



mending of the entire individual. Difficulty frequently

following stage inspects the patient's way of life perspectives that try not to stand up to mortality and propagate dread and strife. The following stage includes an attention on looking for divine reason, subsequent to inspecting and tolerating one's excursion throughout everyday life. At long last, importance is looked for by looking for significance for every day. This is accomplished by recognizing meaningful and realistic factors within whatever limitations life and illness bring. The main techniques are empathic listening, facilitation of emotional expression and problem solving. The use of meditation, prayers and rituals together with monitoring effects of beliefs and rituals on symptoms form the behavioural components of the treatment. When the patient shows negative cognition, cognitive restructuring is employed. Generally, the treatment takes about 16 sessions, each lasting about 1 hour. The main indications are depression and adolescent problems. Randomized controlled trials show that SACBT produces significant improvement.

Lukof D, Lu F, Turner R. (1992). Toward a more culturally sensitive DSM-IV. Psychoreligious and psychospiritual problems. *J Nerv Ment Dis*, 180:673-82.

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