

Self-care and spirituality in volunteer psychologists during the Covid-19 pandemic

Autocuidado e espiritualidade em psicólogos voluntários durante a pandemia de Covid-19

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Abstract

This work is an integral part of a master's thesis whose objective was to unveil the perceptual experience and the meaning of life for volunteer psychologists who have served online amid the Covid-19 pandemic. In this qualitative study, the self-care of these professionals is approached in different ways, as it is a multidimensional and multifaceted concept involving areas and dimensions of personal and professional life. In the scenario of the current pandemic, with all its particularities, the self-care of psychologists contributes to the relief of stress, helping in their personal and professional life. This study was conducted to identify how volunteer psychologists had experienced their self-care in the face of the demands brought by their clients. The objective was to understand whether spirituality acts as a protective factor. A sample of 20 professionals, of which 90% were females, participated in the study. Self-care strategies were identified that proved effective in dealing with the exhaustion caused by clinical practice. The importance of using resources from the spiritual dimension was verified as a source of strength to live. Belief in God, and the help of prayer, offer confidence and support to overcome life's obstacles, especially in a period of social isolation.

Keywords: Self care; Coping skills; Psychologists; Covid-19; Pandemics.

Resumo

Este trabalho é um recorte integrante de uma dissertação de mestrado cujo objetivo foi desvelar a experiência perceptiva e o sentido da vida para voluntários de psicologia que atendem online em meio a pandemia de Covid-19. Neste estudo de natureza qualitativa, aborda-se o autocuidado desses profissionais sob diversas formas, por se tratar de um conceito multidimensional e multifacetado envolvendo áreas e dimensões da vida pessoal e profissional. No cenário da atual pandemia, com todas as suas particularidades, o autocuidado dos psicólogos, contribui no alívio do estresse, auxiliando em sua vida pessoal e profissional. Conduziu-se este estudo para identificar de que forma os psicólogos voluntários vivenciam seu autocuidado diante das demandas trazidas por seus clientes. Objetivava-se entender se a espiritualidade atua como fator de proteção. Para tanto, uma amostra de 20 profissionais, dos quais 90% do gênero feminino participaram do estudo. Identificaram-se estratégias de autocuidado que se mostraram eficazes para lidar com o esgotamento causado pela prática clínica. Constatou-se a importância de utilizar recursos da dimensão espiritual como fonte de forças para viver. A crença em Deus, e o auxílio da oração, oferece confiança e amparo para superar os obstáculos da vida, especialmente em período de isolamento social.

Palavras-chave: Autocuidado; Habilidades de enfrentamento; Psicólogos; Covid-19; Pandemia.

Resumen

Este trabajo es parte integral de una tesis de maestría cuyo objetivo fue develar la experiencia perceptiva y el sentido de la vida para los voluntarios de psicología que prestan sus servicios en línea en medio de la pandemia del Covid-19. En este estudio cualitativo, el autocuidado de estos profesionales es abordado de diferentes maneras, ya que es un concepto multidimensional y multifacético que involucra áreas y dimensiones de la vida personal y profesional. En el escenario de la actual pandemia, con todas sus particularidades, el autocuidado de los psicólogos contribuye al alivio del estrés, ayudando en su vida personal y profesional. Este estudio se realizó para identificar cómo los psicólogos voluntarios experimentan su autocuidado frente a las demandas presentadas por sus clientes. El objetivo fue comprender si la espiritualidad actúa como factor protector. Para ello, participó en el estudio una muestra de 20 profesionales, de los cuales el 90% eran mujeres. Se identificaron estrategias de autocuidado que demostraron ser efectivas en el enfrentamiento del agotamiento provocado por la práctica clínica. Se constató la importancia de utilizar recursos de la dimensión espiritual como fuente de fortaleza para vivir. La creencia en Dios, y la ayuda de la oración, ofrece confianza y apoyo para superar los obstáculos de la vida, especialmente en un período de aislamiento social.

Palabras clave: Autocuidado; Habilidades de afrontamiento; Psicólogos; Covid-19; Pandemia.

1. Introduction

The beginning of 2020 brought with it unprecedented challenges in our history. Since March 11, 2020, when the World Health Organization declared the pandemic state, there has been a great destabilization of the world's economic, social, cultural, technological, and psychological aspects. A prevalence of mental health disorders, particularly anxiety, fatigue, aggression, stress, depression, and panic episodes, has given rise to a concern beyond Covid-19 (Schmidt et al., 2020). Several psychologists engaged in solidarity movements and provided voluntary service to the population and health professionals involved in combating the pandemic. For the consultations, digital media was used since face-to-face consultations were not possible.

In the current context, in which the world society experiences great changes, there are many challenges of being a psychotherapist (Cosenza et al., 2021) since it appears that there is silent suffering on the part of those who take care of the suffering of others. Systematic studies on psychologists' self-care are scarce. There is a scarcity and knowledge gap in this area. Many may think that the psychologist overcomes their problems and manages to solve them alone and promptly. We can infer that there is a hidden reality behind this popular imagination.

In this study, the term "psychotherapist" or simply "therapist" is specifically used to designate clinically trained psychologists whose main job is to provide psychological support to the population voluntarily during the current Covid-19 pandemic.

Work stress and self-care

The psychologist lives with the constant concern of taking care of the other and, along with that, experiences the same concerns, anxieties, and uncertainties that affect nonpsychologists pertinent to a pandemic that drags on overtime, carrying with it doubts about effective treatment, misinformation, tensions, controversies and conflicts with the restriction of the freedom of yore and social isolation.

Studies show that during the Covid-19 pandemic, these professionals showed the need to promptly provide an answer and be available to assist those who needed it, feeding the weight of great responsibility. Such behavior weakens and corrodes forces, as it requires sustaining an intense emotional load because the professional lives daily with the pain and suffering of others. It is noted that it is often necessary to deal with difficult clients and complex cases, which demand a great demand for empathy (Simionato & Simpson, 2018). In addition, there is the task of learning to adapt to the new form of virtual service.

The challenges of caring for others can be reflected in stress, anxiety, depression, and relationship difficulties stemming from your life tensions and personal problems. Simionato and Simpson's study (2018) shows that psychotherapists are prone to develop Burnout syndrome due to being constantly exposed to emotionally exhausting work.

Mota's (2017) meaning of self-care refers to the professional's skills and behaviors that aim to promote health and good quality of life. Added to this is integral well-being, which aims to prevent potential effects of stress associated with the psychologist's profession.

Managing personal conflicts and everyday problems is of great importance, and self-care can be seen as an ethical imperative, as it reflects emotional and physical implications for health (Thompson & Vivino, 2019). The authors point out that physical and mental health must be well structured. For them, paying proper attention is an efficient way to lessen the harmful health effects that often underlie the therapy process. Standing for hours in the face of pain, anguish, and suffering and being always available to welcome the pain of the other, accompany their struggle, their suffering, support them, in a way, is reflected in feeling their pain. This constant emotional charge can affect the well-being of these professionals (Thompson & Vivino, 2019).

Therapists in the course of their work may also be at risk of developing symptoms of secondary traumatic stress by

indirectly witnessing their clients' potentially traumatic experiences. This fact can compromise the professional's action towards his client and the therapist's own well-being (Nissen-Lie et al., 2021).

With the consultations being conducted virtually, insecurity and even a lack of control over the technique in the new work environment can occur. These factors, added to all the stressful circumstances exposed, combined with possible personal conflicts, prove to be precursors of high emotional exhaustion. Simonato and Simpson (2018) point out that such exhaustion tends to reduce the therapist's progress concerning his clients since burnout has been associated with impaired well-being, including somatic complaints of sleep disorders, memory, and higher risk of developing depressive disorders, among others.

Some clients can especially affect the practitioner's inner world, affecting them far beyond the context of therapy sessions. Special embarrassments can arise when a client's life has clear resonances with the therapist's (Bimont & Werbart, 2018), leading to the actualization of old, dormant problems that have evoked intense and disturbing feelings. A previous research shows that professionals signal common disorders such as anxiety and depression in cases where countertransference is perceived. Some psychologists describe contradictory feelings of fear and love, especially when their client is suffering outside the therapeutic setting. This fact is especially relevant when dealing with the treatment of more difficult or shocking cases, in which the client's suffering touches the therapist's existence in his professional and personal vulnerability.

From the above, we can observe that measures for self-care should not be considered occasional or dispensable in the life of psychologists since it is a necessity and an ethical imperative in clinical practice (Mota, 2017).

Spirituality as an influencer of health

Spirituality has been increasingly discussed in the academic environment in recent years, denoting its importance, especially concerning health. However, the term can often be confused with religiosity. Spirituality and religion are not necessarily linked (Calvetti et al., 2008). Some can perceive spirituality in a relationship permeated by religion; however, other people can feel it in the coexistence with people they love, contact with nature, or even through the expression of art.

Religion is a concept that establishes dogmas and beliefs that must be followed. It has its own rituals and doctrines, in which ethical and moral precepts are involved, as well as the belief in the creative forces of the universe. Religiosity offers meaning to life beyond earthly existence, related to the transcendent, which proposes a moral orientation providing comfort and security to foster and enrich people's spirituality. It is linked to the Sacred, the Divine, God in the Western world or nirvana in Eastern cultures, usually based on a set of scriptures or teachings (Tavares et al., 2016). According to the author, the spiritual field presents itself as something free, subtle, imperceptible, and unconscious. The spirituality of the human being cannot be said, since the spiritual domain cannot be measured. It is an experience that goes beyond language. It is something individual and connected with the meaning of life.

According to Calvetti et al. (2008), spirituality refers to issues of the meaning of existence and reason for living, associating with the purpose and meaning we find for our lives, regardless of religious beliefs and practices. In this way, we can say that spirituality is linked to the maintenance and strengthening of physical and mental health, including direct benefits such as reducing stress, anxiety, and depression and structuring the human experience.

In addition, there are also several indirect impacts such as increased resilience, a factor that favors strategies to deal with life's challenges and helps maintain a positive view of the world. For these reasons, it seems necessary to consider the importance of spirituality in the uniqueness of each one, as it is an important matrix of support for adverse events in life (Calvetti et al., 2008; Tavares et al., 2016).

Spirituality in Victor Frankl

Victor Frankl's theory (1987) conceives the individual as a three-dimensional being, formed by his biological

dimension, concerning physical aspects, the psychological dimension, which contemplates his cognitions, and the ethical dimension, referring to the unconscious spirituality present in the body. This would be the source of the meaning of life since it is in the spiritual or noetic dimension that the answers to the philosophical questions about the meaning of life are found.

For Frankl, the primary motivation in a person's life is the search for meaning. Each one, in particular, can only define this meaning because each person is unique, singular. The meaning of life is universal in its value but individual in its content. What differentiates human beings from other species is precisely this spiritual dimension, primarily and genuinely human, source of subjectivity, values, creativity, freedom, moral conscience, and a sense of responsibility (Dittrich & Oliveira, 2019). Thus, Viktor Frankl's approach focuses on the meaning of human existence, as well as the person's search for this meaning.

Objective

The objective of this study was to identify how volunteer psychologists, during the Covid-19 pandemic, had experienced their self-care in the face of the issues brought by his clients and if spirituality acts as a protective factor.

2. Methodology

This study was carried out as part of a master's thesis whose objective was to unveil the perceptual experience and the meaning of life for volunteer psychologists who had served online amid the Covid-19 pandemic. The qualitative method was adopted for this investigation, which works with the subjectivity of the participants, seeking the meaning of the experience for the individual (Pereira et al, 2018).

Qualitative research into psychologist's perceptual experience allows us to capture how psychologists think, act, and respond to key issues according to the meaning they assign to their perceptions (Minayo & Gomes, 2013). All the data found were analyzed based on Viktor Frankl's Logotherapy framework (Frankl, 1989).

The entire research was carried out using a semi-structured and self-administered questionnaire, this form of research is presented by Costa (2018) as a new channel for conducting scientific studies to share and integrate information quickly.

The questionnaire was created on the Google Forms platform and sent simultaneously by email and WhatsApp application, using the Snowball recruitment method, due to the social isolation in force. This is a form of non-probabilistic sampling, as it is not possible to determine the probability of selection of each participant in the sample (Vinuto, 2014). This technique allows initial study participants to indicate new participants who, in turn, indicate others successively until reaching the established metric to finalize the data collection.

The research was approved and authorized by the Research Ethics Committee of the Faculty of Medicine, Universidade Federal Fluminense/FM/UFF/HUAP. All ethical precepts to guarantee the confidentiality of personal information were followed, and the participation was voluntary. Before data collection, the virtual Informed Consent Form (ICF) was signed, consisting of a clarification page about the research and requesting authorization to use the data.

The sample consisted of 20 psychologists who used to work in clinics, as an inclusion criterion, regardless of gender, therapeutic line, or time since graduation. Necessarily, therapists should be engaged in voluntary, unpaid care, and remotely during the Covid-19 pandemic.

The data collection instrument was a virtual questionnaire containing 32 questions, with multiple choice (13 in total) solely for collecting sociodemographic information, such as age, gender, type of housing, and others. The others consisted of open questions, phenomenological in nature, highlighting the perception of the professional regarding their clinical practice, volunteering, spirituality, and self-care. The answers collected were considered confidential and anonymous. The participants were designated with the letter A, followed by the numeral 1 to 20, in the format A1, A2, and so on successively.

For this study, in addition to sociodemographic information, the following questions were asked: (i) How do you take

care of yourself to deal with the questions brought up by your clients? (ii) Do you see any link between spirituality and your work? How would you describe that relationship?

Data analysis

All responses collected using Google Forms were carefully read and fully transcribed into the Word processor and the Excel spreadsheet editor.

As for the analysis of this study, the empirical phenomenological model was chosen, which combines objectivity in the collection and analysis of data with the apprehension of the subjective reality of the participants. For that, the method chosen was the one proposed by Amedeo Giorgi.

The author works with the descriptions of testimonies, reports, or interviews about the experiences concerning a certain phenomenon in four steps (Holanda et al., 2013):

1. Reading of the whole: explores the awareness of modes of relationship with the object. It refers to the full reading of the material produced by the participant, assimilating the direction of the answers, favoring the general understanding of the data produced, and giving a better understanding for the next step.

2. Discrimination of the units of meaning based on a psychological perspective and focused on the phenomenon: after listing the answers, the meaning of the whole is apprehended, and then they are organized in order to discriminate the significant units that arise whenever a psychologically sensitive change in the meaning of the situation for the participant is perceived. In this way, a better interpretation of the data is made possible, always focusing on the phenomenon being researched.

3. Transformation the answers given by the participants, already classified, into appropriate psychological expressions so that the phenomenon is visible. After the significant units are determined, the researcher then goes through them all to express the meaning contained in them. The interviewee's language is transformed into appropriate psychological language, always emphasizing the phenomenon under study.

4. Synthesis or synopsis of significant units: The transformation of meaning units is carried out in a consistent statement called the structure of the experience or phenomenon. For this step to be carried out, the researcher must regroup the relevant constituents to arrive at an analysis of the structure of the phenomenon (Andrade & Holanda, 2010).

It is worth mentioning that examples of responses provided by participants are represented here in italics and enclosed in apostrophes (""). The ellipsis (...) used when necessary, reveal excerpts of interrupted writing.

3. Results

Table 1 summarizes part of the sociodemographic data collected, showing that 10% of the participants were male and 90% female.

As for age, it appears that the age groups between 21 to 30 years and 41 to 50 years had a slight predominance, with 25% of individuals each, followed by 20% aged between 31 and 40 years. Ages between 31 to 40 and 61 to 70 years old had a rate of 15%.

Concerning marital status, the majority of 55% claimed to be single, and 35% were married or in a stable relationship. Only 5% reported being widowers, and 5% separated or divorced.

A predominance of Christian religions was identified. A total of 30% Catholics was found, followed 20% Spiritualists, and 15% Evangelic. It is worth mentioning that 30% of the participants claimed not to have a religion and 5% reported being agnostics.

Table 1. Characterization of the participating psychologists (N=20).

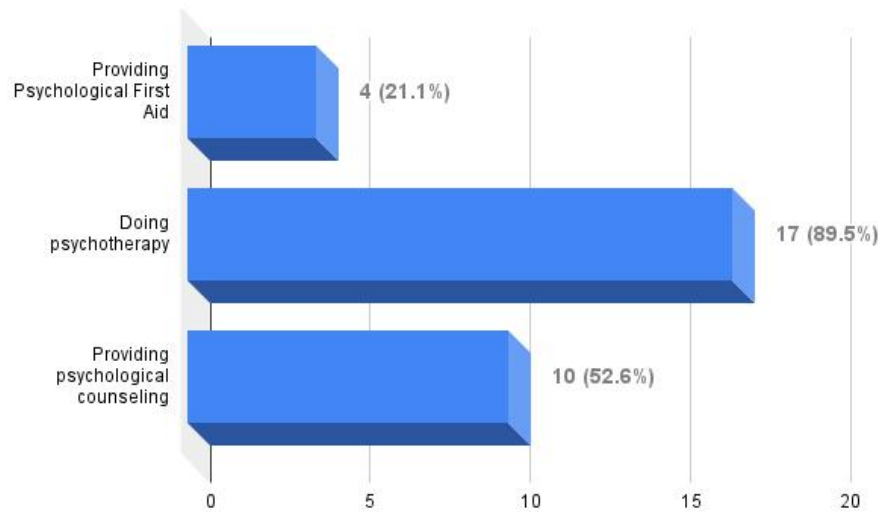
Sociodemographic Aspects		n	%
Gender	Masculine	2	10
	Feminine	18	90
Age	21 to 30	5	25
	31 to 40	3	15
	41 to 50	5	25
	51 to 60	4	20
	61 to 70	3	15
	71 to 75 or more	0	0
	Religion	Catholic	6
Evangelic		3	15
Spiritist		4	20
Umbanda or Candomblé		0	0
Eastern religions		0	0
Does not have		6	30
Believes in God but no religion		1	5
Religious practice	Assiduously	5	25
	Sometimes	3	15
	Rarely	6	30
	Never	6	30
Marital status	Single	11	55
	Married or in a stable union	7	35
	Separated or divorced	1	5
	Widower	1	5

Source: Prepared by the author.

It is noticed that 30% of the participants say they rarely practice their religion, and the same percentage never practice it. A total of 25% assiduously practiced their religion, while 15% said that they had only practiced it a few times.

Regarding the type of virtual service provided (Graph 1), it is worth noting that more than one answer was allowed in this question. Psychotherapy visits accounted for the majority of answers (89.5%), followed by psychological counseling (52.6%). Psychological first aid was provided by only 21.1% of professionals.

Graph 1. Type of intervention performed.



Source: Prepared by the author.

The therapeutic line used by professionals can be seen in Table 2:

Table 2. Therapeutic lines used in the consultations (N=20)

Therapeutic lines	N	%
Psychoanalysis	8	40
Humanist existential	4	20
Cognitive Behavioural	4	20
Gestalt	1	5
Jungian/Mourning Theory / EMDR	1	5
Existential Phenomenological	1	5
Psychoanalysis / Logotherapy	1	5

Source: Prepared by the author.

The predominance of Psychoanalysis care (40%) was remarkable, followed by the Existential Humanist and Cognitive behavioral lines, with 20% each. The others accounted for only 5%.

4. Discussion

Based on Amadeu Giorgi's methodology, the reading of the questionnaires considering the objectives and guiding questions led to two subcategories: Strategies for self-care during the pandemic and Spirituality as a coping resource. Both form the Coping Strategies category and will be discussed next.

Strategies for self-care during the pandemic

Each person's psychophysiological reactions and responses are related to the various individual characteristics and according to the context in which they are inserted. For the psychologist, at this moment, the importance of a social support network that supports him in the face of contingencies is highlighted. There may be resilience or vulnerability, depending on how it reacts to the facts. In this condition, biological reactivity is activated, triggering a repertoire of coping strategies for

stressful events.

In order to know the mechanisms used by professionals in the regulation of their emotional experiences in the face of issues expressed in clinical care, some questions were formulated. Initially, it was asked if the professional enjoyed any emotional support or supervision in their care. In response, 30% said they did not have support at this time, because they thought there was no need, because they were not financially able to afford supervision, or even because they only resort to this type of help when they perceive a need, as the following statements show:

"Not at the moment, as I don't have the income to pay for supervision." A14

*"No, because I didn't need. If I need to, I can find friends inside and outside the area, as well as previous references."
A16*

The majority (70%) claimed to have some support, either from their supervisor, from a friend, family member, or through psychotherapy.

"I have my own personal psychotherapist, and I supervise the cases I see, online." A11

"I resort to exchanges with co-workers." A8

"I count on family members, colleagues, friends, and more experienced colleagues who supervise me and conduct clinical meetings." A15

Doing personal psychotherapy and contacting fellow professionals were the strategies most used by therapists in their self-knowledge and psychological support. The tensions caused by dealing with everyday situations, both personal and professional, can, with this help, be mitigated and re-signified.

Another therapist's or a supervisor's support proved very important since personal factors can interfere with the professional's listening. It is noteworthy that personal psychotherapy is perceived as an important element to assist in the complex task of being a psychologist (Fernandes and Maia, 2008). This professional needs to know how to work with his emotions in order to conduct his practice without allowing essentially personal issues to interfere with his work.

Having supervision favors an opportunity for professionals to have the possibility to structure their intervention while they healthily distance themselves from the different emotional experiences that arise during the consultations.

"(...) significant losses are the most striking situations that I have attended. I feel affected because they are very heavy stories of abrupt losses without proper goodbyes and grief. I feel sad, but in therapy, I work on these issues." A3

"There are supervisions and exchanges of experience in the volunteer groups I attend; in addition, I do my personal psychotherapy weekly and try to have my escape valves. From time to time, I feel overwhelmed and resort to supervision. I cry. I do breathing exercises, stretching, physical activity. I drink wine. And I do live with my dear friends." A11

"I go to psychoanalysis. I try to do things that give me pleasure, such as physical activity, which helped a lot at that moment." A10

"I go to psychoanalysis." A5

It is important to stick to self-care and look for alternatives and attitudes that provide satisfaction and rest. Taking care of yourself is educating yourself and making choices conducive to emotional, physical, intellectual, social, and spiritual well-being in the long term and not just in a single moment (Costa et al., 2008).

A therapeutic accompaniment thus contributes to a better mental and emotional state. It provides a better understanding of personal dynamics and assists in dealing with their conflicts, allowing them to seek other coping strategies or solutions to their problems more effectively.

By putting himself in the role of the client, during psychotherapy, the therapist also increases the degree of sensitization and respect for his clients, improving the perception of his behavior and decisions. Looking at yourself, being healthy, and having healthy habits is fundamental to dealing with the emotional tensions that a person goes through (Fernandes & Maia, 2008).

It is noticed that some of the participants in this study adhered to a lifestyle that provides them with physical and emotional well-being. They recognize the effects of recreational and physical activities on health promotion and maintenance. Under increasing energy for daily activities and reducing stress levels, such practices favor emotional issues, improving the quality of life.

"After the consultations, I try to see fun things; I go for walks, I like to be in contact with nature. It gives me relaxation and peace." A2

"I do physical therapy exercises; I have some hobbies that relax me and make me feel good." A9

"I take walks, watch movies, TV." A14

"I try to have a healthy lifestyle and contact with nature." A16

"I try to distract myself by watching television and taking short walks." A17

The reports above refer to the theory presented by Viktor Frankl concerning the categorization of values. Experiential values refer to the experiences in which love is observed or received, whether through a partner, friends, relatives, or even the love of God. This sense is realized when experiencing something in our surroundings, in cultural, artistic, and aesthetic manifestations, enjoying a good movie, watching a TV program, taking walks, perceiving and contemplating the beauty of nature, or the experiences of kindness. It is something valuable that has importance in itself. A moment of experience so full of meanings can lead to understanding something essential of existence, something beyond any actions and conduct, any realization of values through activities. It is about experiencing a strong emotion in the face of the glimpsed pure beauty. A moment of experience so full of meaning can lead us to understand something essential in existence, changing us forever (Frankl, 1989).

Spirituality as a coping resource

The Logotherapy created by Viktor Frankl emphasizes only the transcendental character of human experience and not its religious meaning. From this point of view, their investigations converge to make the spiritual dimension fruitful, intending to alleviate and overcome the disturbances of the being (Frankl, 1989).

The author was influenced by the thoughts of the philosopher Max Scheler, where spirituality is understood as a constitutive dimension of transcendence concerning life. Following this path, Logotherapy approaches spirituality as an anthropological and ontological dimension, going beyond the normative in the academic sphere of the sciences of religion. In

an attempt to remove the religious character of the concept of spirituality, Frankl (1989) chose to name it the "noetic dimension." It is known that the author sought to give a special place to this dimension, revealing that the individual is responsible and free to make his decisions and does so when he appropriates this condition, genuinely becoming himself.

Spirituality and religion have a close connection, as both terms refer to the search for the sacred. Such reflection reveals a relationship between the being and something that transcends it. Because there is this interconnection, it is often necessary to define the difference between the terms.

Spirituality is an inherent dimension of every human being and stimulates him to search for the sacred in the answers to the fundamental aspects of life. It is the dimension that places the person in front of their deepest contents, in the desire to find an answer to their existential questions. It is what makes you think about what the meaning of life would be (Gomes et al., 2014). Spirituality can also play a role in emotional support and provide a mechanism for defense for the most difficult periods of life. It contributes to coping with difficulties, tensions, and stress and promotes mental health. Such thinking corroborates Frankl's words, which he calls this process self-transcendence (Frankl, 1987).

According to Gomes et al. (2014), self-transcendence is the individual's ability to overcome himself and obstacles, with the expectation of reaching unknown realities that go beyond his limits. The author shows that religion belongs to the institutional order, while religiosity belongs to the personal dimension. Religiosity helps with the certainty that there is a greater dimension responsible for directing life's events. It enables the subject to deal with events more calmly and confidently, reducing stress and anxiety.

Religion is a sum of dogmas and organizational norms. It is composed of beliefs and rites, perceived as instruments that lead to salvation, to the transcendent. Religion includes an institutional and hierarchical form, where there is a space for socialization and a doctrine practiced among its members.

Spirituality and religious involvement can provide an increased sense of purpose and meaning in life (Frankl, 1987), associated with greater resilience and resistance to stress (Panzini & Bandeira, 2007). The different situations that volunteer psychologists face during their consultations can also be faced through spirituality. Studies emphasize that the performance of religion or spirituality are protective factors for health and quality of life since religious beliefs provide a worldview that gives meaning to experiences and can provoke positive emotions.

It is known that frequent exposure to stressful events is associated with adverse effects, and coping strategies involve personal coping styles. Panzini and Bandeira (2007) refer to religious/spiritual coping, referring to ways of coping that use religious beliefs and behaviors to help solve problems and prevent or alleviate negative emotional outcomes.

In this study, almost all the volunteers highlighted that spirituality is one of the coping mechanisms used for self-care, proving to be fundamental to maintaining harmony and balance in life.

"I always try to be at peace with my own issues. Spirituality helps me understand some things in my life and facilitates my state of tranquility." A1

Research points to the interrelationship between spiritual well-being and general health and grants the importance of integrating the spiritual to the concept of well-being (Costa et al., 2008).

Faith was also a supporting force, an essential strengthening strategy when facing difficult situations. Having a facilitating character brings comfort and self-knowledge, providing the certainty of being on the right path to help a favorable change in someone's life.

"I take care of it by going to therapy and working on my spirituality. Having faith is essential; having the belief that we are capable and that it is possible to make a difference helps me a lot." A13

Frankl (1987) examined the importance of faith during World War II when he was imprisoned in concentration camps. At the time, he set goals to give meaning to the adversities of his life. In his observations, he found that those prisoners who had no goal in their lives, no longer had a reason to endure such suffering, were destitute of meaning to keep themselves alive. Without faith and hope for the future, they put their health and survival at risk, often going so far as to throw themselves into electrified fences to end their suffering (Frankl, 1987). However, there was the choice to transform hopelessness into something positive, which depended exclusively on a personal attitude. As a lesson, the author exposes that it is essential to get out of the chaos as best we can, having hope and finding the strength to fight until the end, thus changing what apparently could be inevitable.

Psychotherapy helps overcome conflictive situations through self-knowledge and shows itself as a relationship that, even performed virtually, reveals a connection between the professional and the client. In this interpersonal relationship, the psychologist must be accessible and receptive, facilitating the interaction between them. This provides a bond of trust, well-being, and harmony, allowing the sessions to occur fruitfully. This relationship of esteem between them makes caring an act of love and pleasure. This feeling can also be related to the attempt to assign meaning to the act of welcoming.

"I try to think that there is something good and to convey comfort, empathy, and reception to my patients." A19

"Attending, welcoming the other, comforting, helping, is very connected to spirituality." A2

Caring can come as a life mission, as a specific project, loaded with potentials related to avocation. For some, it takes on a dimension that resembles a call received from God about a path to be followed. The meaning of life here refers to a discovery that starts from a personal yearning and a divine desire.

"I see my work as a life mission necessary for my evolution." A9

"My spirituality makes me feel a greater degree of responsibility towards humanity as a whole. As if God had given me that gift." A8

Spirituality can appear as a way of coping as it is a source of comfort and personal connection to a greater force (God).

"I have spiritual life (divine connection). I take care of myself (...)." A15

Another aspect of religious coping refers to asking God for help or resorting to the sacred. It is understood that God has an unconditional love for all beings and is always ready to hear the prayers or supplications of those who seek Him. In this way, it helps individuals to face adversity and, through them, to become stronger, more skilled people capable of overcoming obstacles.

"I seek strength in God, our creator. Without him, this work would not have been possible." A4

"I deeply believe in God or a loving force within me that supports me." A20

Appreciative states verified during prayers can positively affect people because this is a way of communication with the divine, with the sublime. By expressing afflictions or feelings through prayer, resources are channeled that help to capture

healthy energies for life.

Prayer seems to broaden the field of reasoning around one's limits and needs. When praying, there is an act of thanksgiving, help is requested from the divine, and difficulties are expressed (Medeiros, 2019). Prayer is a request for compassion, help for those who want to be more assertive, and aspiration that gives meaning and meaning to human existence.

"I ask God for wisdom always before starting my calls" A3

"I turn to God in my prayers." A3

"I ask in my prayers that the good spirits help these people." A7

"I say my prayers; I talk to God in my own way (...)." A11

The recognition of spirituality as an essential component of personality is a way of maintaining mental health, as observed in the responses collected.

Spirituality seems to be inherent to volunteering; however, when asked if the participant perceived a link between spirituality and volunteer work, the majority (80%) perceive it. The answer "no" and "maybe" added up 20% participants. The data may reveal a degree of confusion between what spirituality and religion are. Although connected and having different meanings, such concepts are still misunderstood by many. Voluntary work can be understood, due to its structure, as a potential performer of the human being in the scope of spirituality.

5. Conclusion

There are many challenges of being a psychologist, and by focusing on self-care, we seek to build a more comprehensive view of the incipient theme in Brazil and the literature in general. It is still necessary to invest more in studies on the mental health of psychologists and their well-being. It is worth noting that professionals need to have a clear notion that their psychic health can be affected by their work, and this fact should trigger the incentive not to neglect themselves.

This study addressed some forms of coping used to face stressful life circumstances. Coping behaviors and self-care provide relaxation. For those who deal with constant anguish and suffering, taking care of themselves is educating themselves and making choices conducive to their emotional, physical, intellectual, social, and spiritual well-being. The participants recognized that the effects of recreational and physical activities in promoting and maintaining health are fundamental to reducing stress levels, improving the quality of life. Spirituality, faith, and transcendence were evidenced as fundamental elements in the experience of well-being and overcoming the tribulations of life.

The importance of using the resources of the spiritual dimension was verified, corroborating that spirituality is one of the sources of strength to live and believe in God, including through prayer, confidence, support, and guidance to overcome life's obstacles. Faith was related as a foundation for well-being, allowing a more positive view of life, with hope and comfort, especially in a period of social isolation. Focusing on spirituality helps people understand and see the volunteer work they develop differently. Spiritual well-being, therefore, can strengthen a person so that moments of crisis can be overcome.

It is worth mentioning that 30% of the participants declared that they did not practice their religion, a fact that corroborates that spirituality is not necessarily linked to religious practices. Volunteering is an expression of spirituality, because it aims to reach and benefit people in a dedicated and humanitarian way. Committing voluntarily is giving an answer to an inner call, regardless of religion. To be supportive and altruistic is to have, above all, an attitude towards life, following the steps of the chosen journey.

In the training of psychology professionals, religiosity and spirituality are not usually addressed. However, with the reflection made in this study, we realize that this is a theme that needs to be included in the academic and continuing education curricula. More studies in the area are necessary for a better understanding of belief systems, religious practices, and their ethical implications in the context of psychology.

Study limitations

One of the limitations of the present study is that the results are based on evidence related to a time interval during the emergence of the Covid-19 pandemic. In this way, outcomes may differ over time. It is worth noting that since the questionnaire is entirely virtual, it did not allow taking field notes or helping the participants in case of doubt, restricting the knowledge of the circumstances in which the questionnaire was answered. It is suggested that this study can be expanded and carried out at another time, with data collected outside the context of the pandemic, through face-to-face interviews, for comparison with the data found here.

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References

- Andrade, C. C., & Holanda, A. F. (2010). Apontamentos sobre pesquisa qualitativa e pesquisa empírico-fenomenológica. *Estudos de Psicologia*, 27(2), 259-268. <https://doi.org/10.1590/S0103-166X2010000200013>
- Bimont, D., & Werbart, A. (2018). I've got you under my skin: Relational therapists' experiences of patients who occupy their inner world. *Counselling Psychology Quarterly*, 31(2), 243-268. <https://doi.org/10.1080/09515070.2017.1300135>
- Calvetti, P. Ü., Muller, M. C., & Nunes, M. L. T. (2008). Qualidade de vida e bem-estar espiritual em pessoas vivendo com HIV/AIDS. *Psicologia em Estudo*, 13(3), 523-530. <https://www.scielo.br/j/pe/a/7DFQk9T4bxdR9Lqb9pzhLZQ/?lang=pt>
- Cosenza, T. R. dos S. B., Pereira, E. R., Silva, R. M. C. R. A., & Medeiros, A. Y. B. B. V. (2021). Challenges of Telepsychology in the context of online psychotherapeutic care during the Covid-19 pandemic. *Research, Society and Development*, 10(4), e52210414482. <https://doi.org/10.33448/rsd-v10i4.14482>
- Costa, B. R. L. (2018). Bola de neve virtual: O uso das redes sociais virtuais no processo de coleta de dados de uma pesquisa científica. *Revista Interdisciplinar de Gestão Social*, 7(1).
- Costa, C. C. D., Bastiani, M. D., Geyer, J. G., Calvetti, P. Ü., Muller, M. C., & Moraes, M. L. A. D. (2008). Calidad de vida y bienestar espiritual en universitarios de Psicología. *Psicologia em Estudo*, 13(2), 249-255. <https://doi.org/10.1590/S1413-73722008000200007>
- Dittrich, L. F., & Oliveira, M. F. L. (2019). Dimensão Noética: As Contribuições da Logoterapia Para a Compreensão do Ser Humano. *Revista Brasileira de Tecnologias Sociais*, 6(2), 143-160. <https://doi.org/10.14210/rbts.v6n2.p143-160>
- Fernandes, E., & da Costa Maia, Â. (2008). Impacto do exercício de psicoterapia nos psicoterapeutas. *Análise Psicológica*, 26(1), 47-58. http://scielo.pt/scielo.php?script=sci_arttext&pid=S0870-82312008000100004&lng=pt&nrm=iso
- Frankl, V. E. (1987). *Em busca de sentido: um psicólogo no campo de concentração* (Vol. 3). Sulina.
- Frankl, V. E. (1989). *Psicoterapia e sentido da vida: fundamentos da logoterapia e análise existencial*. Quadrante.
- Gomes, N. S., Farina, M., & Forno, C. D. (2014). Espiritualidade, religiosidade e religião: reflexão de conceitos em artigos psicológicos. *Revista de Psicologia da IMED*, 6(2), 107-112. <http://dx.doi.org/10.18256/2175-5027/psico-imed.v6n2p107-112>
- Holanda, A., & Andrade, C. (2013). Apontamentos sobre pesquisa qualitativa e pesquisa empírico-fenomenológica (Notes on qualitative research and empirical phenomenological research). *Estudos de Psicologia* (Campinas), 27, 259-286.
- Medeiros, A. Y. B. B. V. D. (2019). *A percepção do sentido da vida para o paciente com câncer: um olhar logoterapêutico*. Master's Thesis, Postgraduate Program in Health Care Sciences - Aurora de Afonso Costa Nursing School. Federal Fluminense University. <https://app.uff.br/riuff/handle/1/11103>.
- Minayo, M. C. S., & Gomes, R. (2013). *Pesquisa Social: teoria, método e criatividade*. 33th ed. Rio de Janeiro: Vozes.
- Mota, A. B. C. (2017). *O autocuidado do psicólogo clínico: equilíbrio entre a vida pessoal e profissional*. Master's Thesis, Integrated Master's Program in Psychology. University of Lisbon. https://repositorio.ul.pt/bitstream/10451/33255/1/ulfpie052857_tm.pdf

- Nissen-Lie, H. A., Orlinsky, D. E., & Rønnestad, M. H. (2021). The emotionally burdened psychotherapist: Personal and situational risk factors. *Professional Psychology: Research and Practice*. <https://doi.org/10.1037/pro0000387>
- Panzini, R. G., & Bandeira, D. R. (2007). Coping (enfrentamento) religioso/espiritual. *Archives of Clinical Psychiatry*, 34, 126-135. <https://doi.org/10.1590/S0101-60832007000700016>
- Schmidt, B., Crepaldi, M. A., Bolze, S. D. A., Neiva-Silva, L., & Demenech, L. M. (2020). Saúde mental e intervenções psicológicas diante da pandemia do novo coronavírus (Covid-19). *Estudos de Psicologia (Campinas)*, 37. <https://doi.org/10.1590/1982-0275202037e200063>.
- Simionato, G. K., & Simpson, S. (2018). Personal risk factors associated with burnout among psychotherapists: A systematic review of the literature. *Journal of clinical psychology*, 74(9), 1431-1456. <https://doi.org/10.1002/jclp.22615>
- Tavares, C. Q., Valente, T. C., Cavalcanti, A. P. R., & de Oliveira Carmos, H. (2016). Espiritualidade, Religiosidade e Saúde: velhos debates, novas perspectivas. *Interações*, 11(20), 85-97. <https://doi.org/10.5752/P.1983-2478.2016v11n20p85>.
- Thompson, B., & Vivino, B. (2019). An independent practice does not need to be an isolated practice: Increasing connection as a method of self-care in private practice. *Psychotherapy Bulletin*, 54(4), 5-9. <https://societyforpsychotherapy.org/wp-content/uploads/2020/01/Bulletin-54-4.pdf>
- Vinuto, J. (2014). A amostragem em bola de neve na pesquisa qualitativa: um debate em aberto. *Temáticas*, 22(44), 203-220. <https://doi.org/10.20396/tematicas.v22i44.10977>