invite eligible participants to join my study. As an immigrant from the Caribbean, a pastor and family therapist, I am interested in helping this community.

Participants must be 18 years of age or older, born in the Caribbean where they attended a Christian church before emigrating to Canada. They must also continue attending a Christian church in Canada and be willing to describe their transition to Canada and what resources including counseling, they utilized during this process. Participants, if willing, will be asked to do the following:

1. Attend an in-person recorded interview that will last approximately 60 minutes in which you will describe your experience with moving to Canada from the Caribbean and what resources you used to help you adjust to your new life. This interview will be videotaped for the purpose of generating a transcript of your responses. You have the option to participate in this research project via virtual interview considering COVID-19 health stipulations that may apply at the municipal, provincial, or federal level of government.

2. Allow for follow-up checks through e-mails and provide reflections on the interview as the need arises. The time required for this will vary, however, it is not expected to take more than 30 minutes to review the transcript.

3. Be opened to providing feedback to me on specific themes that are highlighted during the analysis of the interview script. This will likely require 30 minutes of your time.

Personal information about you such as name, age and contact information will be requested as a part of this study but the information will remain confidential and will not be disclosed in the study findings or through any other means.

To participate, please contact me by e-mail at [mwturgott@liberty.edu] or by cell at [96] stating your interest in participating in the study. You will then be contacted by email and provided with a consent form that you MUST read before making a final decision about
participation. If after reading the consent form you decide to participate, you may sign electronically by typing your name and the date or print and sign the form and scan and return it to the researcher by email at mwturgott@liberty.edu. You will again be contacted by the researcher who will arrange with you for an interview.

Sincerely,

Melbourne W. Turgott  
Student Researcher  
Tel. #[Redacted]  
Email: [Redacted]
Recruitment Flyer

Research Participants Needed

The Attitude of Caribbean-Canadian Church-attending Christians Toward Counseling

- Are you 18 years of age or older, born in the Caribbean, and a practicing Christian prior to emigrating to Canada?
- Are you willing to share your experience with emigrating to Canada?
- Are you also willing to describe your views on counseling in adjusting to your new life in Canada?

If you answered yes to these questions, you may be eligible to participate in a research study.

The purpose of this research study is to describe the attitude of church-attending Caribbean-Canadian Christians toward counseling.

Participants will be asked to describe in a 60-minute, recorded, in-person or remote interview their journey from the Caribbean to Canada including adjusting to a new life in Canada and what resources they utilized during this period. Participants will also be asked to describe the role that counseling played in helping them, or not helping them to adjust to life in Canada. Participants will have the opportunity to give feedback on the interview process (25-30 minutes) and be open to providing feedback to the researcher on specific themes that emerge during transcript analysis (25-30 minutes).

The study is being conducted at my office located at
4601-51st, Leduc, Alberta
Canada, T9E 5C2

(Consent information will be provided by email.)

Melbourne Turgott a doctoral candidate in the School of Behavioral Sciences at Liberty University, is conducting this study.
Please contact Melbourne Turgott at (780) 218-9852 or mwturgott@liberty.edu for more information.